



PATIENT

Miky Airapetyan

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

MN

AGE

7

WEIGHT

4.4kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Chaparral Vet Clinic

REFERRING VET

Dr. Gadzeva

INVOICE

11274ag

DATE

08/05/2022

PRESENTING CLINICAL SIGNS

History: Previous scan Radterra July 2020. Diag subjective microhepatica. Renal mineralization.

Abnormal PE/Chem/CBC/UA Results: Mild elevation ALP and cPK and persistent proteinuria

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

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 minor loss of corticomedullary symmetry and definition expected for the age of the patient. Bilateral small medullary renoliths were present. No evidence of pelvic dilation was present. The left kidney measured 3.4 cm in length. The right kidney measured 3.6 cm in length.

The area of the aortic trifurcation was free of pathology.

The residual prostate was normal in presentation measuring 0.62 cm in diameter. A small nonobstructive prostatic urethral calculus measuring 0.37 cm was present.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.46 cm width at the caudal pole and 0.37 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.47 cm width at the caudal pole and 0.48 cm width at the cranial pole.

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

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with mild variably echogenic sludge in the caudal lumen into the cystic biliary duct. 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.



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

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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 was evident.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

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Yorkshire Terrier

ULTRASONOGRAPHIC FINDINGS

SEX

- Mild urinary bladder mineral
- Focal small prostatic urethral calculus-non obstructive
- Bilateral mild kidney changes with non-obstructive medullary renolithiasis
- Mild hepatic parenchyma remodeling with normal hepatic volume
- Mild gallbladder debris (non-mucocele)

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

4.4kg

Urine C/S on sterile urine sample recommended if not recently done. A UPC level could also be considered if no evidence of inflammatory cells. This patient may be passing small amounts of mineral from the kidneys into the bladder. Ideally identification of potential crystal type may aid in empirical therapy.

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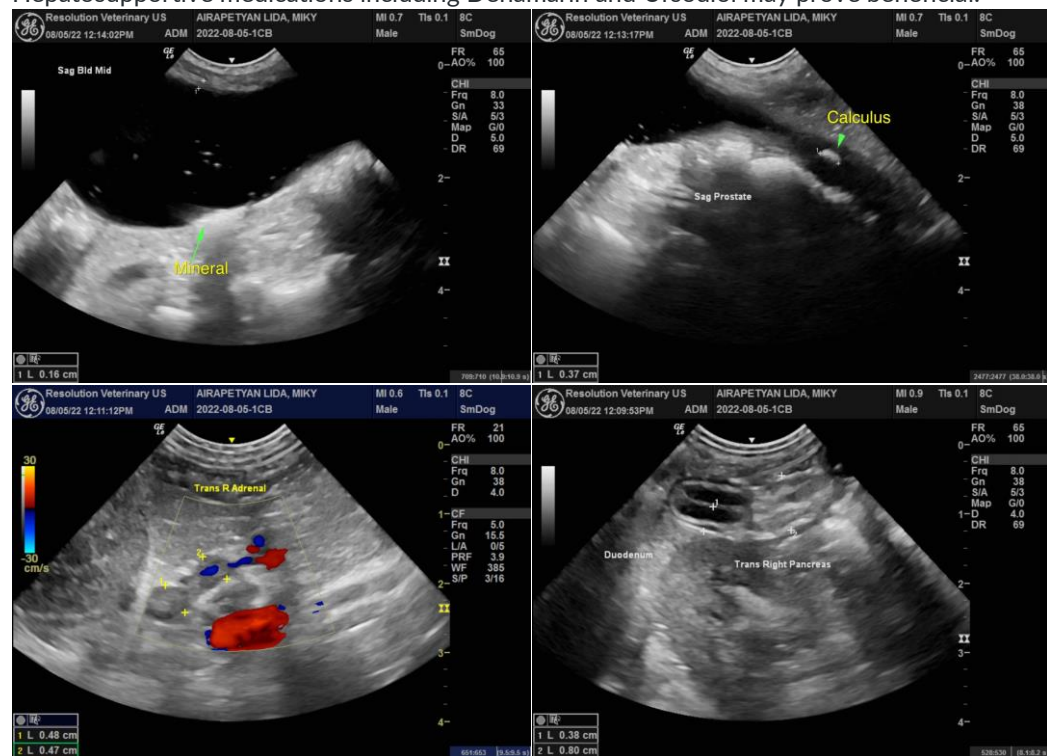
No overt evidence of a portosystemic vascular anomaly yet bile acid testing could be considered. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial.

