



PATIENT

Molly Gilligan

PRESENTING CLINICAL SIGNS

ADR x 1 wk. PE unremarkable. No current meds.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: AST 88; ALT 159; GGT 35

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Shih Tzu

Urinary System

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

FS

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 3.9 cm in length. The right kidney measured 3.7 cm in length.

AGE

10yr

The area of the aortic trifurcation was free of pathology.

WEIGHT

15.3lb

Non-distended uterine remnant noted between the ventral descending colon and dorsal urinary bladder containing minor anechoic lumen fluid. The uterine remnant measured 0.56 cm in diameter.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.52 cm width at the caudal pole and 1.6 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.48 cm width at the caudal pole and 1.7 cm length.

INTERPRETED BY

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

Spleen

The spleen exhibited normal size and contour with primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. A subtle hypoechoic non-expansive nodule was present measuring 0.33 cm in diameter. No splenic masses.

IMAGING PERFORMED BY

Shari Reffi CVT

Liver/Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with minor echogenic non-mineralized debris. The cystic and common bile ducts were normal.

HOSPITAL NAME

Basking Ridge Animal
Hospital

REFERRING VET

Dr. Blachek

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.

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DATE

07/28/2023



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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.

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

Shih Tzu

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

SEX

FS

ULTRASONOGRAPHIC FINDINGS

AGE

10yr

- Non-distended uterine remnant containing minor lumen fluid.
- Sonographically unremarkable GI tract.
- Sonographically normal liver-consistent with low grade benign hepatopathy.
- Minor gallbladder sediment (non-mucocele).
- Subtle splenic nodule-subjectively benign, consistent with probable subtle hyperplasia, hematopoiesis or similar.

WEIGHT

15.3lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

Overall, there is no overt evidence of significant abdominal visceral pathology as a definitive cause of the patient's clinical signs.

IMAGING

PERFORMED BY

Shari Reffi CVT

The uterine remnant with minor luminal fluid was not overtly consistent with uterine stump pyometra. Sonographic reassessment of the uterine remnant suggested if clinical signs consistent with stump pyometra progress.

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Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology could be considered for further assessment if progressive hepatic enzyme elevations are present given the elevated ALT/AST combination. Hepatosupportive medications such as Denamarin and Ursodiol may prove beneficial.

