



PATIENT PRESENTING CLINICAL SIGNS

July Antaya History: ALP elevated on yearly bloodwork (379) . No clinical signs - behaving normally at home. ? Cushing's disease vs hepatopathy vs gallbladder mucocele.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine *Urinary System*

BREED

Labrador Retriever Mix

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.

SEX

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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 5.9 cm in length. The right kidney measured 5.0 cm in length.

AGE

10 yr

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

50lb

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.60 cm width at the caudal pole and 0.63 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 and 0.60 cm width at the cranial pole.

INTERPRETED BY

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

Spleen

The spleen exhibited several indistinct hyperechoic to nonhomogeneous nondisruptive splenic nodules. 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.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

Liver

The liver presented moderately enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content and moderate nondependent yet nonorganized mildly hyperechoic mobile luminal debris. Subtle hypoechoic areas of suspected mucus noted between the suspended debris and luminal wall. The cystic and common bile ducts were normal.

HOSPITAL NAME

Wood River Animal Hospital

REFERRING VET

Dr. Schuelke

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.

INVOICE

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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.

DATE

06/24/2022

Pancreas

Normal visible colon wall layers were present with apparent formed feces in lumen.



PATIENT

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The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

SPECIES

Canine

No omental masses, lymphadenopathy or free fluid.

ULTRASONOGRAPHIC FINDINGS

- Vacuolar hepatopathy pattern
- Moderate mildly congealed mobile gallbladder debris (nonmucocele)
- Benign splenic nodules-consistent with benign myelolipomas

BREED

Labrador Retriever Mix

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

FS

The appearance of the liver is consistent with benign hepatopathy and is most suggestive of vacuolar hepatic changes with potential for nonobstructive cholestasis given the ALP elevation and presence of gallbladder debris. Inflammatory hepatopathy ie cholangiohepatitis is considered a less likely differential. No evidence of hepatic neoplastic criteria was noted. Cushing's syndrome is considered less likely given the lack of clinical signs. Hepatosupportive medications including Denamarin and Ursodiol with continued monitoring for progressive ALP elevation is recommended.

AGE

10 yr

Recheck sonogram to reevaluate the gallbladder is suggested if evidence of increasing cholestasis or focal cranial abdominal/subxiphoid discomfort on palpation is noted.

WEIGHT

50lb

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 DABVP (Canine and Feline)

