



PATIENT

Bruno Froggatt

SPECIES

Canine

BREED

Lab

SEX

MN

AGE

13 yrs

WEIGHT

64 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. A. Rodriguez

HOSPITAL NAME

Foxfield VS

REFERRING VET

Dr. A. Rodriguez

INVOICE

14688

DATE

8/24/22

PRESENTING CLINICAL SIGNS

Elevated liver values and oral pain suspected

Abnormal PE/Chem/CBC/UA Results: Glob: 4, ALT: 390, Alk: 673, GGT:4, USG: 1.021, U/A WNL.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was mildly subnormal in size owing to lack of urine distention. Mild anechoic urine was present in the urinary bladder. No overt evidence of inflammatory or neoplastic urinary bladder changes was noted. The urethra exhibited normal structure and tone to a depth of 3.0 cm.

The area of the residual prostate was free of overt pathology.

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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint areas of medullary mineralization was noted in both kidneys. The left kidney measured 6.9 cm in length. The right kidney measured 6.3 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 2.8 cm length x 0.86 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 2.3 cm length x 0.8 cm width at the caudal pole.

Spleen

The spleen exhibited potential for mild generalized enlargement with maintained symmetrical capsule contour and a finely textured homogeneous parenchyma. Folding of the spleen was present, which may be a patient variant and not indicative of overt splenic pathology. Normal splenic vascularity was present.

Liver/ Gallbladder

The liver was mildly enlarged in size. The liver was mildly hypoechoic compared to the spleen and renal cortical parenchyma with a mild coarse echotexture. Mild increased prominence of the portal vascular borders was evident. The capsule of the liver was normal in margination. Distinct masses or nodules were not evident. The hepatic and portal vasculature were normal in appearance. The gallbladder was distended in size.

The gallbladder contained primarily anechoic content with mild nondependent particulate to mildly hyperechoic luminal gallbladder debris. The gallbladder walls were sonographically normal. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. No overt evidence of common bile duct dilation, stasis, or post-hepatic obstructive pattern was noted.



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Gastrointestinal

The stomach presented intact yet prominent wall layering with a mild amount of retained anechoic gastric fluid. The gastric body wall width measured 0.56 cm.

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 small intestinal wall width measured 0.33 cm.

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

A small pocket of scant free fluid was noted between the liver lobes.

Solitary medial Iliac lymph node was present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). The lymph node measured 2.6 cm x 0.69 cm. The lymph node was not consistent with inflammatory or neoplastic criteria and likely incidental.

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy - subjectively acute to potential acute on chronic
- Mildly distended gallbladder with mild luminal debris (non-mucocele)
- Possible gastritis and mild gastric stasis
- Mild splenomegaly with folding - subjectively benign
- Small pocket of perihepatic free fluid

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall appearance of the liver was nonspecific yet sonographically suggestive of acute to possible acute on chronic hepatopathy. Considerations may include vacuolar hepatopathy, nonspecific hepatitis (viral, bacterial, Leptospirosis, toxin), noncardiogenic hepatic congestion, reactive hepatopathy or occult neoplasia.

Further assessment of the liver may include assuming normal clotting status, hepatic FNA cytology, and Leptospirosis titers / PCR, if endemic to the area or potential exposure. Concurrent screening splenic FNA, using a 25-gauge needle, could be considered yet the splenic presentation is suggestive of hyperplasia, hematopoiesis, or potential incidental splenitis.

Empirical therapy may include as-needed GI support if clinical signs consistent with gastritis are present along with hepatosupportive medications such as Denamarin and Ursodiol pending hepatic cytology.



