



PATIENT

Sophie Deveaux

PRESENTING CLINICAL SIGNS

Elevated liver enzymes. Pre anaesthesia for dental.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild dependent to non-dependent hyperechoic sand/mineral. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

BREED

Pit Bull

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. Pinpoint areas of medullary mineral were present. The left kidney measured 6.4 cm in length. The right kidney measured 6.6 cm in length.

SEX

FS

AGE

5yr

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.56 cm width. No overt pathology in the area of the right adrenal gland.

WEIGHT

33kg

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.

INTERPRETED BY

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

Liver/Gallbladder

The liver was borderline to mildly subnormal in size with symmetrical capsule contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild to moderate coarse echotexture. Normal vascular volume. Subjective mild increased prominence of portal vascular borders was present. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with mild non-organized hyperechoic sediment. The cystic and common bile ducts were normal.

IMAGING PERFORMED BY

Dave Stasiuk RDMS,
RDCS

HOSPITAL NAME

Prairie Winds Animal
Clinic

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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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.

INVOICE

14656ag

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

Pancreas

DATE

08/18/2023



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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.

SPECIES

Canine

Free Abdomen

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

BREED

Pit Bull

ULTRASONOGRAPHIC FINDINGS

- Mild primarily dependent to non-dependent urinary bladder lumen sand/mineral.
- Pinpoint bilateral renal medullary mineral.
- Hepatopathy with subjective borderline/mild subnormal size.
- Mild gallbladder sediment (non-mucocele)

SEX

FS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

5yr

The liver presentation is consistent with benign hepatopathy. Considerations may include vacuolar hepatopathy, inflammatory/immune mediated disease, toxin (copper) or other hepatopathy possible. Potential for vascular anomaly given evidence of pinpoint renal medullary and urinary bladder lumen mineral cannot be excluded.

WEIGHT

33kg

Bile acid assessment is warranted and is recommended prior to any potential anesthesia. A leptospirosis titer/PCR may be considered if clinically indicated or if potential exposure/endemic to the area. Hepatic sampling may be considered. A hepatic core surgical biopsy is likely required for a definitive diagnosis. Empirically Hepatosupportive medications such as Denamarin and Ursodiol may prove beneficial.

INTERPRETED BY

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(Canine and Feline)

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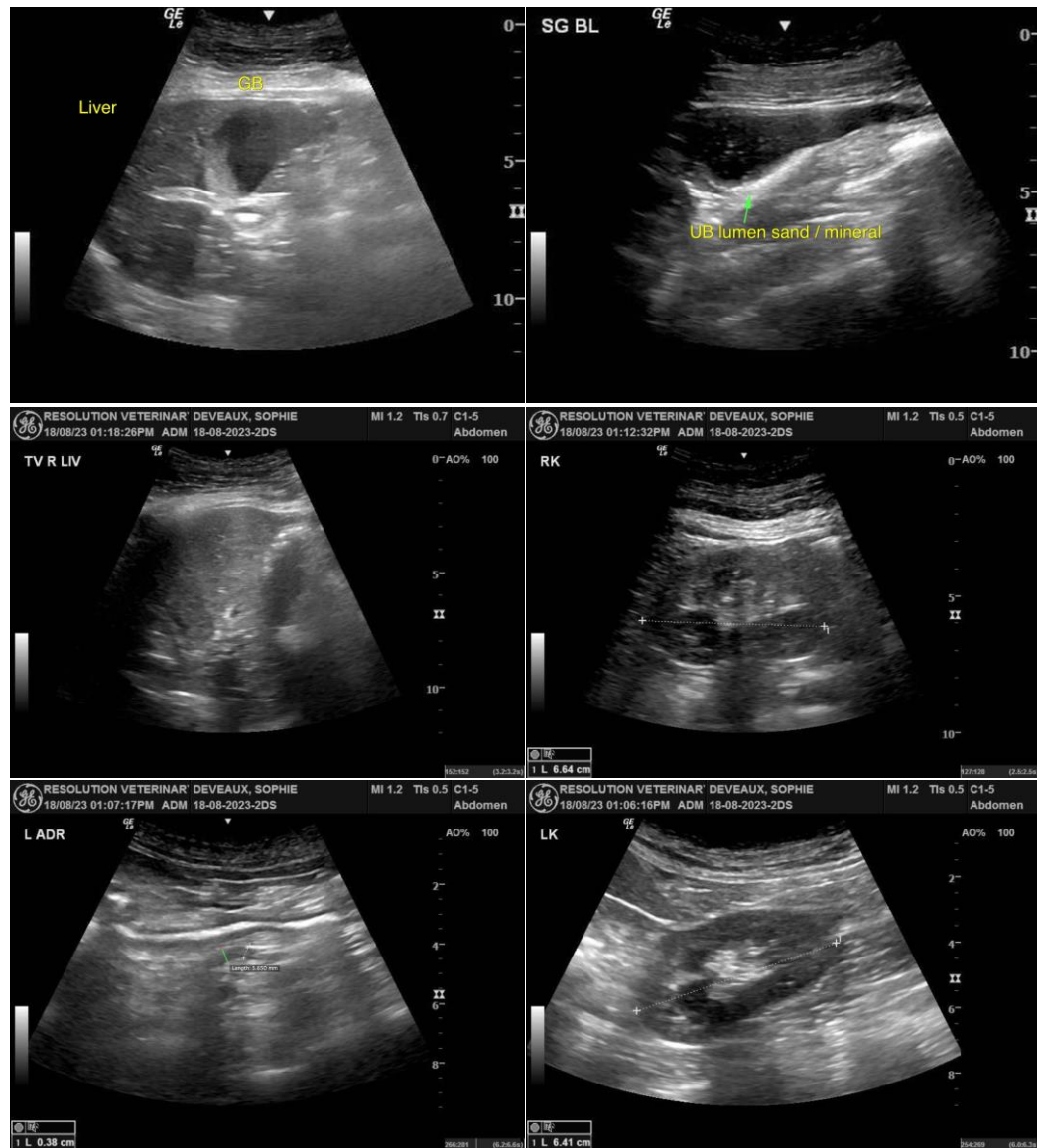
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DATE

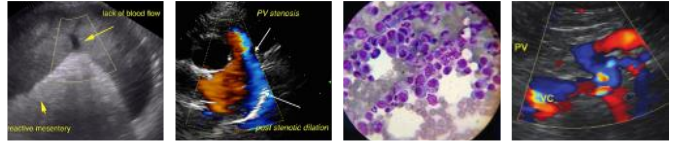
08/18/2023



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



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