



PATIENT	PRESENTING CLINICAL SIGNS
Cuddles Fenstermaker	Recheck ultrasound, patient improved, liver values still increased. Medication: Gabapentin
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	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 changes were noted.
Miniature Schnauzer	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 loss of corticomedullary symmetry and definition expected for the age of the patient. Bilateral medullary mineral noted as well as moderate pyelectasia in the left kidney and mild pyelectasia in the right kidney. The left kidney measured 5.9 cm. The right kidney measured 5.9 cm.
SEX	Adrenal Glands
Spayed Female	The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 1.6 cm length x 0.62 cm at the caudal pole. The right adrenal gland measured 2.5 cm length x 0.38 cm at the caudal pole.
AGE	Spleen
2010	The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, non-disruptive, well demarcated hyperechoic nodules were noted, consistent with benign myelolipomas or splenic mineralization. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.
WEIGHT	Liver
15	The liver presented generalized enlargement, exhibiting non-homogeneous to mixed echogenic intermittently nodular parenchyma. A caudal expanding non-homogeneous ventrocaudal mass was noted measuring approximately 3-4 cm in diameter. Concurrent non-homogeneous to nodular mass was noted in the mid to deep liver measuring 3.7 cm in diameter. The gallbladder was distended in size. The gallbladder lumen was filled primarily with non-dependent congealed yet non-organized, mildly hyperechoic gallbladder debris with suspected peripheral mucus. No evidence of peripheral gallbladder inflammation.
INTERPRETED BY	Gastrointestinal
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	DATE
Rebekah Jakum, CVT ARDMS/RVT	5/3/23
HOSPITAL NAME	Normal visible colon wall layers were present with apparent formed feces in lumen.
Blue Ridge VC	
REFERRING VET	
Dr. Filchner	
INVOICE	
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PATIENT *Pancreas*

Cuddles Fenstermaker

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.

SPECIES

Canine

Free Abdomen

No omental masses, overt or significant lymphadenopathy. No evidence of peritoneal effusion.

BREED

Miniature Schnauzer

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

- Chronic hepatopathy exhibiting ventrocaudal and mid parenchymal masses.
- Gallbladder mucocele.
- Benign splenic nodules.
- Non-specific small intestinal mild hyperechoic mucosal fogging/striations.
- Moderate chronic renal changes exhibiting medullary mineral and bilateral variable pyelectasia.

AGE

2010

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

15

Considerations for the liver may include vacuolar hepatopathy, chronic inflammatory/immune mediated disease, hyperplasia, hematopoiesis, fibrosis, or neoplasia. Contributing factor to the progressive hepatic enzyme elevations is likely including the gallbladder mucocele and potential associated inflammation/cholestasis. If not done, hepatic parenchyma and mass FNA cytology is warranted for further assessment. Given no reported gastrointestinal signs in this patient, the jejunal mucosal fogging to striations are of unclear clinical significance. Monitoring for weight loss or gastrointestinal signs going forward +/- GI panel to include cobalamin and folate is recommended.

INTERPRETED BY

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

The pyelectasia may be owing to chronic renal changes, potential pelvic scarring possibly owing to previous calculi passage, IV fluid therapy (if applicable). Urine C/S and protein: creatinine ratio on sterile urine sample is recommended.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT



