



**PATIENT**

Luna Wagner

**SPECIES**

Canine

**BREED**

Chihuahua

**SEX**

Female

**AGE**

2

**WEIGHT**

11.5

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Sharkaway

**HOSPITAL NAME**

Kew Gardens AH

**REFERRING VET**

Dr. Sharkaway

**INVOICE**

16556

**DATE**

4/8/23

**PRESENTING CLINICAL SIGNS**

Epilepsy attacks-happens twice within 1 year  
Abnormal PE/Chem/CBC/UA Results: Blood work-within normal limits Radiograph-small liver Bile acid test-pre-2.6, post 13.3

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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. No evidence of mineral or calculi was noted.

No evidence of pathology associated with the uterus or bilateral ovaries, if intact female.

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 3.3 cm in length. The right kidney measured 3.4 cm in length. No evidence of renal mineralization or calculi was noted.

**Adrenal Glands**

No overt pathology was noted in the area of the left or right adrenal glands.

**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 exhibited subjective mild subnormal size with subjective adequate hepatic vascular volume. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The visualized portal vein appeared to exhibit normal volume with subjective normal cranial branching. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**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.



**PATIENT**

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

Luna Wagner

**Pancreas**

**SPECIES**

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.

Canine

**BREED**

**Free Abdomen**

Chihuahua

No overt lymphadenopathy or peritoneal effusion was present.

**SEX**

**ULTRASONOGRAPHIC FINDINGS**

Female

- Subnormal liver size exhibiting subjective adequate vascular volume

**AGE**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

2

No overt evidence of intrahepatic or extrahepatic macro shunting. Subjective normal portal vein volume and cranial branching were present. Given hepatic presentation in conjunction with a lack of clinical signs and post prandial bile acids within normal limits, a non-visualized portosystemic shunt is considered unlikely. Likewise, suspect adequate hepatic function in light of bile acid testing and assuming normal BUN, cholesterol, glucose, and albumin levels.

