



PATIENT

Teddy Birdsall

SPECIES

Canine

BREED

Lab

SEX

MN

AGE

9 years

WEIGHT

105 lbs.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Animal General
Hudson

REFERRING VET

Dr. Ng

INVOICE

13690

DATE

4/20/22

PRESENTING CLINICAL SIGNS

Elevated ALT, check liver

Abnormal PE/Chem/CBC/UA Results: ALT 128, ALT 180 on 4/14/22, elevated cholesterol

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 5.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 0.86 cm in width.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 7.0 cm in length. The right kidney measured 6.6 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 3.6 cm length x 1.2 cm width at the caudal pole. The right adrenal gland was indistinctly visualized owing to patient size, yet without overt pathology. The right adrenal gland subjectively measured 3.3 cm length x 0.72 cm width at the caudal pole.

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Intermittent, echogenic nodules were present throughout the medial parenchyma and adjacent to the medial capsule. An example of a splenic nodule measured 1.2 cm in diameter. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

Liver/ Gallbladder

The liver exhibited subjective mild enlargement. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild gallbladder debris. The cystic and common bile ducts were normal.



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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction, or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction, or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Low-grade hepatopathy
- Mild gallbladder debris (non-mucocele) - nonspecific and likely incidental potentially owing to fasting or mild non-clinical cholestasis
- Benign splenic nodules - consistent with benign myelolipomas with potential mild medial capsule fibrosis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall appearance of the liver was nonspecific yet consistent with benign low-grade hepatopathy. Although not definitive, primary consideration for low-grade nonspecific inflammatory hepatopathy, given the ALT elevation, vs. other benign hepatopathy and without evidence of neoplastic criteria.

Assuming normal clotting status, hepatic FNA could be considered for screening cytology, primarily to assess for or possibly identify inflammatory cell type. If present, given the relatively low-grade ALT elevation, hepatosupportive medications including Ursodiol, given the presence of mild gallbladder debris and due to its antioxidant and immunomodulatory effects within the liver would be reasonable with continued monitoring of hepatic enzymes. Leptospirosis titers / PCR may be considered if endemic to the area or potential exposure.



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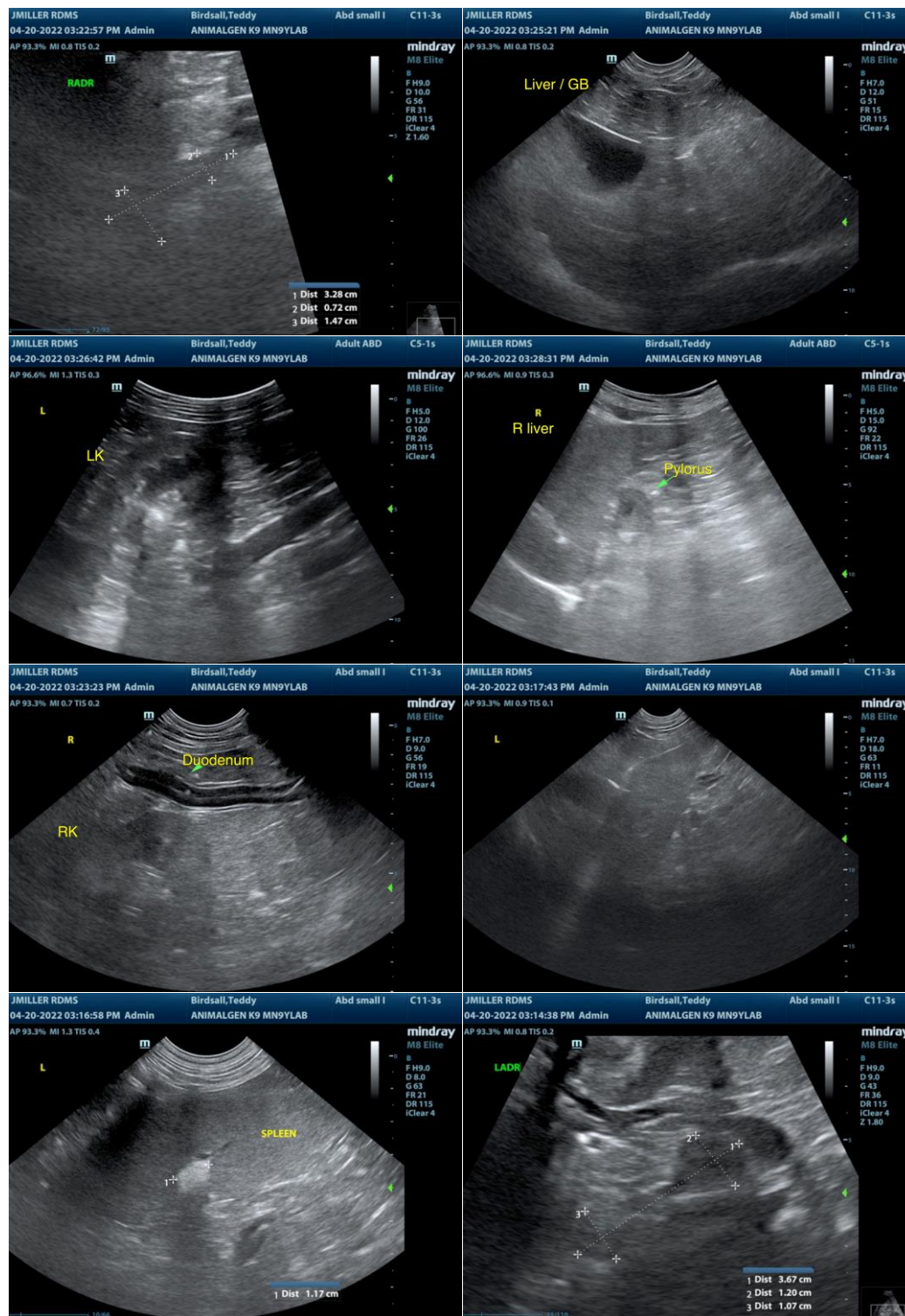
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I can be of any further assistance please contact me.

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