



PATIENT	PRESENTING CLINICAL SIGNS
Penny Tardibuono	History: transferred from RDVM for abdominal ultrasound due to moderately elevated ALP and ALT no clinical signs
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone to a depth of 3 cm. 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.
Boxer	
SEX	Normal size and margination were 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 6.5 cm in length. The right kidney measured 7.5 cm in length.
FS	
AGE	The area of the aortic trifurcation was free of pathology.
9yr	Adrenal Glands
WEIGHT	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.89 cm width at the caudal pole and 0.68 cm width at the cranial pole. The right adrenal gland was not definitively visualized but without overt pathology in the area.
36.92 kg	Spleen
INTERPRETED BY	The spleen exhibited normal overall size with generalized parenchymal heterogeneity and intermittent subtly hypoechoic mildly expansive nodules, an example of a nodule measuring 1.0 cm in diameter. Minor asymmetrical lateral and medial capsule contour was present. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Liver
IMAGING PERFORMED BY	The liver was mildly enlarged in size with normal contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Intermittent subtle uniform nondisruptive intraparenchymal nodules were present an example measuring 1.7 cm in diameter. The hepatic and portal vasculature were normal in appearance without signs of congestion.
Dr. Carver	Gastrointestinal
HOSPITAL NAME	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.
Animal Emergency Hospital Volusia	The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Carver	Pancreas
INVOICE	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.
10964ag	Normal visible colon wall layers were present with apparent formed feces in lumen.
DATE	
06/26/2022	



PATIENT

Penny Tardibuono

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 overt lymphadenopathy or peritoneal effusion was present.

BREED

Boxer

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy exhibiting mild nonuniform to subtly nodular parenchyma - vacuolar hepatopathy, inflammatory / immune mediated hepatopathy, areas of hematopoiesis, nodular hyperplasia, fibrosis, infiltrative neoplasia (thought less likely) or other hepatopathy
- Normal gallbladder with minor luminal debris
- Mild irregular to nodular spleen - nodular hyperplasia, hematopoiesis, infarcts, neoplasia possible

SEX

FS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

9yr

FNA of the liver and spleen using 25 ga needle and assuming normal clotting status warranted. Adrenal disease is thought unlikely given lack of clinical signs. Hepatosupportive meds i.e. Denamarin +/- Ursodiol would be reasonable. Recheck sonogram to assess for progressive hepatic and specifically splenic changes in 4 weeks would be a more conservative approach.

