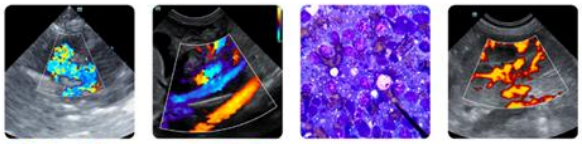


PATIENT
Missy Hurd

SPECIES
Canine

BREED
Yorkie

SEX
FS

AGE
14yr

WEIGHT
11.7lb

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

IMAGING PERFORMED BY
Christina CVT

HOSPITAL NAME
Animal Health Veterinary Clinic

REFERRING VET
Dr Rodriguez

INVOICE
24582

DATE
04/23/2026

PRESENTING CLINICAL SIGNS

- P referred from local animal hospital for abdominal ultrasound due to elevated liver enzymes

- P is on Denamarin, Proin and Phenobarbital

Abnormal PE/Chem/CBC/UA Results: 4/22/26 - Glucose - 200, TP - 7.9, Globulin - 4.5, ALT - 145, ALKP - 1814, GGTP - 18

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.1 cm in length. The right kidney measured 4.5 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The bilateral adrenal glands were borderline to mild enlarged in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.63 cm width in the caudal pole. The right adrenal gland measured 0.56 cm width in the caudal pole.

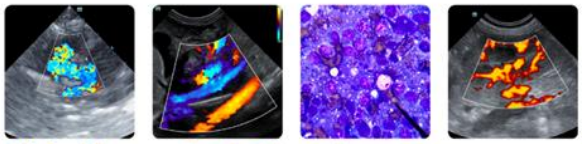
Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. 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, neoplastic, or benign parenchyma changes were not noted.

Liver/Gallbladder

The liver presented increased in size. Generalized non-homogenous hyperechoic hepatic parenchyma exhibiting multifocal to diffuse non-disruptive hypoechoic to non-homogenous intraparenchymal nodules. An example of a liver nodule measured 0.8 cm in diameter. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with moderate congealed non-organized debris. The cystic and common bile ducts were normal.

Gastrointestinal



PATIENT

Missy Hurd

SPECIES

Canine

BREED

Yorkie

SEX

FS

AGE

14yr

WEIGHT

11.7lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Christina CVT

HOSPITAL NAME

Animal Health Veterinary Clinic

REFERRING VET

Dr Rodriguez

INVOICE
24582

DATE
04/23/2026

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 mechanical/metabolic ileus, obstruction or foreign material.

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

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary

- Enlarged non-homogenous hyperechoic liver with multifocal/ diffuse hypoechoic nodules- chronic vacuolar / cholestatic hepatopathy, chronic hepatitis /cholangiohepatitis, lipidosis, hyperplasia, fibrosis, neoplasia all potentials
- Borderline/ mild adrenomegaly- benign
- Congealed, non-organized gallbladder debris- not consistent with mature mucocele
- Mild pancreatic remodeling
- Bilateral chronic renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology is warranted for further assessment. Adrenal workup with LDDST warranted if clinical signs consistent with Cushing's syndrome are present. Contribution to the hepatopathy if chronic phenobarbital therapy is possible. Hepatic biopsy for histopathology would be required for definitive diagnosis.

Hepatosupportive medications with monitoring of the liver and gallbladder for evidence of progressive parenchymal changes or if evidence of progressive hepatopathy or cholestasis would be more conservative.