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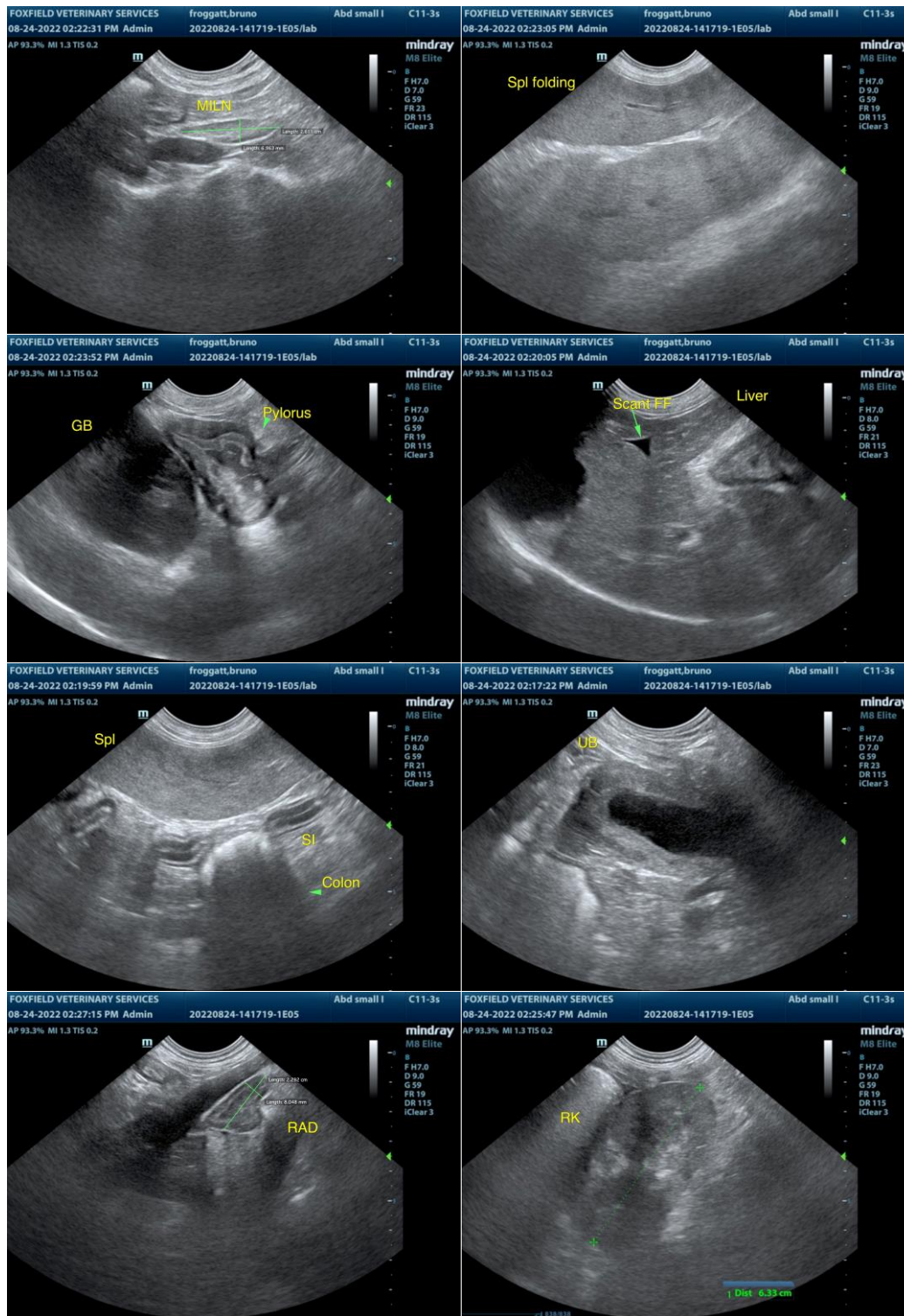
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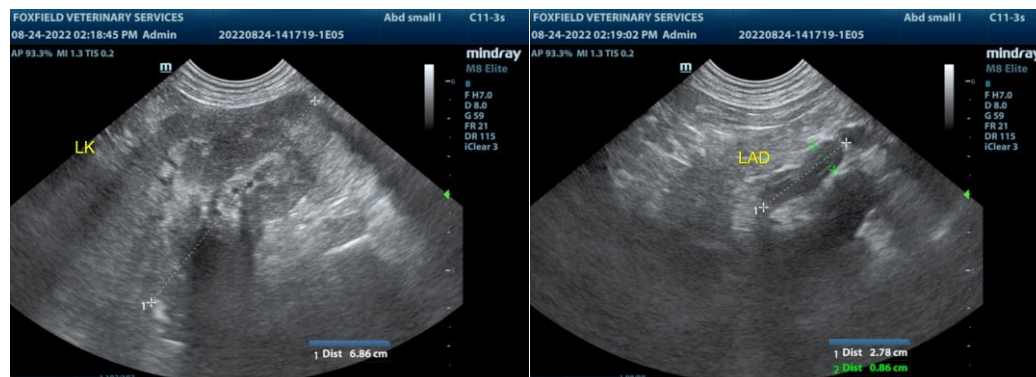
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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