**WEIGHT**

11.5

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Sharkaway

**HOSPITAL NAME**

Kew Gardens AH

**REFERRING VET**

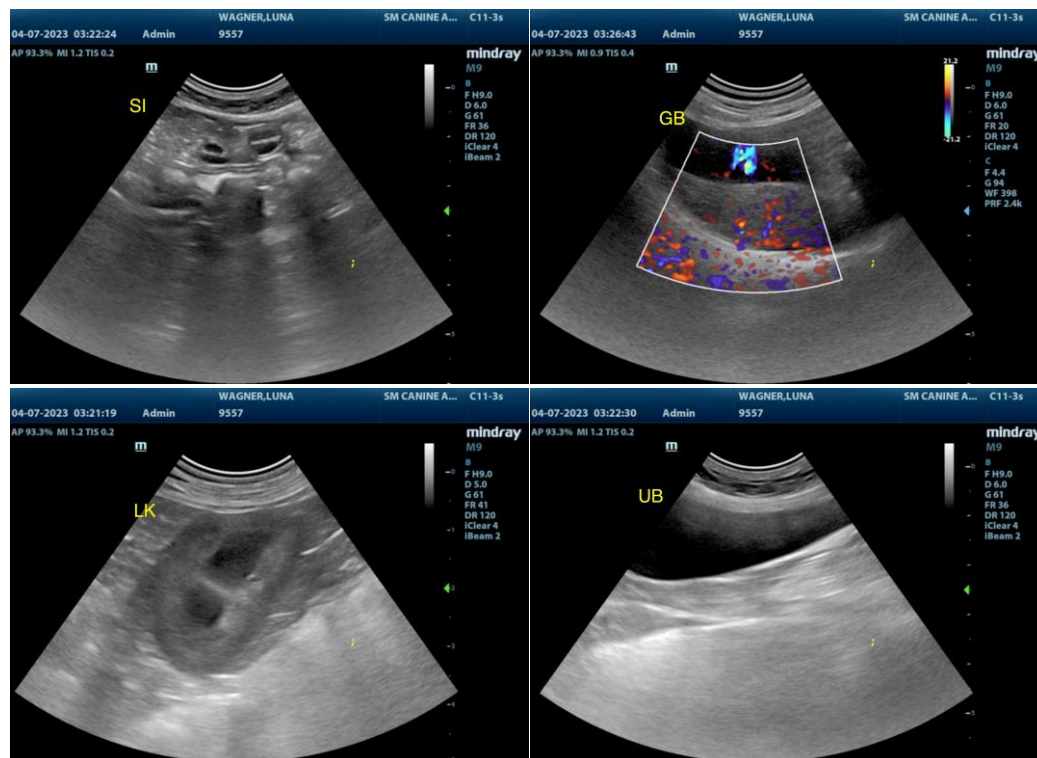
Dr. Sharkaway

**INVOICE**

16556

**DATE**

4/8/23





## PATIENT

Luna Wagner

## SPECIES

Canine

## BREED

Chihuahua

## SEX

Female

## AGE

2

## WEIGHT

11.5

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Sharkaway

## HOSPITAL NAME

Kew Gardens AH

## REFERRING VET

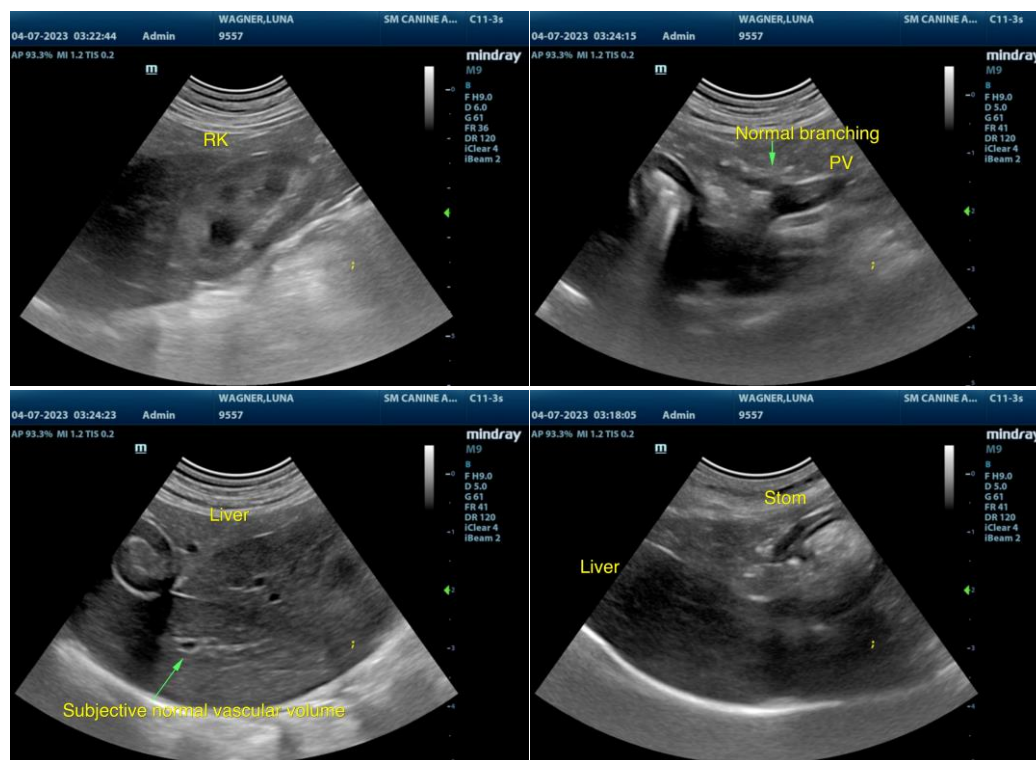
Dr. Sharkaway

## INVOICE

16556

## DATE

4/8/23



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