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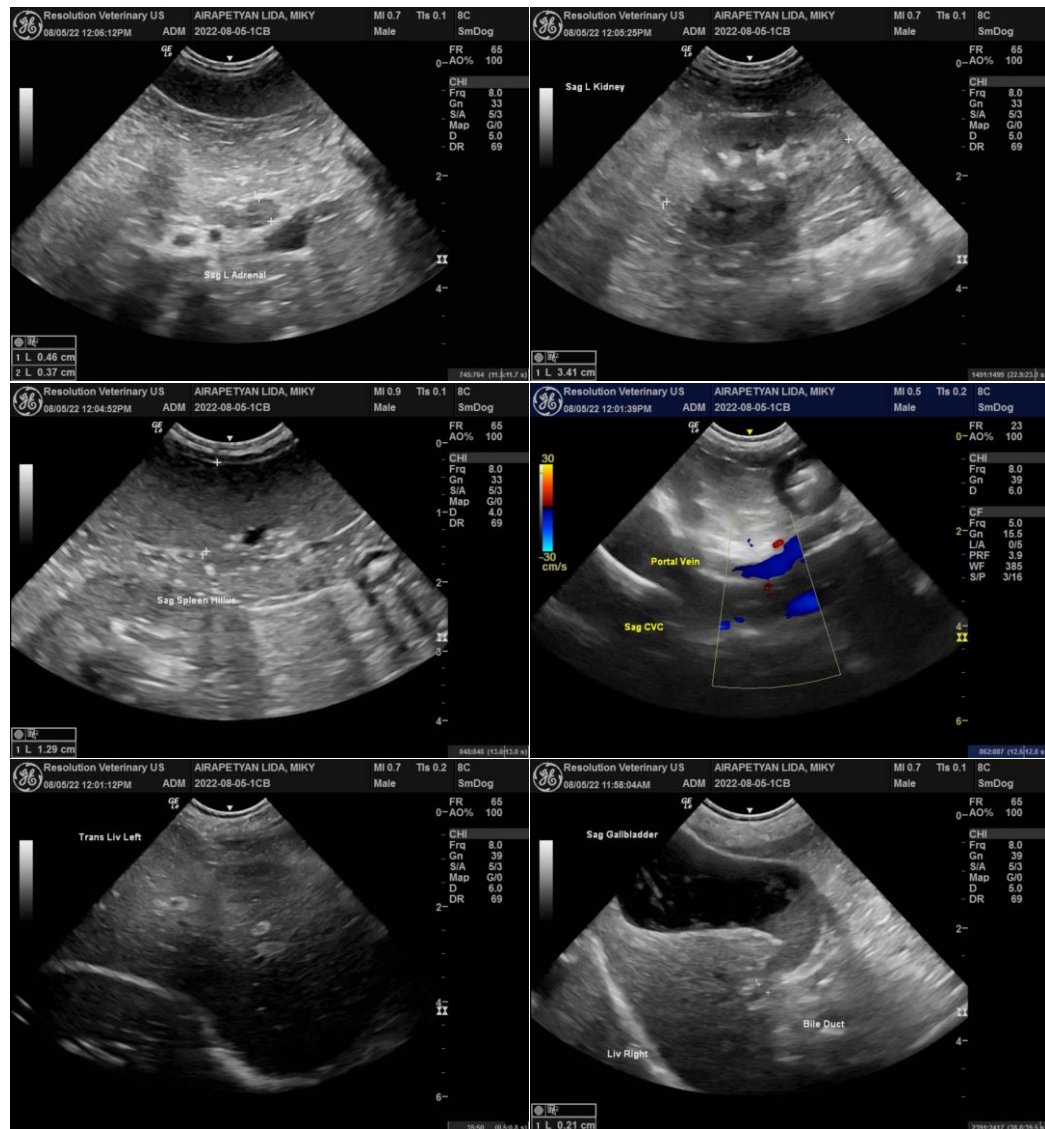
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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