



PATIENT

Boca Burns

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

MN

AGE

10.5 years

WEIGHT

Not Given

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Animal Mansion

REFERRING VET

Dr. Bertoldo

INVOICE

13802

DATE

5/5/22

PRESENTING CLINICAL SIGNS

Concern for Liver/gallbladder. Current meds: Ursodiol 200 1/4t bid, Denamarin 1/4 sid, Orbax 22.7 sid
Abnormal PE/Chem/CBC/UA Results: ALK 568, ALT 668, TBili 1.4

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 changes was noted.

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 0.80 cm in diameter.

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 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 4.1 cm in length. The right kidney measured 4.0 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 0.61 cm width at the caudal pole and 0.46 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.63 cm width at the caudal pole. No evidence of adrenal hyperplasia or tumors was noted.

Spleen

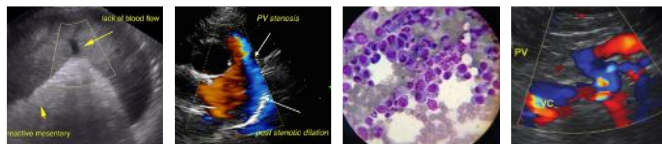
The spleen was normal in size and contour exhibiting a primarily finely textured homogeneous parenchyma with a solitary, subtle, non-expansive, isoechoic to mildly nonhomogeneous nodule in the medial parenchyma. The splenic nodule measured 0.86 cm.

Liver/ Gallbladder

The liver was mildly enlarged in size with a symmetrical capsule contour and subjective normal hepatic parenchyma echogenicity exhibiting moderate coarse echotexture. No masses or nodules were noted. The portal vascular borders were sonographically normal with normal hepatic vascular volume. The gallbladder was non-distended in size containing primarily anechoic content with mild luminal debris. No evidence of peripheral gallbladder inflammation was noted. The cystic and common bile ducts were normal.



PATIENT	<i>Gastrointestinal</i>
Boca Burns	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.
BREED	Normal visible colon wall layers were present with apparent formed feces in lumen.
Yorkshire Terrier	<i>Pancreas</i>
SEX	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.
MN	
AGE	<i>Free Abdomen</i>
10.5 years	No overt lymphadenopathy or peritoneal effusion was present.
WEIGHT	ULTRASONOGRAPHIC FINDINGS
Not Given	<ul style="list-style-type: none"> • Benign hepatopathy • Minor gallbladder debris (non-mucocele), no evidence of overt cholecystitis • Mild age-related kidneys • Subtle solitary splenic nodule - subjectively benign, subtle hyperplasia, hematopoiesis suspected, no evidence of neoplastic criteria
INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The overall appearance of the liver was nonspecific yet consistent with benign hepatopathy. Considerations may include vacuolar hepatopathy and mild nonclinical cholestasis, given the elevated ALP / total bilirubin, with primary concern for inflammatory hepatopathy or hepatobiliary process, given the primarily elevated ALT, i.e., cholangiohepatitis.
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Shari Reffi, CVT	
HOSPITAL NAME	Ultrasound-guided FNA of the liver using a 25-gauge needle and assuming normal clotting status is warranted for screening cytology primarily to assess or possibly identify inflammatory cell type. Continued hepatosupportive medications including Denamarin, as well as Ursodiol, is recommended.
Animal Mansion	
REFERRING VET	Initial appropriate antibiotic therapy for cholangiohepatitis could be considered initially for 2 weeks with monitoring of hepatic response. If positive hepatic responses are noted, the continuation of antibiotics for up to 4-6 weeks may be indicated. However, discontinuation of antibiotics would be appropriate if no change in hepatic enzyme levels.
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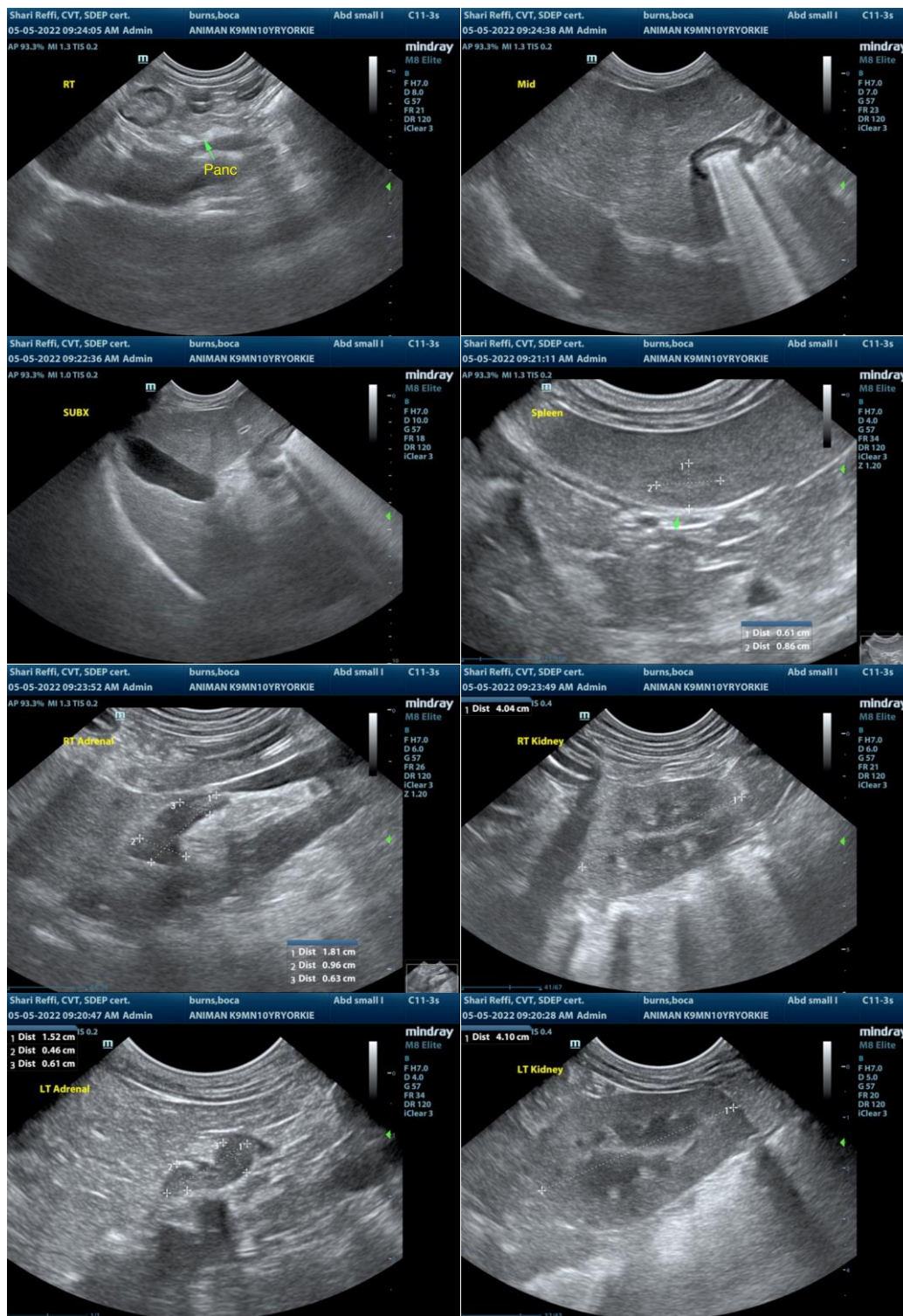
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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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info@SonoPath.com

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