

PATIENT PRESENTING CLINICAL SIGNS

Rudy Bird Hind end weakness and muscle atrophy, trial of Prednisone did not warrant improvement, continually elevating liver values (ALT) Gabapentin, Carprofen

SPECIES ALT 341, ALP 229

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

Standard Poodle The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths, sediment or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

SEX

MN

No overt pathology was noted in the area of the residual prostate.

AGE

2010

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 5.9 cm in length. The right kidney measured 7.0 cm in length.

WEIGHT

74

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.5 cm length x 0.61 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 3.1 cm length x 0.48 cm width at the caudal pole.

IMAGING

PERFORMED BY
 Rebekah Jakum, CVT
 ARDMS/RVT

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

HOSPITAL NAME

Good Hope AH

REFERRING VET

Dr. Heidecker

Liver/ Gallbladder

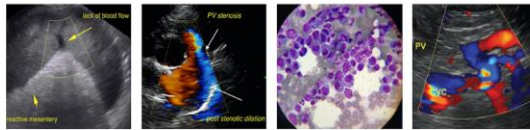
The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. Mild nondependent yet nonorganized mildly hyperechoic gallbladder debris was noted. The gallbladder was otherwise normal. Mild nonobstructive dilation of the cystic biliary duct was present. The common bile duct was sonographically normal without evidence of post hepatic obstructive criteria.

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PATIENT *Gastrointestinal*

Rudy Bird 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 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.

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

BREED *Pancreas*

Standard Poodle 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.

SEX

MN *Free Abdomen*

AGE A solitary cystic hepatic lymph node adjacent to the portal vein measuring 2.4 cm in diameter was present. No evidence of additional intraabdominal lymphadenopathy was noted. No free fluid was noted.

2010

ULTRASONOGRAPHIC FINDINGS

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- Chronic benign hepatopathy
- Mild gallbladder debris (non-mucocele) - no overt evidence of gallbladder inflammatory criteria
- Solitary cystic hepatic lymph node - benign
- Mild chronic renal changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, the liver was nonspecific yet sonographically consistent with chronic benign hepatopathy. Considerations may include vacuolar hepatic changes, chronic inflammatory / immune-mediated disease, toxic hepatopathy i.e., copper, mild benign hepatic parenchymal remodeling, early fibrosis, or other hepatopathy without evidence of hepatic or hepatobiliary neoplastic criteria.

HOSPITAL NAME

Good Hope AH The cystic hepatic lymph node, which may indicate chronic reactivity, also suggests chronic hepatopathy without evidence of neoplastic lymphatic criteria.

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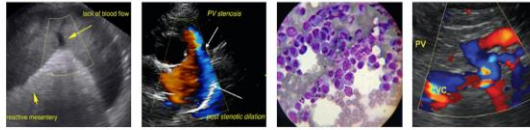
Dr. Heidecker Further assessment may include, assuming normal clotting status and using a 25-gauge needle, screening hepatic FNA for cytology for assessment of potential inflammatory cells. Hepatosupportive medications including Denamarin and Ursodiol are suggested and may prove beneficial. Core surgical hepatic biopsy is likely required for a definitive diagnosis, yet, at this stage, hepatosupportive medications and continued monitoring of hepatic enzyme levels would be reasonable.

