



PATIENT	PRESENTING CLINICAL SIGNS
Bodhi Humphreys	History of non pruritic skin condition tentative diagnosis cutaneous hepatitis. Attending concerned about liver disease Also has SARD sporadic onset retinal def and is blind
SPECIES	Abnormal PE/Chem/CBC/UA Results: Mild Elevation of ALT ALP and GGT Mild elevation of lipase
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Bouvier D' Flanders	Urinary System
SEX	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 5.0 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 was noted.
Male Neuter	
AGE	The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 0.97 cm in diameter.
9	
WEIGHT	The area of the aortic trifurcation was free of pathology.
42 kg	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 6.6 cm in length. The right kidney measured 6.7 cm in length.
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.41 cm width at the caudal pole and 0.42 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 0.37 cm width at the caudal pole and 0.56 cm width at the cranial pole.
IMAGING PERFORMED BY	Spleen
Dr. Belan	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.
HOSPITAL NAME	Liver/ Gallbladder
Glamorgan AC	The liver presented mild to possible moderate enlargement. 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 exhibiting sonographically normal walls without evidence of inflammatory criteria. No evidence of peripheral gallbladder inflammation was noted. The gallbladder contained anechoic content with mild luminal debris primarily in the caudal lumen and gallbladder neck. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Flak	
INVOICE	
14211	
DATE	
7/5/22	



PATIENT

Gastrointestinal

Bodhi Humphreys

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 ventral gastric body wall measured 0.48 cm width.

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 duodenum wall measured 0.48 cm width.

BREED

Bouvier D' Flanders

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

SEX

Male Neuter

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 were evident.

AGE

9

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

WEIGHT

42 kg

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

- Low-grade hepatopathy - subjectively benign
- Mild gallbladder debris (non-mucocele)
- Sonographically unremarkable pancreas

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Dr. Belan

Sonographically, the appearance of the liver was not consistent with the classic "honeycomb" or "swiss cheese" parenchymal pattern, as with pathognomonic hepatocutaneous syndrome. Considerations for the liver may include vacuolar hepatopathy, nonobstructive cholestasis, low-grade inflammatory / Immune-mediated disease, or other hepatopathy without evidence of hepatic neoplastic criteria.

HOSPITAL NAME

Glamorgan AC

Assuming normal clotting status, ultrasound-guided FNA of the liver for screening cytology and potential identification of inflammatory cell type if present could be considered. Correlation with potential biopsy of the cutaneous lesions could also be considered. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial. No obvious evidence of a pancreatic mass or active pancreatitis sonographic criteria was evident.

