



PATIENT

Oreo Mielnih

PRESENTING CLINICAL SIGNS

History: Increased ALP

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: ALP 440, PLT 503

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Shih Tzu

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 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

MN

Normal size and margination was 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 4.6 cm in length. The right kidney measured 4.7 cm in length.

AGE

12yr

The area of the aortic trifurcation was free of pathology.

The residual prostate was free of pathology measuring 0.67 cm in diameter.

WEIGHT

23lb

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.58 cm width at the caudal pole and 2.2 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.50 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 mild parenchyma heterogeneity with intermittent non-disruptive hypoechoic nodules, an example measuring 0.53 cm in diameter. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

IMAGING PERFORMED BY

Jessica Miller

Liver

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. The gallbladder was non-distended in size with primarily anechoic luminal content and very minor echogenic luminal debris. The cystic and common bile ducts were normal.

HOSPITAL NAME

Newton Veterinary
Hospital

REFERRING VET

Dr. Barron

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.

INVOICE

11460ag

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.

DATE

08/22/2022

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



PATIENT

Pancreas

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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 overt lymphadenopathy or peritoneal effusion was present.

BREED

Shih Tzu

ULTRASONOGRAPHIC FINDINGS

SEX

MN

- Benign hepatopathy-probable vacuolar hepatopathy
- Minor gallbladder debris (non-mucocele)
- Mild age-related kidney changes
- Normal bilateral adrenal glands
- Splenic nodules-likely benign, focal hyperplasia, granulomas or similar

AGE

12yr

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

23lb

Assuming normal clotting status and using a 25g needle a hepatic FNA is recommended for screening cytology. Inflammatory hepatic disease is considered a less likely diagnosis, no evidence of neoplastic criteria was observed. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial.

Sonographic monitoring of the splenic nodules for evidence of progression would be ideal.

No suspicion of Cushing's syndrome given the normal adrenal presentation and lack of clinical signs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

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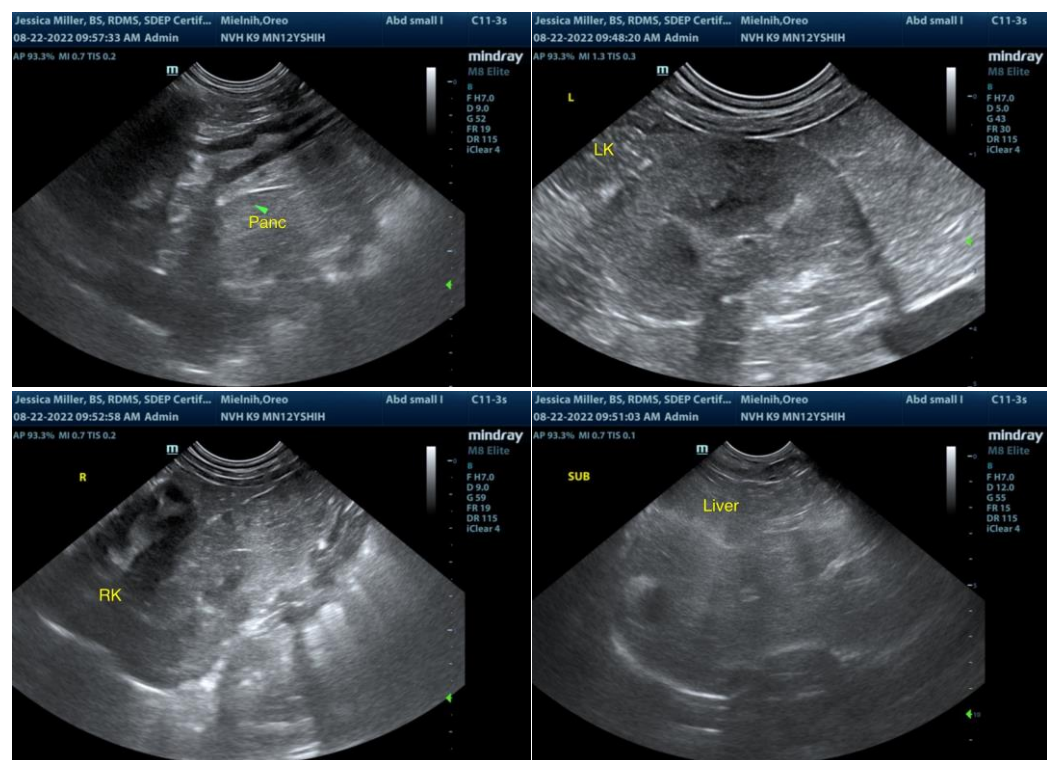
Dr. Barron

