



PATIENT PRESENTING CLINICAL SIGNS

Luna Gresley H/O atopic dermatitis- on Apoquel and Cytopoint as needed, hair coat looks normal now elevated liver enzymes on yearly

SPECIES PE- BCS 4/5,not sedated 2025- ALT 146 ALP Normal 2026 ALT 1003 ALP 236 alb 3.6 glob 4.2

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

Pitbull Terrier The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Echogenic to particulate nondependent minor sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

SEX

Spayed Female

AGE

8.5 Years The area of the aortic trifurcation was free of pathology.

WEIGHT

65 lbs

Normal size and margination was 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 6.0 cm in length. The right kidney measured 6.0 cm in length.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.49 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 0.61 cm width at the caudal pole.

IMAGING PERFORMED BY

Ginny Dodd DVM, D, ABVP (CFP)

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.

HOSPITAL NAME

Steele Creek Animal Hospital

REFERRING VET

Dr. Schuver

Liver & Gallbladder

The liver presented subjective borderline to mild subnormal in size with mild non-uniform increased hepatic parenchyma echogenicity exhibiting variable coarse echotexture and indistinct portal vascular borders.

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The gallbladder was non distended in size with mild nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

DATE

05/09/26

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. Mild retained anechoic fluid and lumen gas was present without obstruction to pyloric outflow.



PATIENT

Luna Gresley

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 apparent formed feces in lumen.

SPECIES

Canine

Pancreas

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.

BREED

Pitbull Terrier

Free Abdomen

SEX

No overt lymphadenopathy or peritoneal effusion was present.

Spayed Female

ULTRASONOGRAPHIC FINDINGS

AGE

8.5 Years

- Hepatopathy exhibiting subjective borderline/mild subnormal liver size and mild hyperechoic parenchyma.
- Mild nonorganized gallbladder debris (non-mucocele).
- Normal kidneys/urinary bladder- no evidence of renal or urinary bladder calculi.
- Normal bilateral adrenal glands.
- Mild nonobstructive hypomotile stomach.

WEIGHT

65 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

Although nonspecific, chronic, inflammatory, hepatic or hepatobiliary disease such as nonspecific hepatitis/cholangiohepatitis, hepatotoxicosis i.e. copper or a similar is favored given progressive to significant elevated ALT, vacuolar/cholestatic hepatopathy, fibrosis, less likely occult neoplasia are all potentials.

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Further assessment may include (assuming normal clotting status) hepatic FNA cytology to assess for evidence of inflammation +/- leptospirosis titers/PCR and bile acid profile if evidence of hepatic dysfunction may be considered. Hepatic biopsy for histopathology and copper assessment is required for further clarification.

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 Hospital

If patient is non-clinical, hepatosupportive medications including Denamarin or ursodiol or similar with clinical and sonographic monitoring if non-responsive or progressive hepatopathy would be more conservative. The mild non-obstructive hypomotile stomach is nonspecific and potentially incidental. Gastrointestinal support +/- empirical therapy for mild hypomotile gastritis if non-reported gastrointestinal signs are present or arise is recommended.

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PATIENT

Luna Gresley

SPECIES

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BREED

Pitbull Terrier

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Spayed Female

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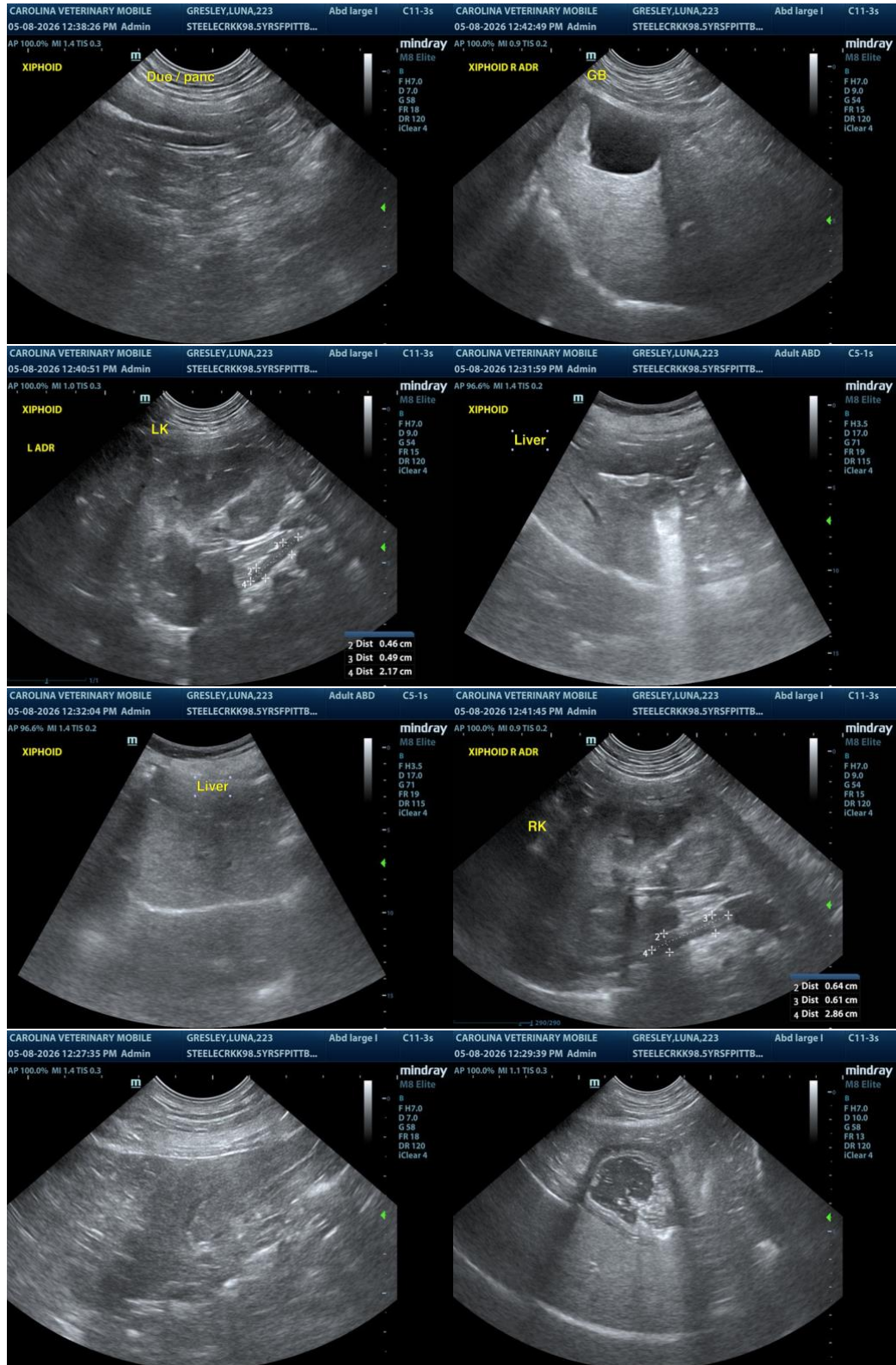
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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