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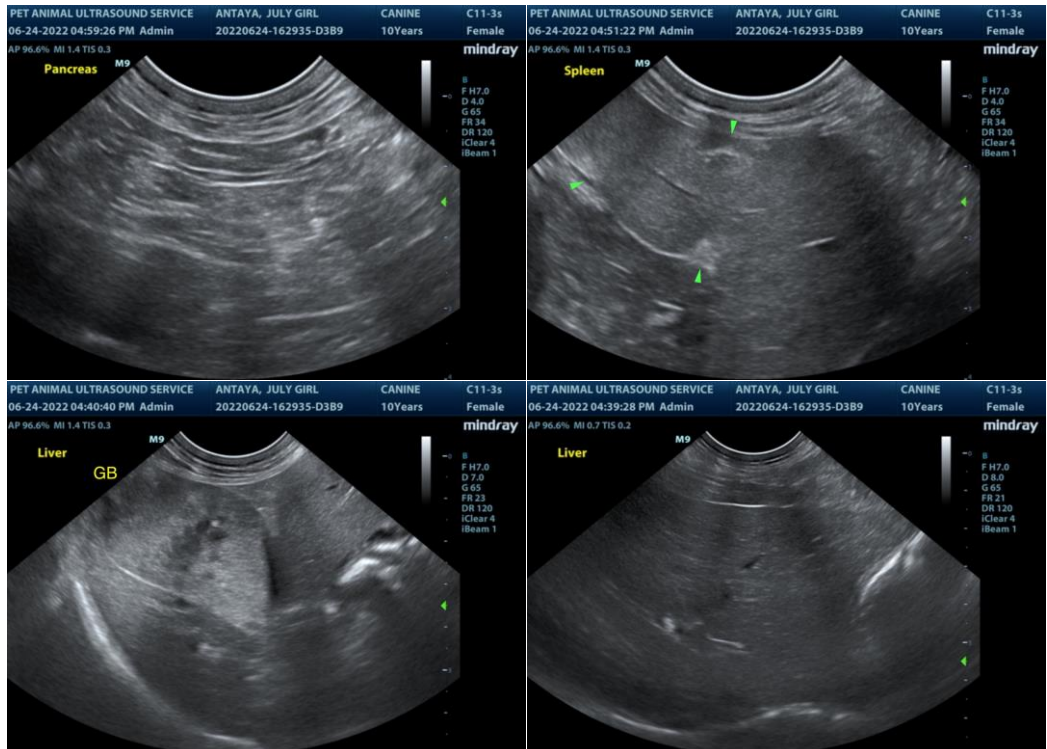
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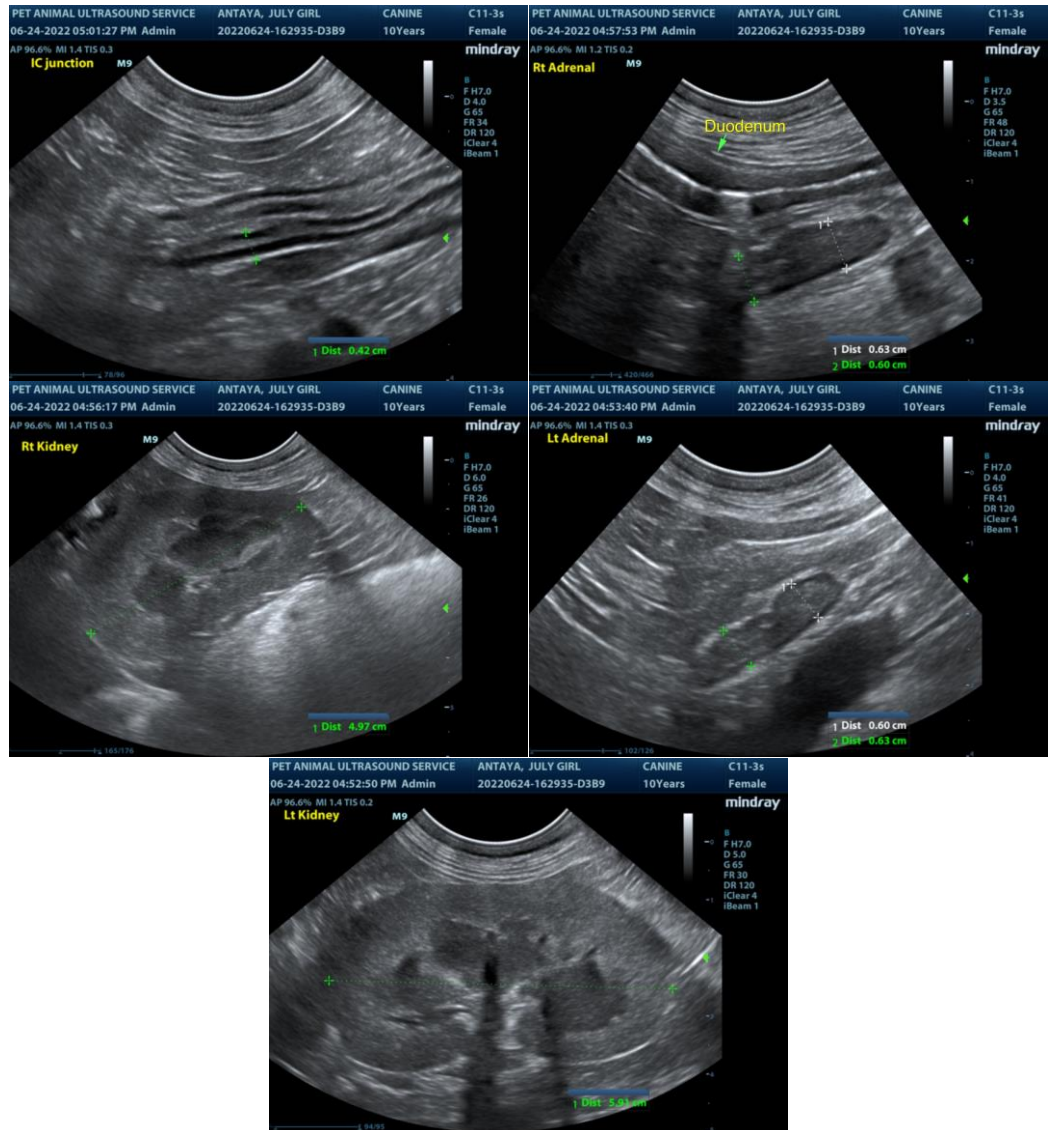
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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