



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Tessa Laffoley	Recheck US from 2/28/22. Has been on Tramadol, Meloxadin, Liver support, Ursodial and Hepato Support.
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: n/a
Canine	
<b>BREED</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Cairn Terrier	<b>Urinary System</b>
<b>SEX</b>	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.
FS	The area of the aortic trifurcation was free of pathology.
<b>AGE</b>	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 3.8 cm in length. The right kidney measured 4.6 cm in length.
<b>WEIGHT</b>	<b>Adrenal Glands</b>
19.1 lbs.	The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry were present without suspicion for overt neoplasia. The left adrenal gland measured 2.0 cm length x 0.72 cm width in the caudal pole. The right adrenal gland measured 1.8 cm length x 0.48 cm width in the caudal pole.
<b>INTERPRETED BY</b>	<b>Spleen</b>
R. McKenzie Daniel, DVM, DABVP	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.
<b>IMAGING PERFORMED BY</b>	<b>Liver/ Gallbladder</b>
Crystal Hill	The liver exhibited mild to moderate generalized enlargement, more prominent in the mid to right liver, with right mid to lateral and caudate lobar swelling. Nonhomogeneous parenchyma exhibiting moderate coarse echotexture and evidence of parenchymal remodeling were present. Intermittent hypoechoic intraparenchymal nodules were noted primarily in the area of the right liver, without evidence of associated capsule distortion. Regional areas of hepatic asymmetrical capsule contour were present. An example of a hypoechoic intraparenchymal nodule measured 1.5 cm in diameter. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
<b>HOSPITAL NAME</b>	
The Maples AH	
<b>REFERRING VET</b>	
Dr. Kazienko	
<b>INVOICE</b>	
13844	
<b>DATE</b>	
5/11/22	



**PATIENT**

***Gastrointestinal***

Tessa Laffoley

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.

**SPECIES**

Canine

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 semi-formed feces in lumen.

**BREED**

***Pancreas***

Cairn Terrier

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.

**SEX**

FS

***Free Abdomen***

**AGE**

13 years

No overt lymphadenopathy was present. The omentum exhibited uniform echogenicity. No overt evidence of perihepatic or peritoneal free fluid was noted.

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

19.1 lbs.

- Heterogeneous nodular to irregular liver, more prominent in the right liver lobes
- Sonographically unremarkable gallbladder
- Static mild chronic renal changes

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Subjectively, the overall liver appeared to be sonographically similar to the previous study with potential for mildly progressive right to caudate liver enlargement to lobar swelling, as well as potentially mildly progressive heterogeneous to nodular parenchymal changes. Previously mentioned potential etiologies are still applicable with a stronger concern for potential neoplastic criteria. If not done previously, or for further assessment, ultrasound-guided FNA of the liver, specifically in the area of the right liver lobar enlargement to swelling and an intraparenchymal nodule is recommended. A hepatic core surgical biopsy may be required for a definitive diagnosis.

**IMAGING PERFORMED BY**

Crystal Hill

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Empirically, continued hepatosupportive medications would be reasonable with continued sonographic monitoring for evidence of progressive hepatic changes and enlargement.