PATIENT

Missy Hurd

SPECIES

Canine

BREED

Yorkie

SEX

FS

AGE

14yr

WEIGHT

11.7lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Christina CVT

HOSPITAL NAME

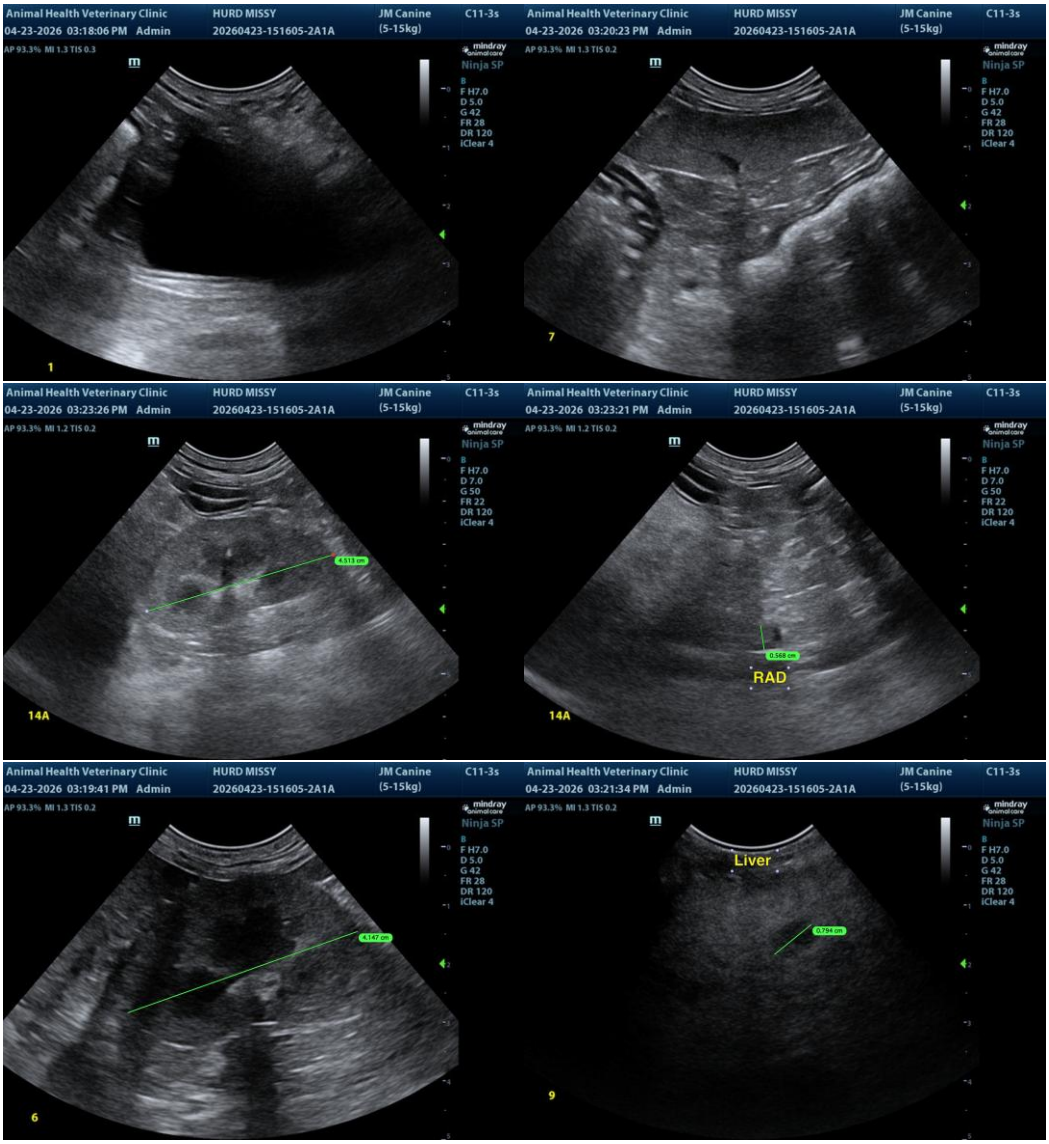
Animal Health Veterinary Clinic

REFERRING VET

Dr Rodriguez

INVOICE
24582

DATE
04/23/2026



PATIENT

Missy Hurd

SPECIES

Canine

BREED

Yorkie

SEX

FS

AGE

14yr

WEIGHT

11.7lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Christina CVT

HOSPITAL NAME

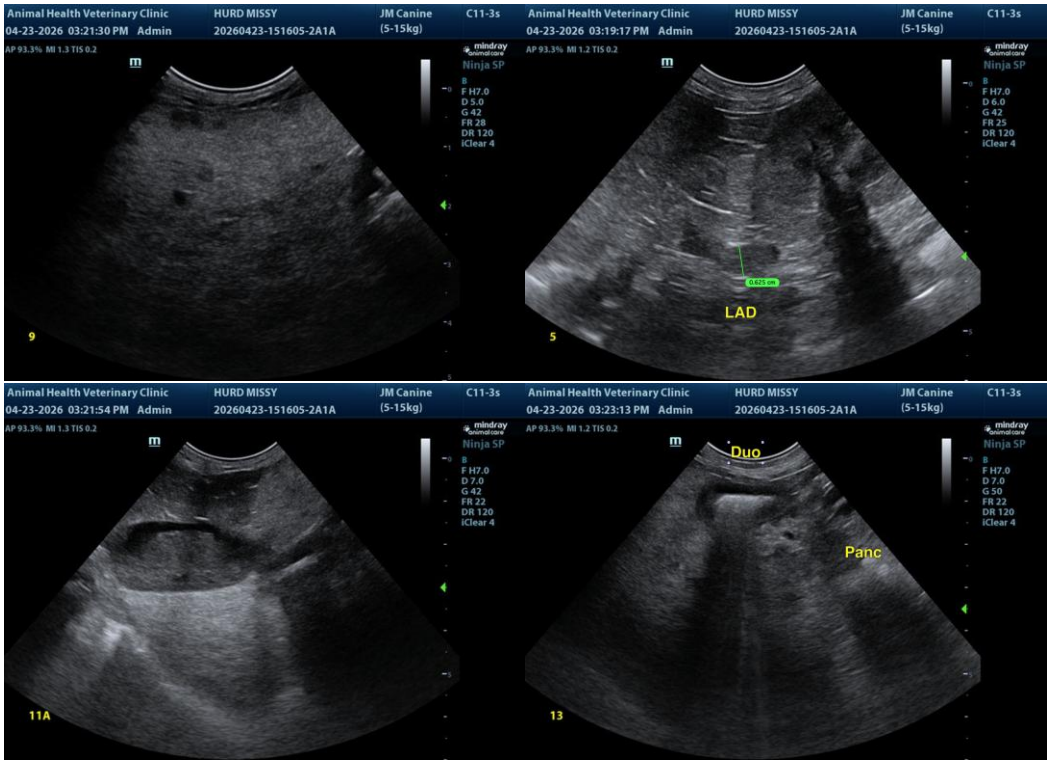
Animal Health Veterinary Clinic

REFERRING VET

Dr Rodriguez

INVOICE
24582

DATE
04/23/2026



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.

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.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com