



PATIENT	PRESENTING CLINICAL SIGNS
Vito Landree	Non clinical elevated liver enzymes on pre dental assessment
SPECIES	Abnormal PE/Chem/CBC/UA Results: Mild elevation of liver enzymes. Pre prandial bile acids 70 (range to 29) and postprandial 31.5 (same range) Renal enzymes normal
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Chihuahua	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild non-dependent hyperechoic sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.
SEX	
MN	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. Minor areas of medullary mineral was present with no evidence of nephrolithiasis. Bilateral small cortical cysts were present. The left kidney measured 4.4 cm in length. The right kidney measured 4.3 cm in length.
AGE	
5	The area of the aortic trifurcation was free of pathology.
WEIGHT	The area of the residual prostate appeared normal and free of pathology.
6.6kg	Adrenal Glands
INTERPRETED BY	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.51 cm width at the caudal pole and 0.46 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.65 cm width at the caudal pole and 0.55 cm width at the cranial pole.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Spleen
IMAGING PERFORMED BY	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.
Dr. Belan	Liver/Gallbladder
HOSPITAL NAME	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. Normal hepatic vascular volume. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with minor echogenic non-organized debris. No evidence of gallbladder or peripheral gallbladder inflammation was present. The common bile ducts was not definitively visualized.
Beddington Trail AH	Gastrointestinal
REFERRING VET	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.
Dr. Banahur	
INVOICE	
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DATE	
04/24/2023	



PATIENT

Vito Landree

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.

SPECIES

Canine

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 was evident.

BREED

Chihuahua

Free Abdomen

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

SEX

MN

ULTRASONOGRAPHIC FINDINGS

- Sonographically unremarkable liver with normal/adequate vascular volume.
- Gallbladder sludge (non-mucocele).
- Minor renal medullary mineral and cortical cysts.
- Minor hyperechoic urinary bladder sediment.

AGE

5

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

6.6kg

Low grade benign hepatopathy pattern with potentials including vacuolar hepatic changes, inflammatory hepatopathy or other. No evidence of intrahepatic or extrahepatic shunt. Minor potential for portal hypoplasia/microvascular dysplasia cannot be excluded. Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology could be considered primary to assess for inflammatory cells if present. A core surgical biopsy is required for a definitive diagnosis.

INTERPRETED BY

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

The higher pre-prandial bile acid level is non-specific and may be secondary to gallbladder contraction, variations in gastric emptying or intestinal transit.

No overt anesthetic contraindications assuming evidence of adequate hepatic function i.e., normal BUN, GLU, CHOL and ALB levels.

IMAGING PERFORMED BY

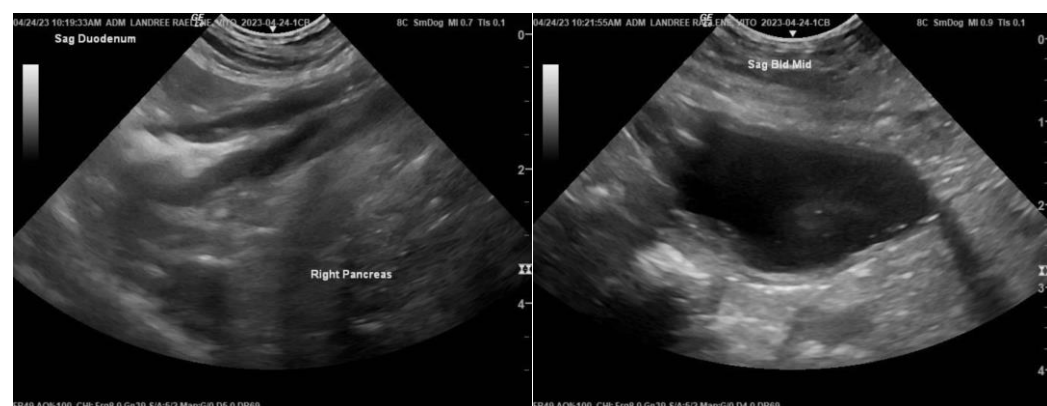
Dr. Belan

Cystocentesis for UA +/- C/S if evidence of inflammatory cells or baseline UPC if evidence of proteinuria is suggested.

