

**PATIENT**

Hershey Blackert

**SPECIES**

Canine

**BREED**

Shih Tzu

**SEX**

NM

**AGE**

10 yrs

**WEIGHT**

15 lbs.

**INTERPRETED BY**R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Douglas

**INVOICE**

14640

**DATE**

8/17/22

**PRESENTING CLINICAL SIGNS**

PT presented for mass removal, pre-op bloodwork indicated higher liver values. started 1 month of denamarin. recheck values higher than prior. pt otherwise asymptomatic. Pt is having an ACTH stimulation test performed 8/17.

Abnormal PE/Chem/CBC/UA Results: July 13 ALT 128 U/L and ALKP 387 U/L August 10 ALT 164 U/L and ALKP 651 U/L

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

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.

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture.

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 4.4 cm in length. The right kidney measured 4.6 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.9 cm length x 0.62 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 1.5 cm length x 0.42 cm width at the caudal pole. No evidence of adrenomegaly or tumors was evident.

**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.

**Liver/ Gallbladder**

The liver presented enlarged in size. 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. Mild, non-dependent yet nonorganized, mildly hyperechoic gallbladder debris was

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present in the gallbladder with primarily anechoic content. The gallbladder was otherwise normal. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.

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***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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Shih Tzu

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.

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***Pancreas***

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

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***Free Abdomen***

No overt lymphadenopathy or peritoneal effusion was present.

**WEIGHT**

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**ULTRASONOGRAPHIC FINDINGS**

- Hepatopathy - subjectively benign
- Mild gallbladder debris (non-mucocele)
- Minor pancreatic remodeling - likely age-related changes
- Mild age-related kidneys
- Subjective normal bilateral adrenal glands

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS****IMAGING PERFORMED BY**

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The overall appearance of the liver was nonspecific yet consistent with benign hepatopathy. Considerations may include vacuolar hepatopathy and mild nonobstructive cholestasis, given the ALP elevation with potential for primary or concurrent inflammatory hepatopathy i.e., cholangiohepatitis, given the ALT elevation and presence of gallbladder debris.

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Further assessment may include hepatic FNA for screening cytology, assuming normal clotting status, primarily to assess for evidence of inflammatory cells. The addition of Ursodiol to hepatosupportive medications may prove beneficial.

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No overt anesthetic contraindications, assuming normal albumin, glucose, BUN, and cholesterol levels.