HOSPITAL NAME

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PATIENT

Cuddles Fenstermaker

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Spayed Female

AGE

2010

WEIGHT

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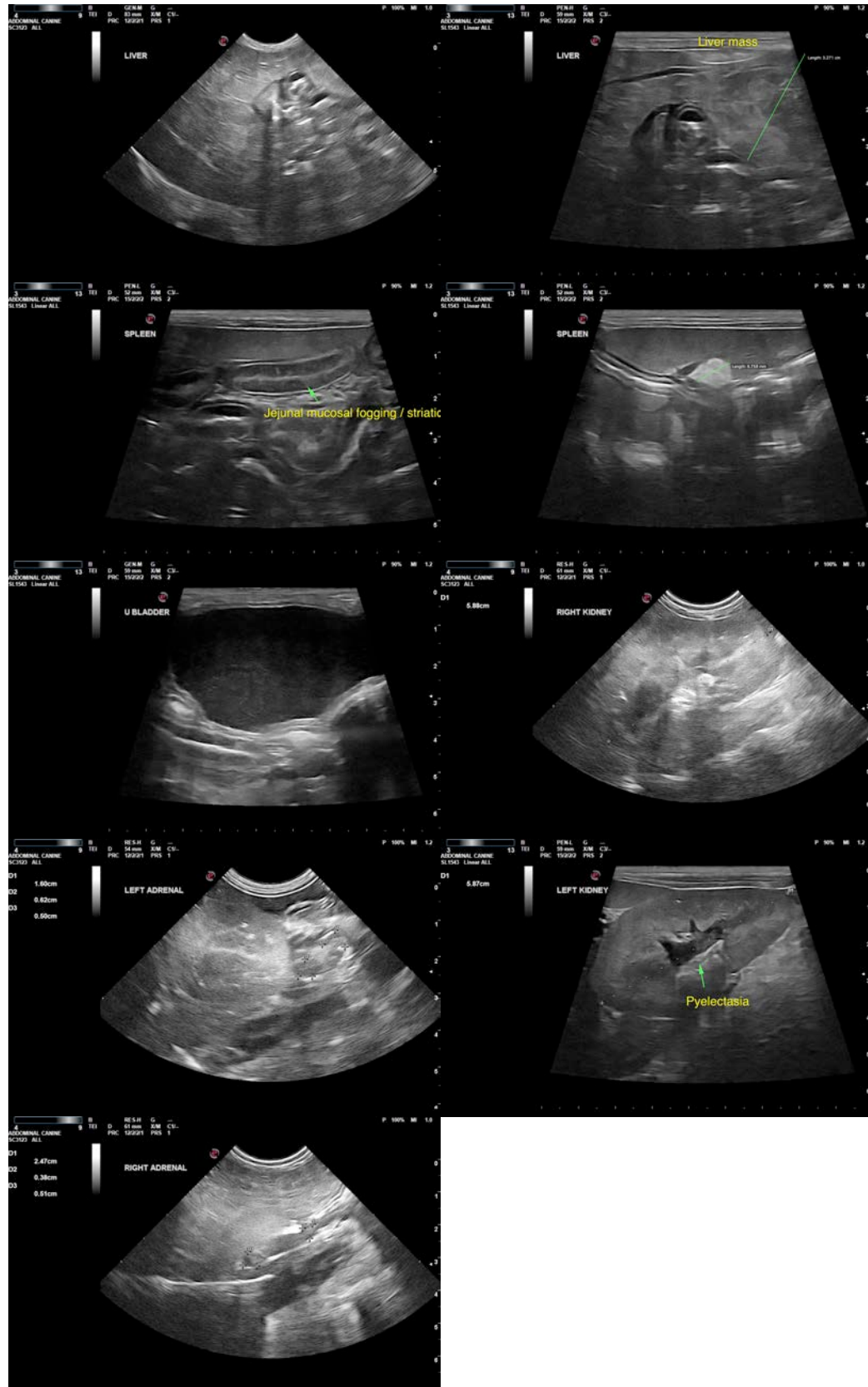
Dr. Filchner

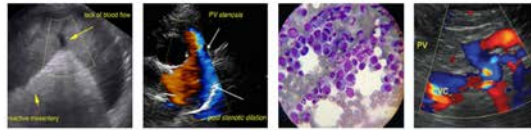
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DATE

5/3/23





PATIENT

Cuddles Fenstermaker

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.

SPECIES

Canine

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.

BREED

Miniature Schnauzer

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

info@SonoPath.com

SEX

Spayed Female

AGE

2010

WEIGHT

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