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SPECIES

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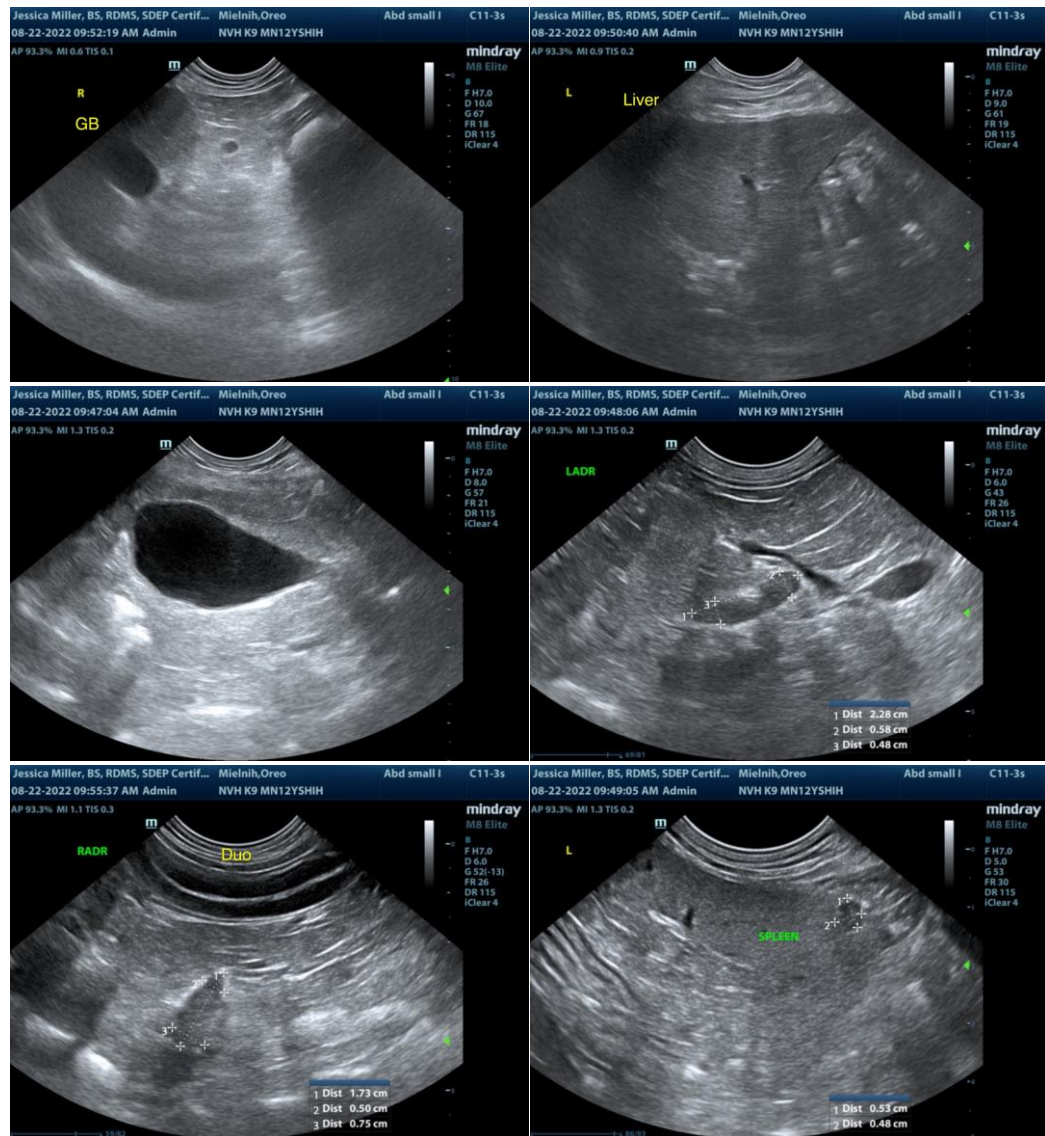
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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