



**PATIENT**

Khloe Grebely

**PRESENTING CLINICAL SIGNS**

History: Diagnosed with Cushings on veteryl Anorexic lethargic and some vomiting  
Abnormal PE/Chem/CBC/UA Results: Mod elevation of cPL

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Chihuahua

The urinary bladder was mildly subnormal in size owing to lack of urine distention. Full evaluation of the urinary bladder walls was limited, owing to lack of urine distention, yet no evidence of inflammatory or neoplastic criteria. Minimal anechoic urine was present. No sediment or calculi noted. The urethra was normal to a depth of 1.0 cm. Aortic trifurcation was normal.

**SEX**

Spayed Female

Normal size and margination was 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. Pinpoint medullary mineral was present in the kidneys. The left kidney measured 3.3 cm in length. The right kidney measured 3.45 cm in length.

**AGE**

9 Years

**Adrenal Glands**

The left adrenal gland exhibited primarily caudal mild enlargement. The left adrenal gland measured 0.63 cm width at the caudal pole and 0.35 cm width at the cranial pole.

**WEIGHT**

4 kg

The right adrenal gland enlargement with uniformly hypoechoic parenchyma was present. The right adrenal gland measured 0.52 cm width at the caudal pole and 0.46 cm width at the cranial pole.

**INTERPRETED BY**

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

No evidence of adrenal tumors.

**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.

**IMAGING PERFORMED BY**

Dr. Belan

**Liver**

The liver was mildly enlarged. The parenchyma of the liver revealed uniform mild echogenicity compared to the spleen and falciform fat with moderate coarse echotexture and evidence of minor remodeling. The capsule of the liver was symmetrical in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.

**HOSPITAL NAME**

Sanctuary VC

**REFERRING VET**

Dr.  
Warnakaluasooriya

The gallbladder was non-distended. The gallbladder walls were sonographically normal without overt inflammatory changes. Anechoic content was present with moderate congeal yet nonorganized nonmineralized luminal debris, primarily caudal lumen in the area of the gallbladder neck. Small pockets of anechoic content noted between the nondependent luminal debris and inner luminal wall, suggestive of areas of sequestered mucus or mucosal hyperplasia. No evidence of peripheral gallbladder inflammation. The cystic and common bile ducts were normal.

**INVOICE**

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**Gastrointestinal**

**DATE**

15855



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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. The gastric body wall measured 0.24 cm.

**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. The jejunum wall measured 0.24 cm. The duodenum wall measured 0.43 cm.

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

**BREED**

***Pancreas***

Chihuahua

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

**SEX**

***Free Abdomen***

Spayed Female

No overt lymphadenopathy or peritoneal effusion was present.

**AGE**

9 Years

**ULTRASONOGRAPHIC FINDINGS**

- Bilateral prominent adrenals- consistent with PDH
- Age-related kidneys with pinpoint medullary mineral
- Mild hepatomegaly, exhibiting mildly nonuniform increased parenchyma echogenicity- consistent with probable steroid/vacuolar hepatopathy
- Moderate congealed gallbladder debris with suspected areas of entrapped mucus or mucosal hyperplasia- consistent with early noninflamed gallbladder mucocele
- Heterogeneous pancreas. No signs of active pancreatitis, although low-grade to chronic pancreatitis, which may present essentially sonographically normal is possible.
- Overtly normal gastrointestinal tract- possible low-grade gastroenteritis

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The gallbladder, subjectively, does not appear to be a clinical player at this stage yet serial monitoring for evidence of cranial abdominal or subxiphoid discomfort on palpation, as well as evidence of increasing cholestasis suggested. Hepatosupportive medications, including Denamarin and ursodiol suggested, if not currently instituted. As needed gastrointestinal supportive care and conservative therapy for low-grade to chronic pancreatitis would be reasonable. Recheck ACTH stimulation test suggested for monitoring of Cushings Syndrome therapy, if not recently done.

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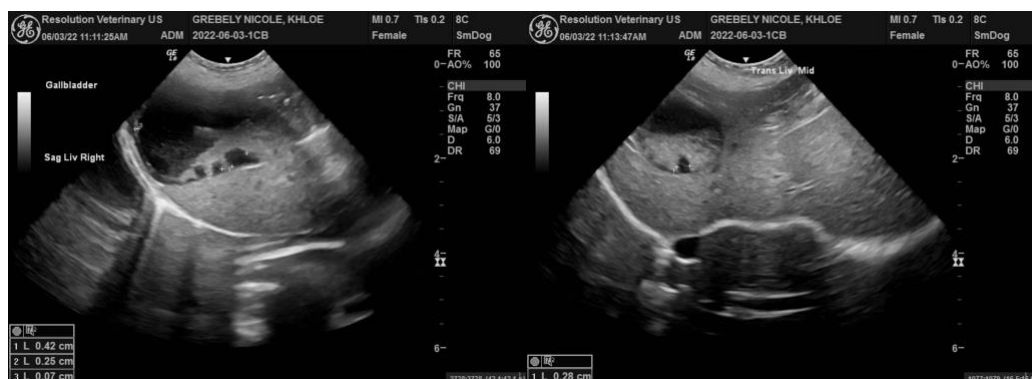
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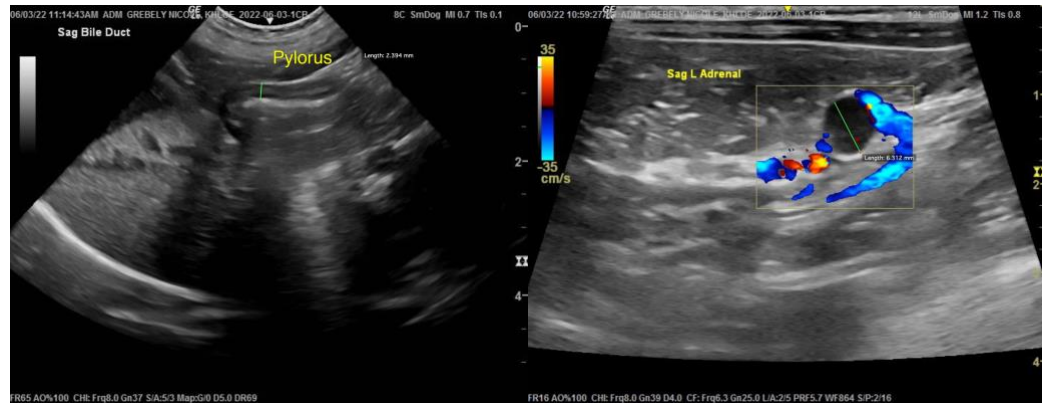
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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