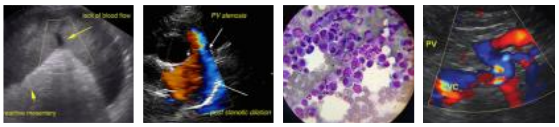


PATIENT

Bear Ashworth

SPECIES

Canine

BREED

Mini Australian Shepherd

SEX

FS

AGE

13 years

WEIGHT

18 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

South Willamette VC

REFERRING VET

Dr. Willaman

INVOICE

14592

DATE

8/12/22

PRESENTING CLINICAL SIGNS

Elevated liver enzymes and bilirubin on routine blood screen. P ha estrogen responsive incontinence , otherwise WNL
Abnormal PE/Chem/CBC/UA Results: emailing labwork. Bile acids to be performed today Current Medications Incurin

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and cystourethral junction 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.

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 4.7 cm in length. The right kidney measured 5.1 cm in length.

Adrenal Glands

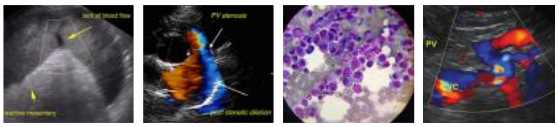
The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 1.9 cm length x 0.65 cm width at the caudal pole. The right adrenal gland measured 1.7 cm length x 0.47 cm width at the caudal pole. No evidence of adrenomegaly or adrenal tumors was noted.

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, echogenic nodules were present throughout the medial parenchyma adjacent to the medial capsule. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas. An example of a splenic nodule measured 0.82 cm diameter.

Liver/ Gallbladder

The liver exhibited subjective minor generalized 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



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signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.

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.

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.

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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Benign hepatopathy
- Age-related renal changes
- Benign splenic nodules - consistent with benign myelolipomas with potential areas of medial capsule fibrosis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, the liver was nonspecific yet consistent with benign hepatopathy. Considerations may include vacuolar hepatopathy, inflammatory / immune-mediated disease, or other hepatopathy. No evidence of overt gallbladder disease or post hepatic obstructive criteria. Further assessment may include; assuming normal clotting status, hepatic FNA cytology +/- Leptospirosis titer/PCR if potential exposure. Correlation with pending bile acids Is suggested. Hepatic functionality is likely normal, assuming normal albumin, glucose, BUN, and cholesterol levels.

Hepatosupportive medications including Denamarin +/- Ursodiol, due to its antioxidant and immunologic effects within the liver, may prove beneficial.

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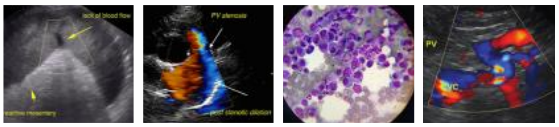

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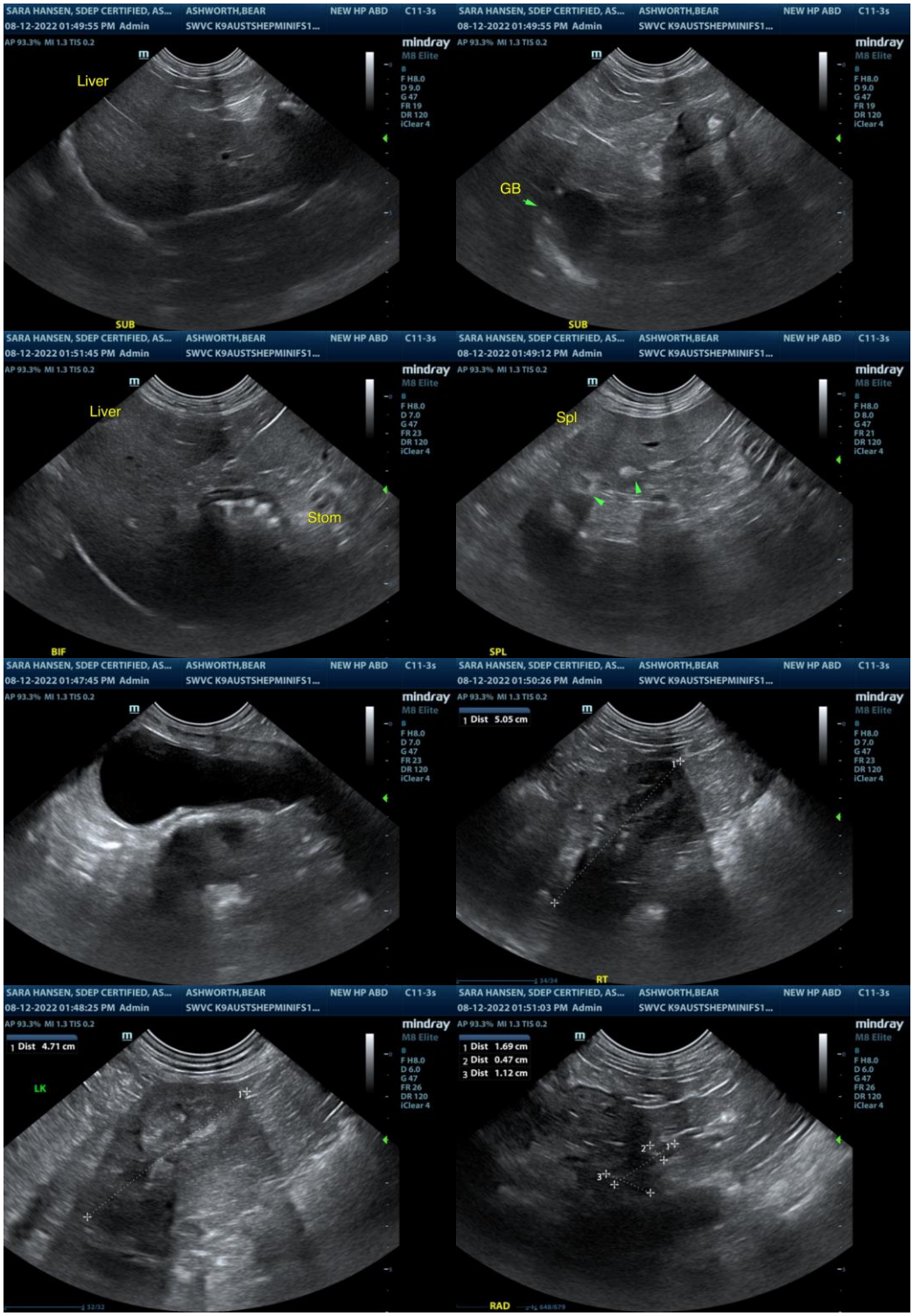

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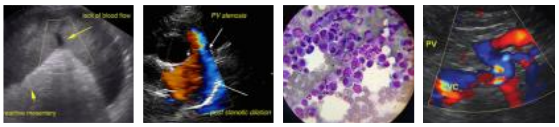

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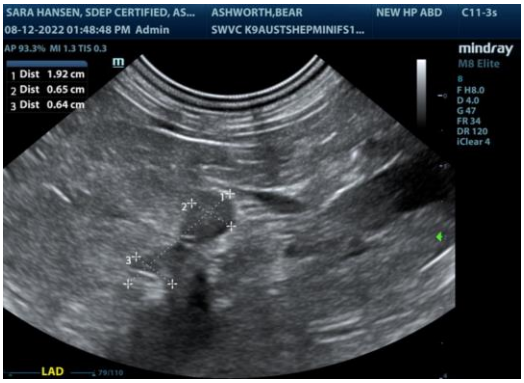

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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