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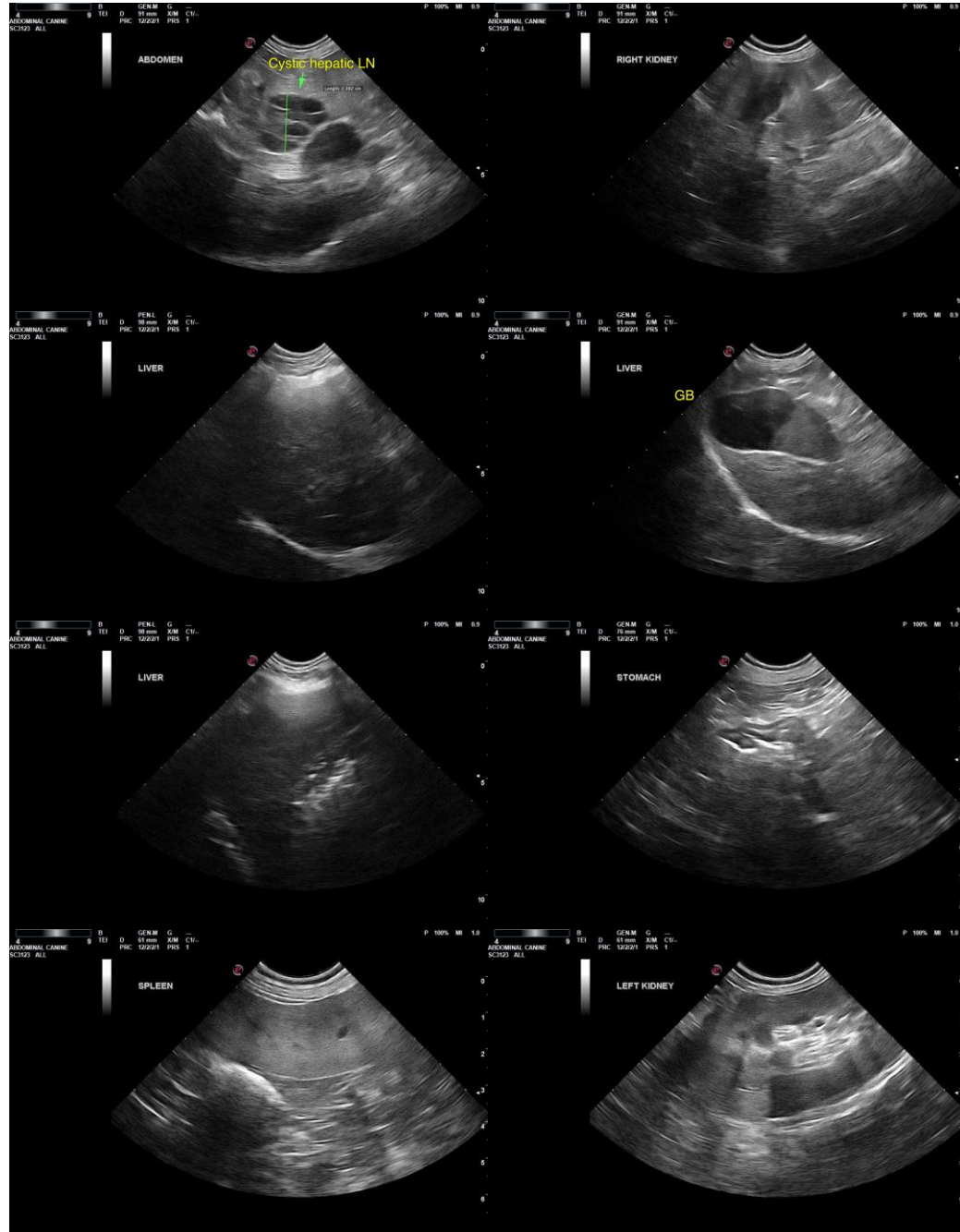
Dr. Heidecker

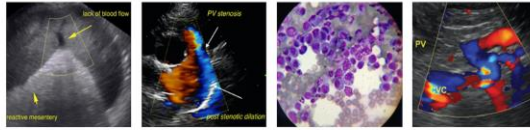
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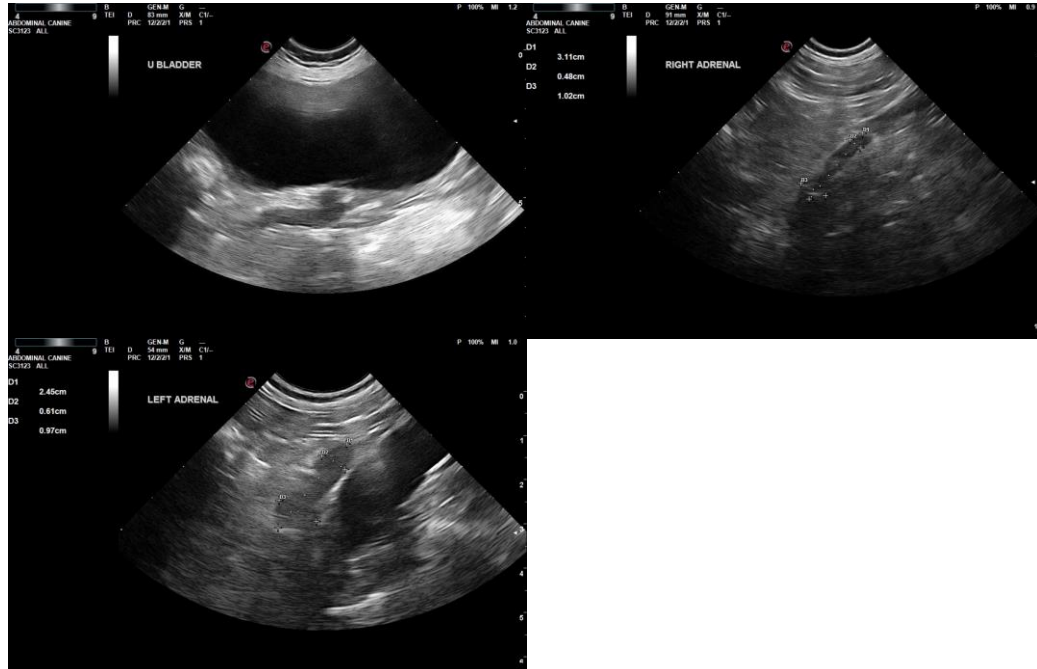
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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