



PATIENT

Jasper Descoteaux

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

MN

AGE

7yr

WEIGHT

31.7lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Karen Ebersole, DVM,
DABVP
(Canine/Feline
Practice)

HOSPITAL NAME

Scanvet

REFERRING VET

Dr. Chadbourne

INVOICE

13664ag

DATE

05/01/2023

PRESENTING CLINICAL SIGNS

Elevated ALP, increased >2x since December 2022. No clinical signs. History of uroliths.

Abnormal PE/Chem/CBC/UA Results: ALP 1,062 ALP 464 (Dec. 2022) Rest of BW WNL. UA pending, being collected today.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild primarily dependent mineral to residual small calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

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 5.4 cm in length. The right kidney measured 6.0 cm in length.

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate appeared normal and free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.54 cm width at the caudal pole and 2.0 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.60 cm width at the caudal pole and 2.7 cm length.

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 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. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with minor echogenic luminal debris. 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.



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

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Pancreas

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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.

Canine

Free Abdomen

BREED

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

Miniature Schnauzer

ULTRASONOGRAPHIC FINDINGS

SEX

- Benign hepatopathy.
- Gallbladder debris (non-mucocele).
- Mild residual urinary bladder mineral/small calculi.
- Normal bilateral kidneys/adrenal glands.

MN

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

Overall, there is no overt evidence of significant abdominal visceral pathology.

7yr

Although non-specific, the sonographic appearance of the liver is suggestive of vacuolar hepatopathy pattern with potential for non-obstructive cholestasis with cholangiohepatitis possible. Hepatosupportive medications such as Denamarin and Ursodiol may prove beneficial.

WEIGHT

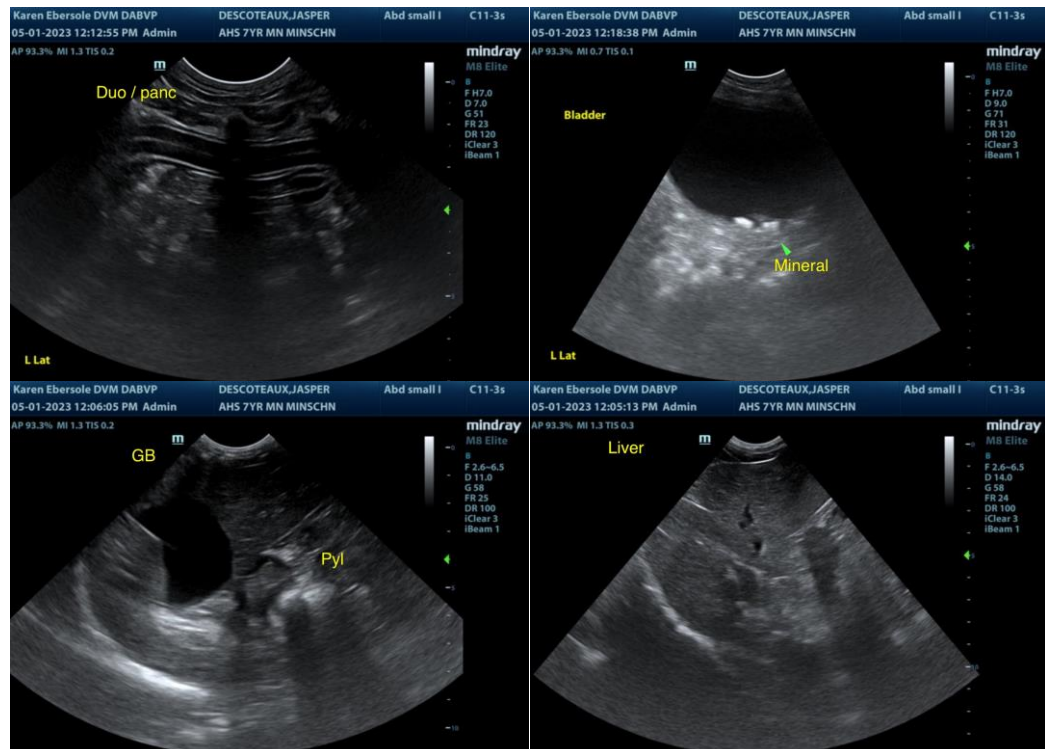
No evidence of intra-abdominal neoplastic criteria. Urine C/S pending UA may be considered. No evidence of primary adrenal disease given normal adrenal presentation and lack of clinical signs. No anesthetic contraindications.