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WEIGHT

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IMAGING PERFORMED BY

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HOSPITAL NAME

Glamorgan AC

REFERRING VET

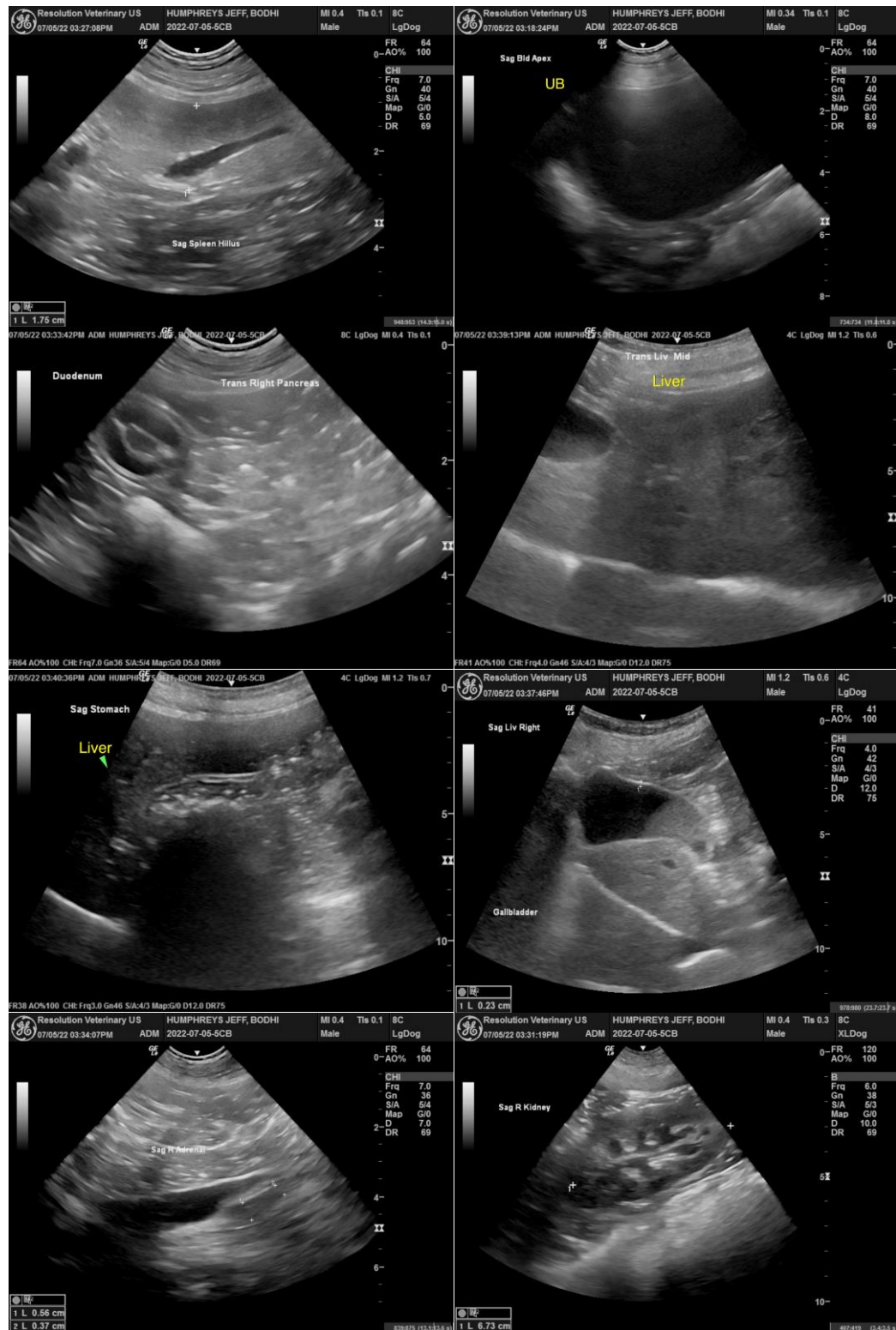
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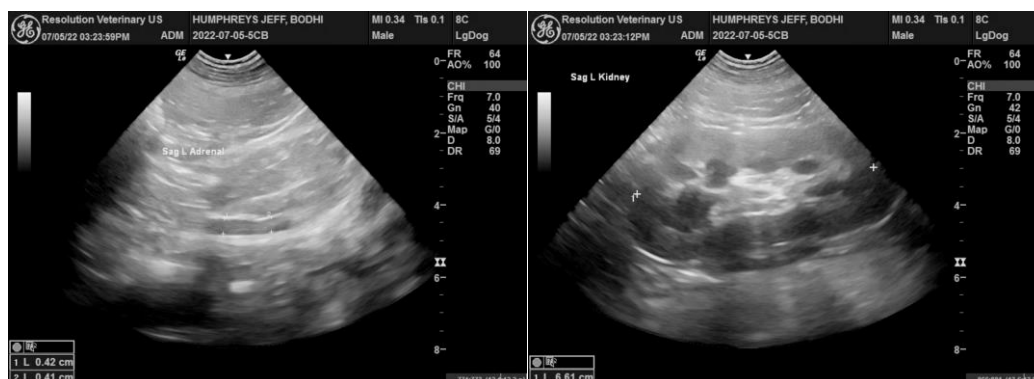
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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