



PATIENT

McLovin Mulligan

SPECIES

Canine

BREED

Pitbull

SEX

Neutered Male

AGE

13 Years

WEIGHT

75

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Suci

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

Dr. Singh

INVOICE

16431

DATE

05/22/26

PRESENTING CLINICAL SIGNS

McLovin He was seen 5/21 for vomiting, inappetence, and lethargy that began on Tuesday.

Abnormal PE/Chem/CBC/UA Results: Markedly elevated liver values were noted. AST: 1,400 U/L (reference range up to 66 U/L) ALT: 4,500 U/L (reference range up to 118 U/L) Alkaline Phosphatase: 4,300 U/L (reference range up to 131 U/L) Total Bilirubin: 11 mg/dL (reference range up to 0.3 mg/dL) Kidney values and electrolytes are within normal limits. Complete Blood Count: Mild neutrophilia, consistent with a stress leukogram. Patient is very icteric

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 change were noted.

No obvious pathology in the area of the residual prostate.

Normal size and margination was 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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Areas of medullary mineral were present. The left kidney measured 7.1 cm in length. The right kidney measured 6.8 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.74 cm width at the caudal pole.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.69 cm width at the caudal pole.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

Liver & Gallbladder

The liver presented normal in size with capsule asymmetry. The parenchyma of the liver was variable in echogenicity compared to the spleen and renal cortices with mild to variable nonuniform to patchy echotexture. Reduced distinction and visualization of the portal structures was present. A mildly expansive nonhomogenous hyperechoic to cystic liver nodule was present in the subjective mid caudal liver measuring approximately 3.5 cm in diameter.



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The gallbladder was significantly distended in size with normal wall without evidence of wall edema. The gallbladder lumen was primarily occupied by congealed to emerging nonmineralized nonhomogenous debris with suspect peripheral mucus. No visualized evidence of pericholecystic effusion. The common bile duct was not visualized.

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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.

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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.

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.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

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ULTRASONOGRAPHIC FINDINGS

- Acute on chronic hepatopathy pattern exhibiting significant non-uniform parenchyma, non-homogenous cystic hepatic nodule.
- Markedly distended gallbladder with congealed, mildly organized gallbladder debris, occupying a majority of the gallbladder lumen.
- Empty gastrointestinal tract.
- Chronic renal changes exhibiting mild medullary mineral.
- Normal bilateral adrenal glands.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The gallbladder meets neoplastic criteria with concurrent acute on chronic hepatopathy with considerations including acute on chronic vacuolar or cholestatic hepatopathy, hepatitis, fibrosis, cirrhosis, cystic nodular hyperplasia, lipogranuloma, or possible concurrent hepatic neoplasia are all potentials. No evidence of gastrointestinal or post-hepatic obstruction.

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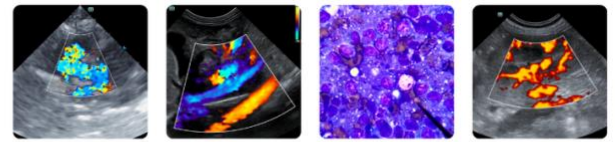
Assuming no pathology on three view chest radiographs and overall clinical picture, cholecystectomy with hepatic biopsies is recommended in this patient with perioperative gastrointestinal support. Empirical therapy for cholangiohepatitis with supportive care, serial, clinical and sonographic monitoring would be more conservative, yet surgical intervention is likely indicated in this patient.

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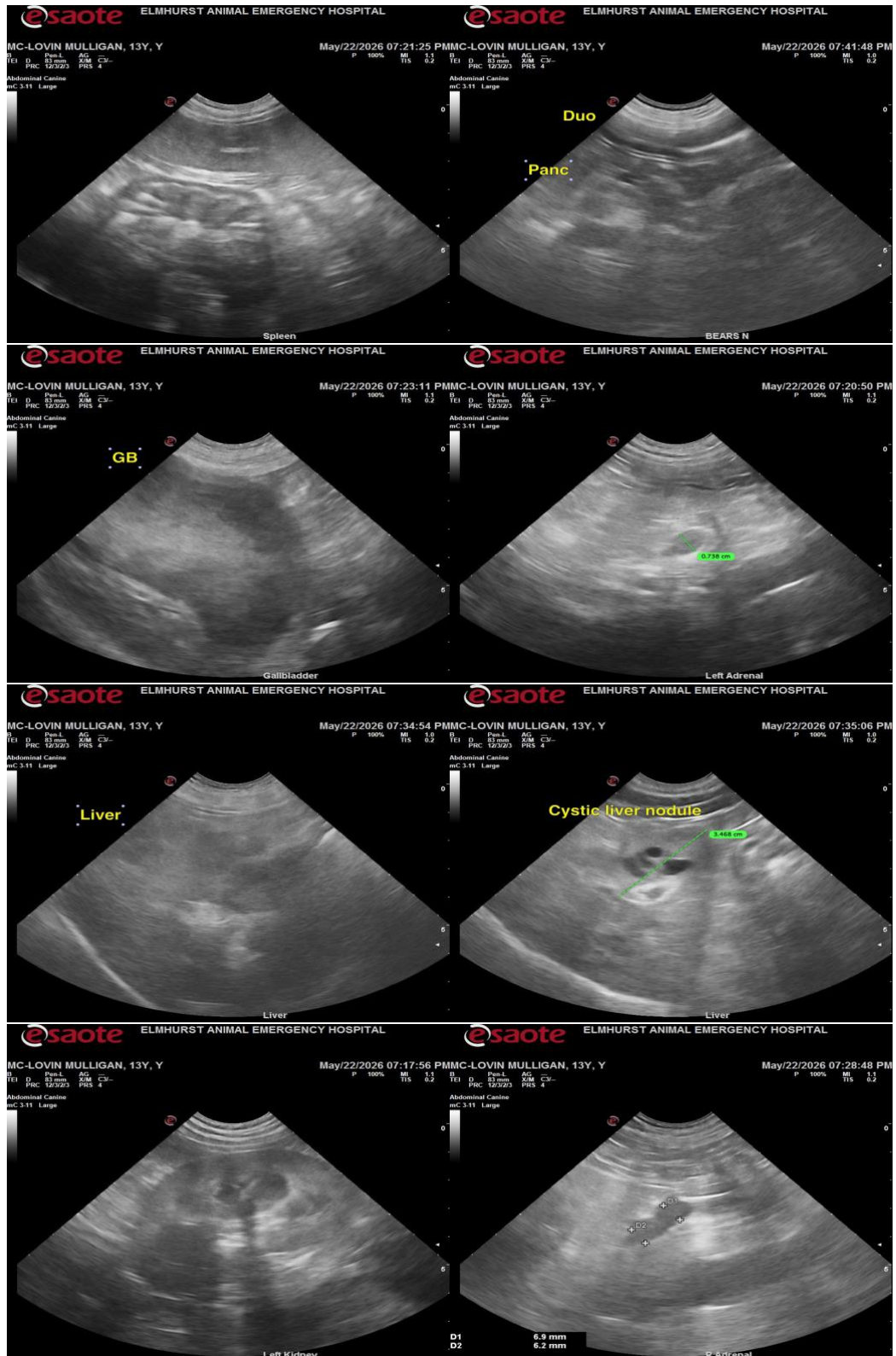
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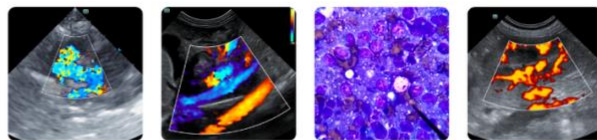
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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