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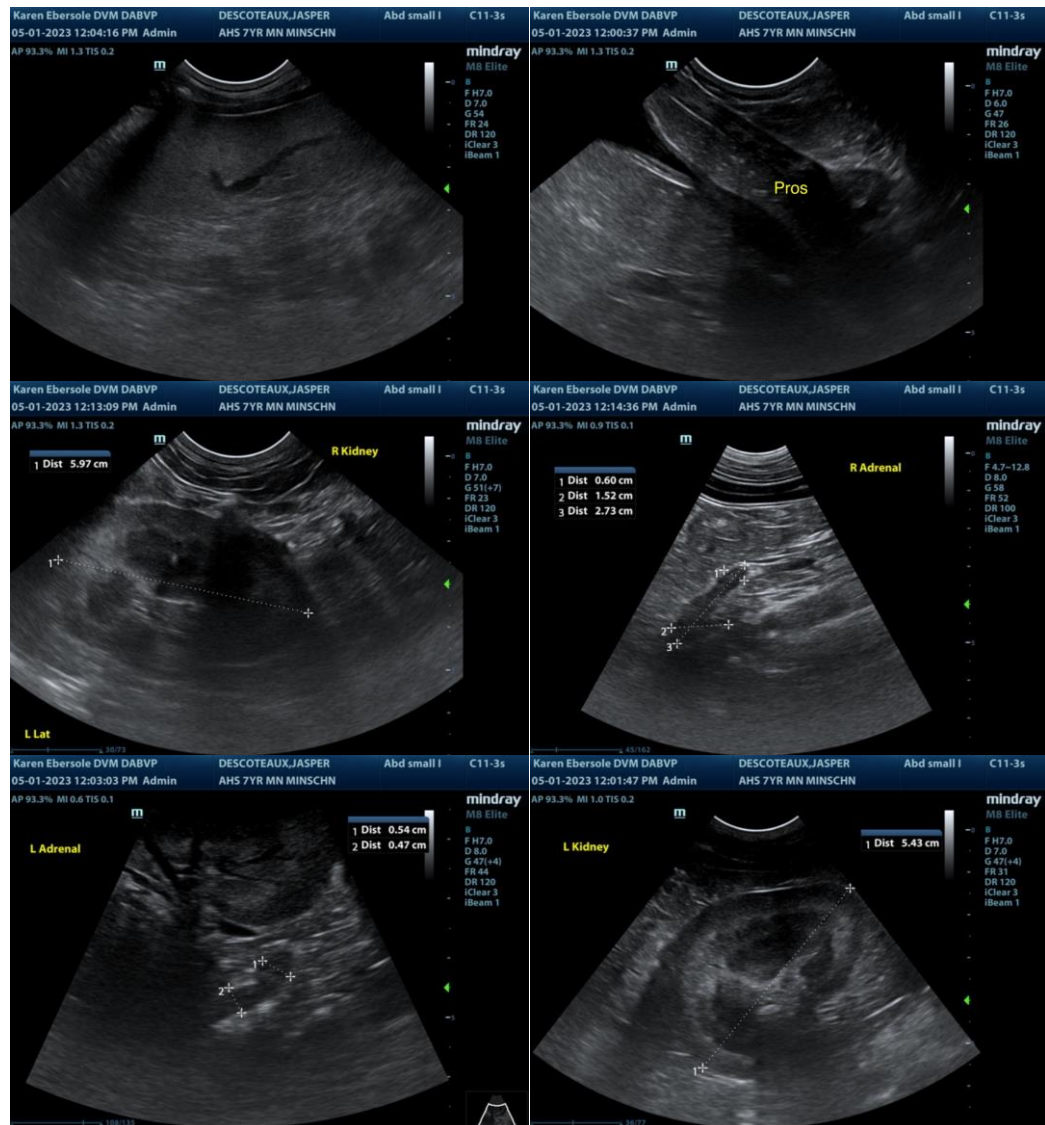
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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