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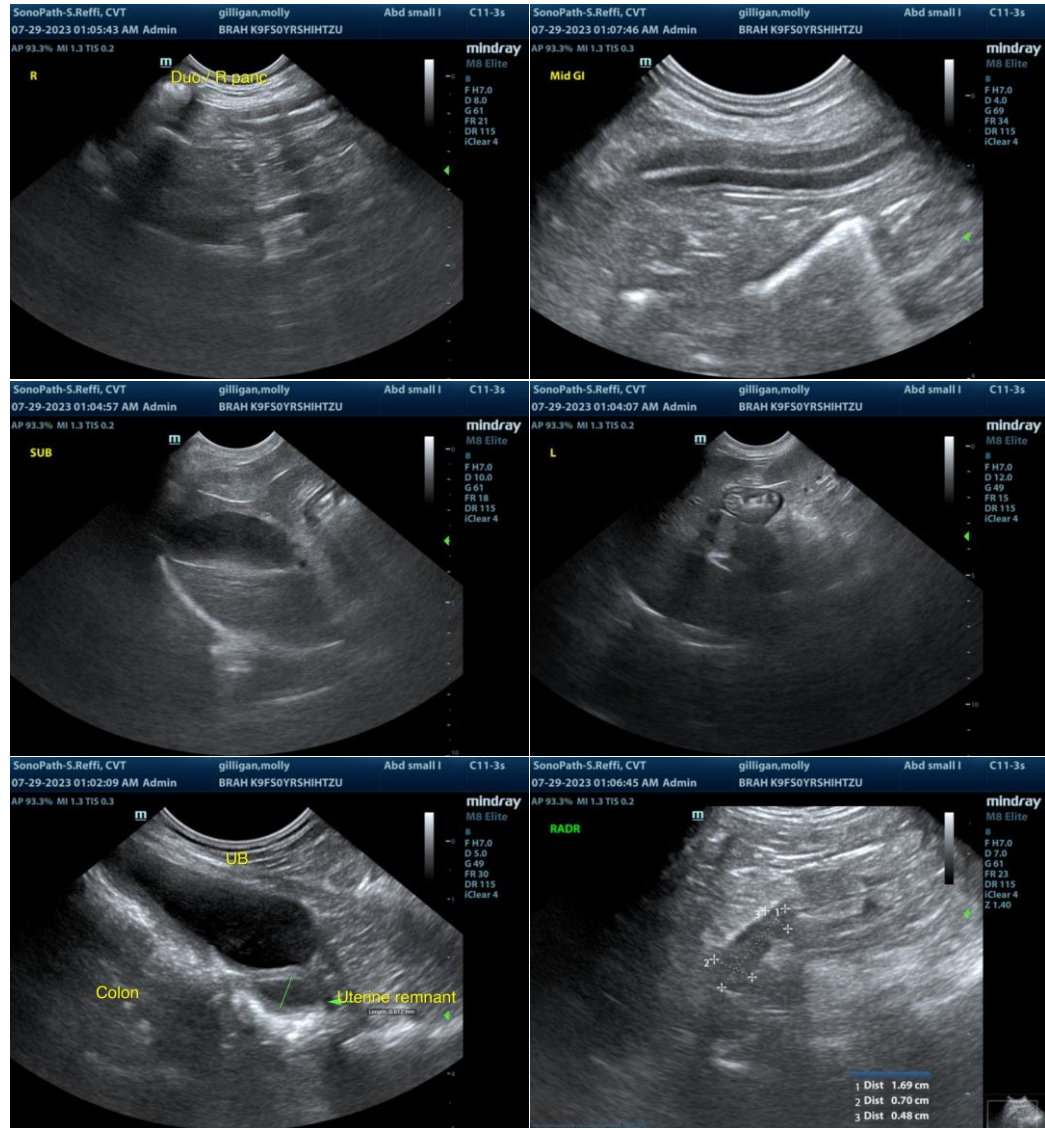
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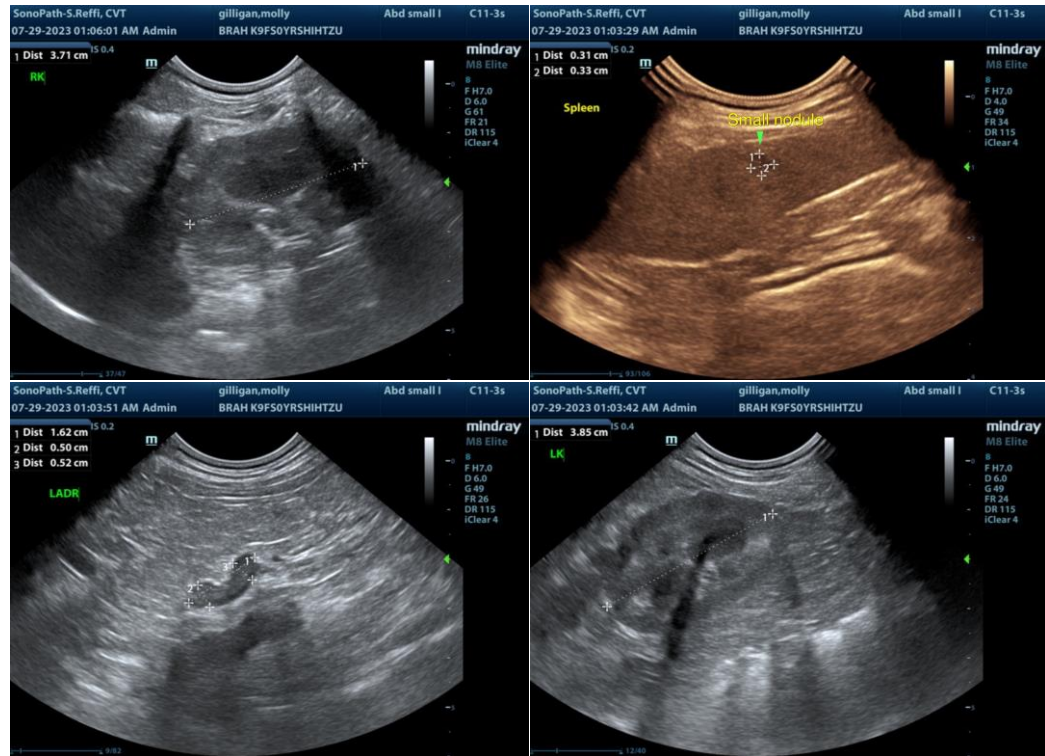
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WEIGHT

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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.

INTERPRETED BY

R. McKenzie Daniel,
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(Canine and Feline)

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.

IMAGING PERFORMED BY

Shari Reffi CVT

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com

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