WEIGHT

36.92 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Carver

HOSPITAL NAME

Animal Emergency
Hospital Volusia

REFERRING VET

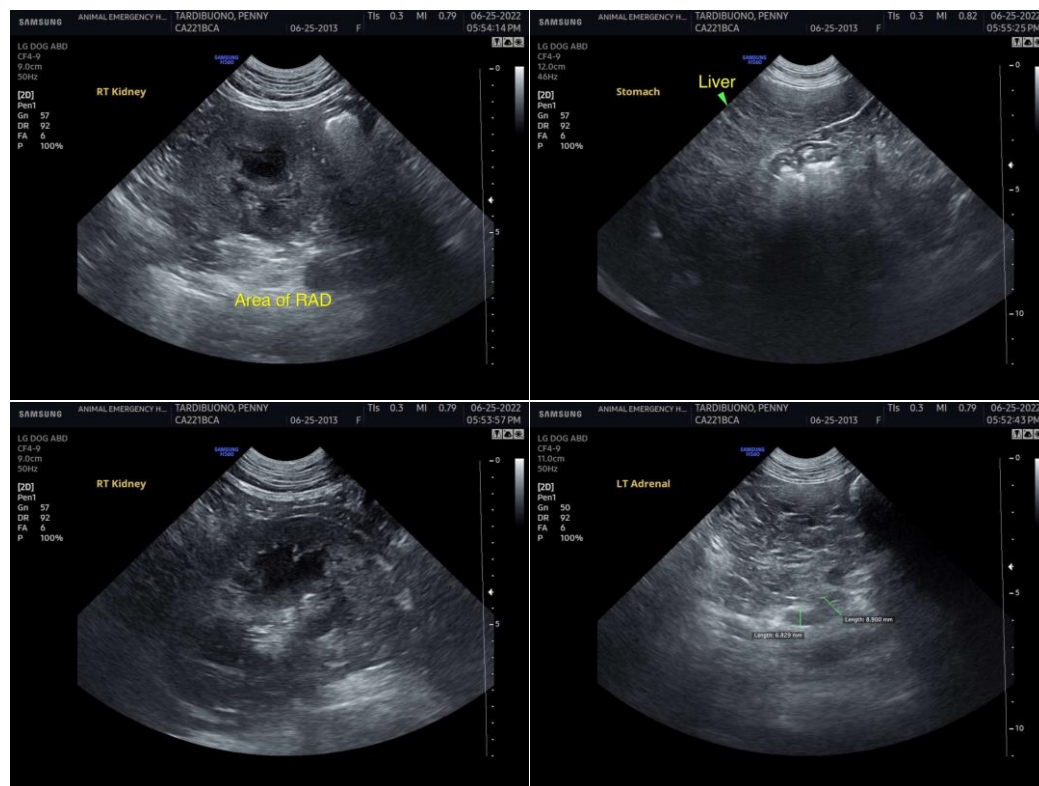
Dr. Carver

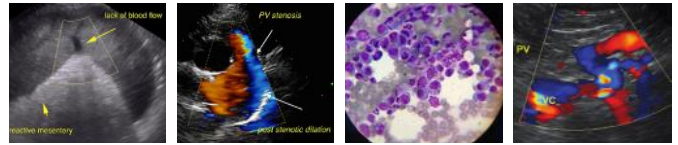
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PATIENT

Penny Tardibuono

SPECIES

Canine

BREED

Boxer

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FS

AGE

9yr

WEIGHT

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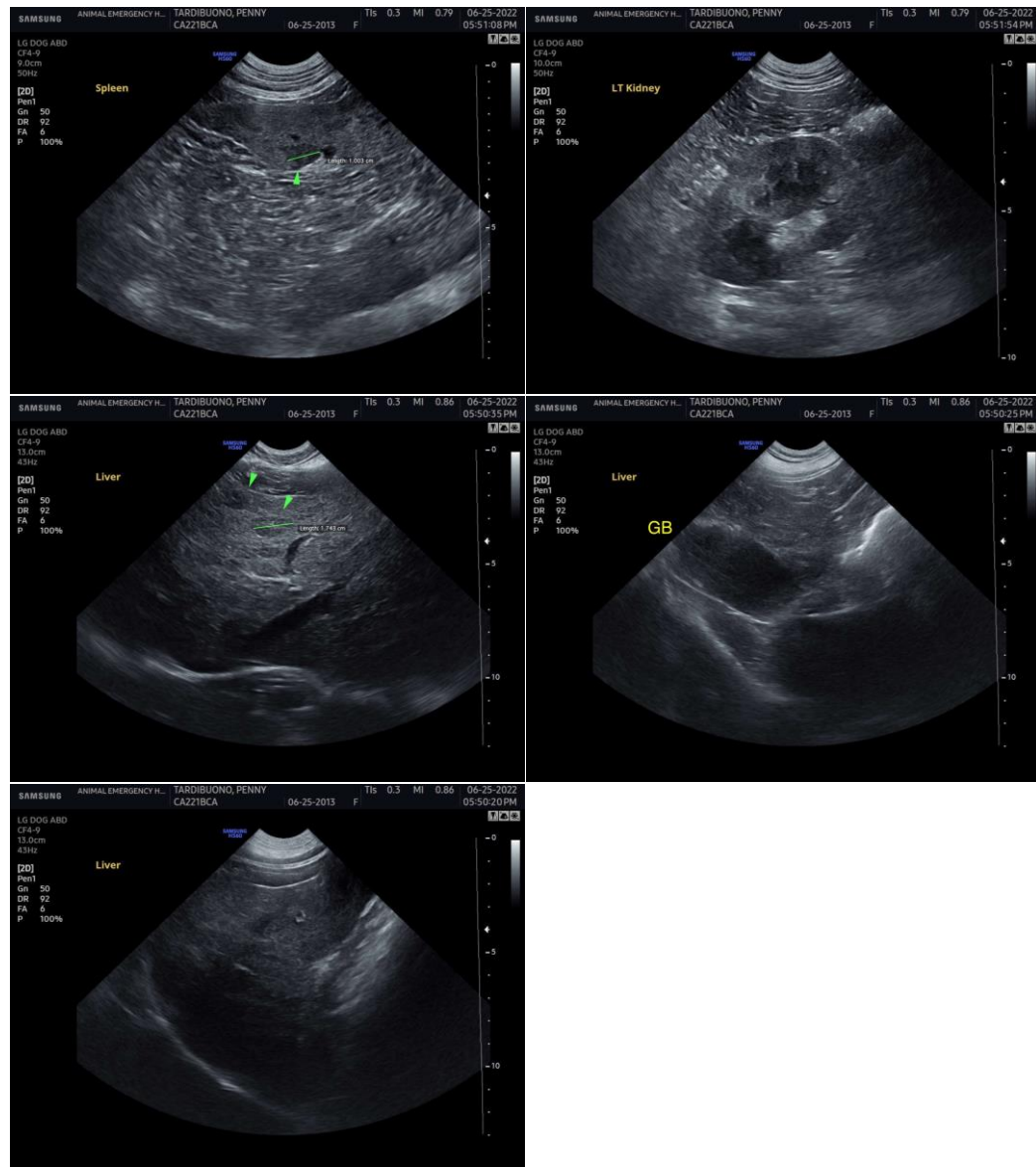
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INVOICE

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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)

info@SonoPath.com