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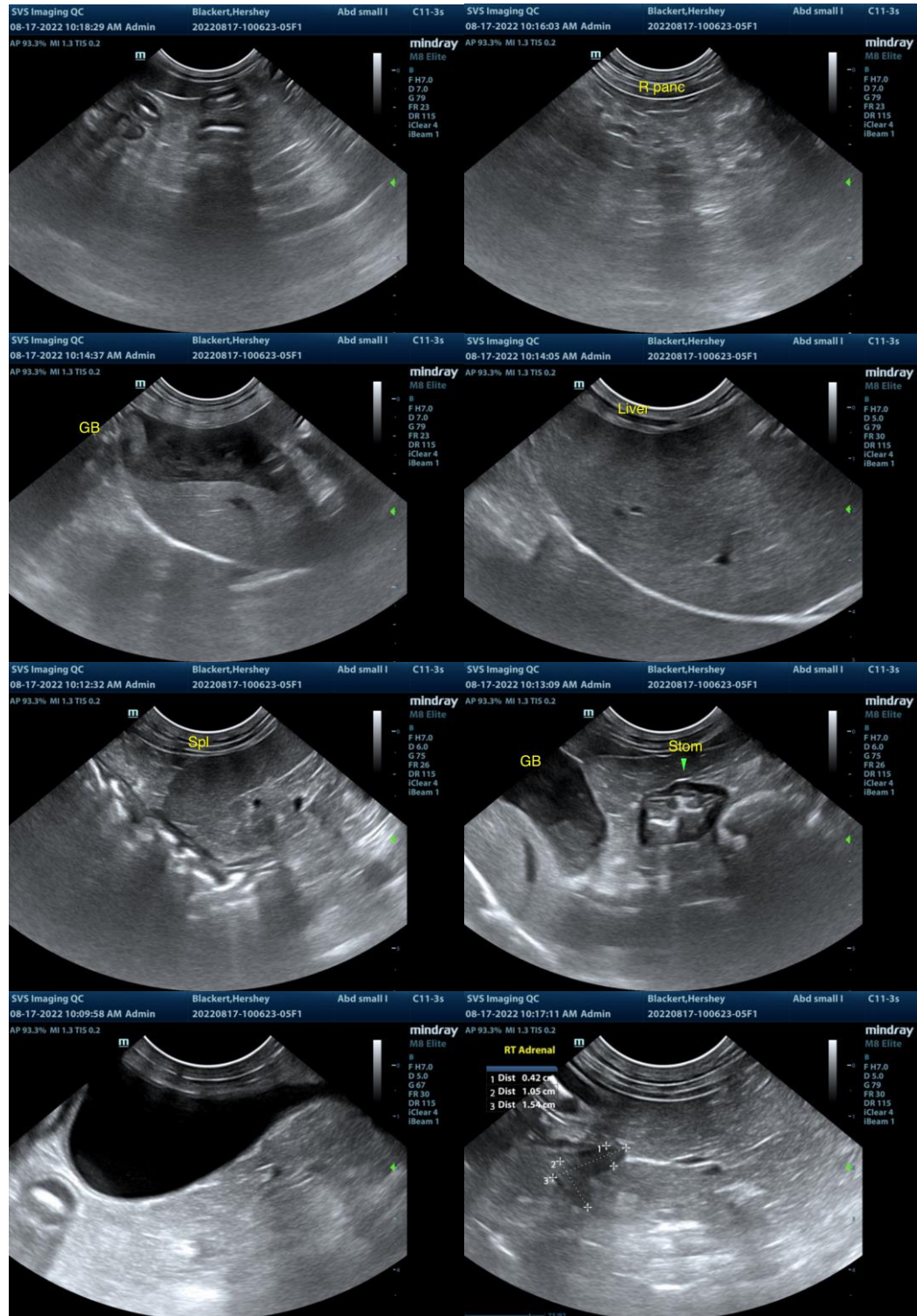
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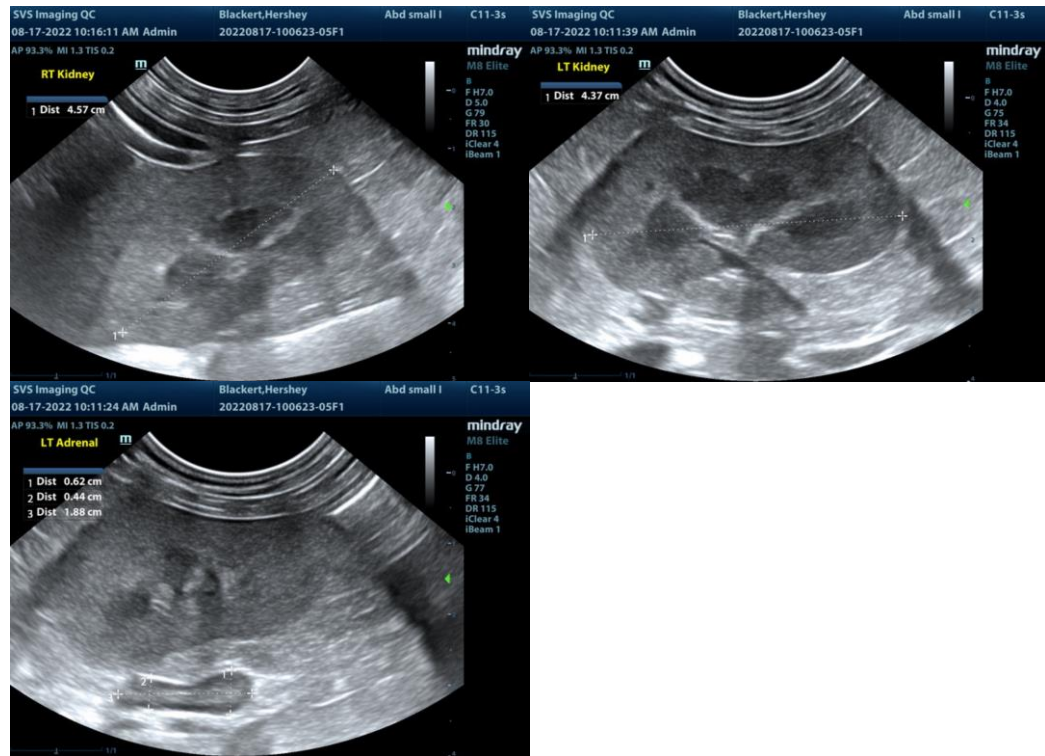
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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