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**PATIENT**

Tessa Laffoley

**SPECIES**

Canine

**BREED**

Cairn Terrier

**SEX**

FS

**AGE**

13 years

**WEIGHT**

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**INTERPRETED BY**

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DVM, DABVP

**IMAGING  
PERFORMED BY**

Crystal Hill

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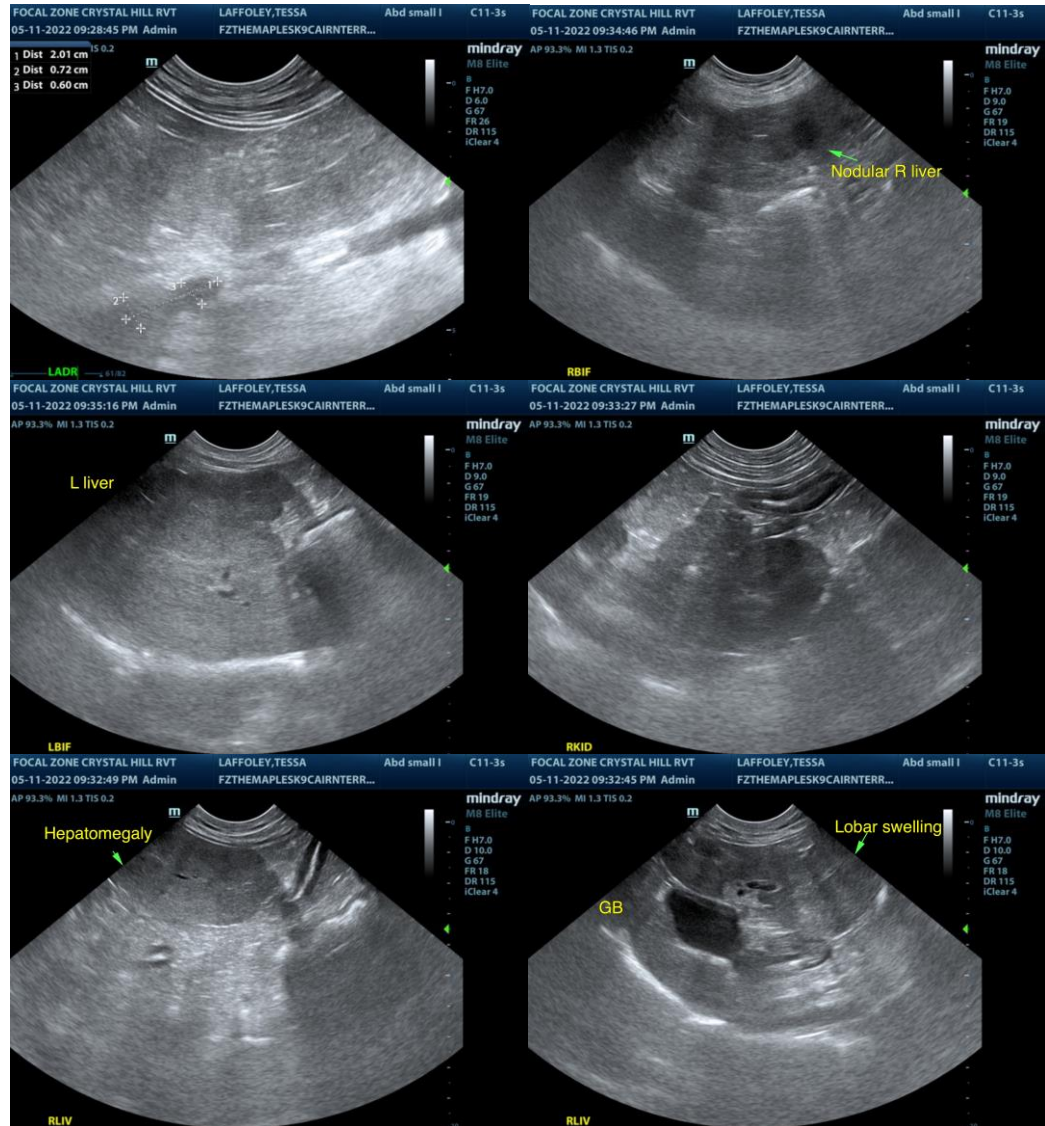
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**PATIENT**

Tessa Laffoley

**SPECIES**

Canine

**BREED**

Cairn Terrier

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**AGE**

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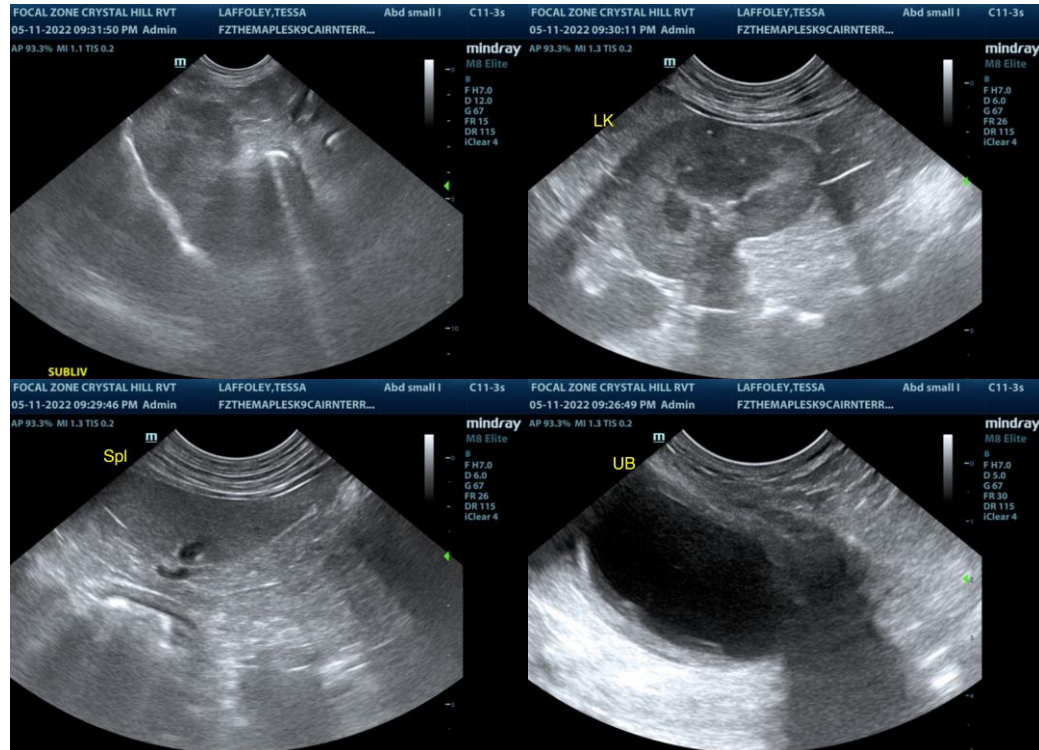
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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