Hepatosupportive medications such as Denamarin may prove beneficial.

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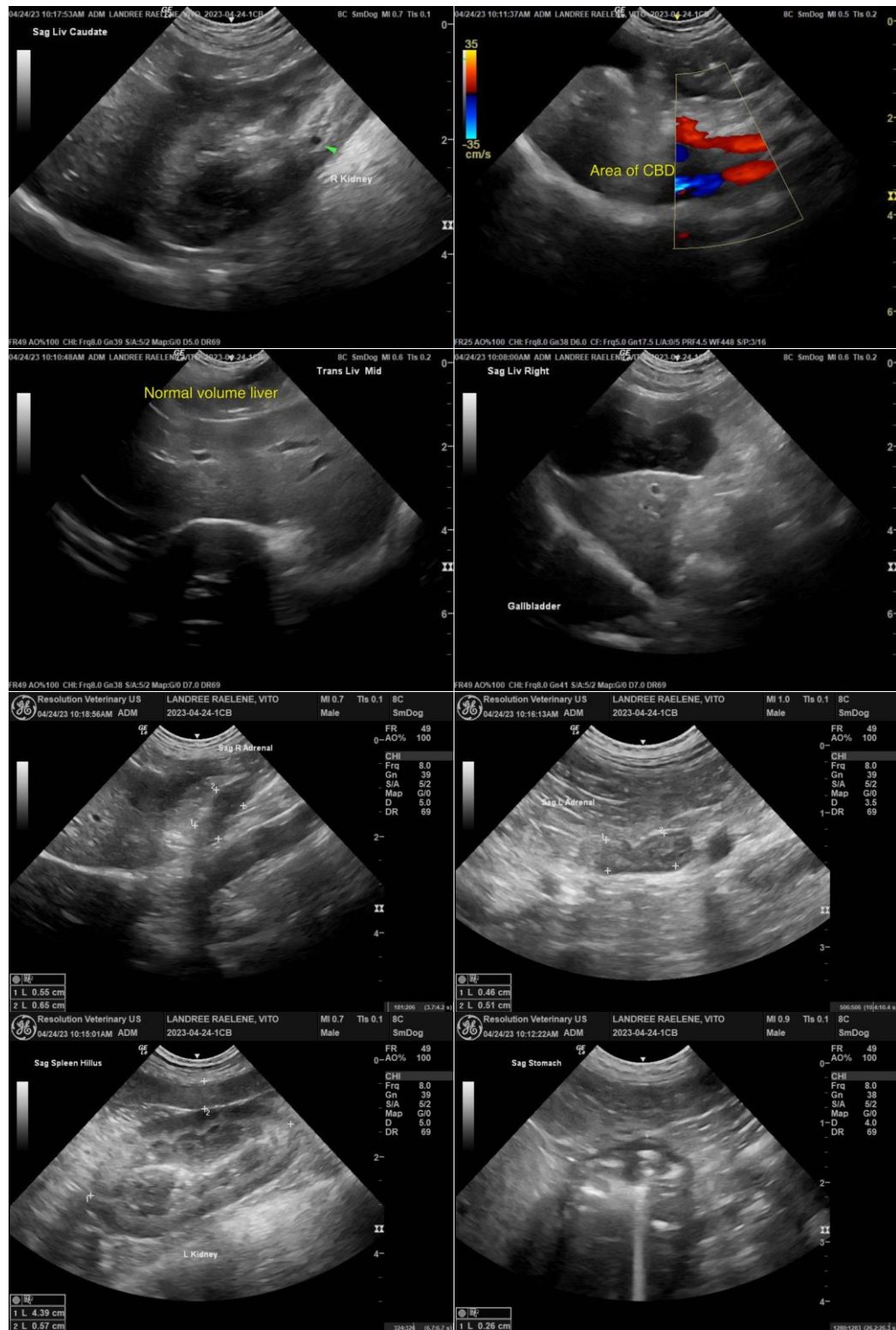
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



PATIENT

Vito Landree

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.

SPECIES

Canine

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)

mac.daniel@sonopath.com

BREED

Chihuahua

SEX

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AGE

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WEIGHT

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