



PATIENT	PRESENTING CLINICAL SIGNS
Rosea Cerbantes	INGUINAL HERNIA INTACT FEMALE Abnormal PE/Chem/CBC/UA Results: MILD ELEVATED ALT 254 NORMAL REFERENCE (12-118)
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder was mildly subnormal in size owing to lack of urine distention. No evidence of sediment or calculi.
Dachshund X	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. The kidneys measured 4.0 cm each.
SEX	Adrenal Glands
Female	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.46 cm at the cranial pole and 0.43 cm at the caudal pole. The right adrenal gland was not definitively visualized.
AGE	Spleen
9 Years	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.
WEIGHT	Liver
14.5	The liver exhibited subjective mild generalized enlargement. 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 moderate, mildly inspissated to non-dependent yet non-organized debris. The cystic duct and common bile ducts were normal without evidence of dilation.
INTERPRETED BY	Gastrointestinal
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	Small Intestine
Dr. Sharkaway	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.
HOSPITAL NAME	Large Intestine
Kew Gardens AH	Normal visible colon wall layers were present with apparent formed feces in lumen.
REFERRING VET	Pancreas
Dr. Sharkaway	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.
INVOICE	Free Abdomen
25344	No obvious pathology in the area of the uterus or bilateral ovaries.
DATE	
9/13/21	



PATIENT

Rosea Cerbantes

SPECIES

Canine

BREED

Dachshund X

SEX

Female

AGE

9 Years

WEIGHT

14.5

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Sharkaway

HOSPITAL NAME

Kew Gardens AH

REFERRING VET

Dr. Sharkaway

INVOICE

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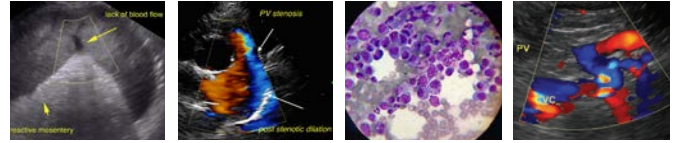
ULTRASONOGRAPHIC FINDINGS

- Hepatopathy – subjectively benign
- Moderate, mildly inspissated to non-dependent gallbladder debris (non-mucocele)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall appearance of the liver is consistent with benign hepatopathy. Primary consideration for inflammatory hepatic parenchymal or hepatobiliary process, given the elevated ALT and presence of gallbladder debris. Assuming normal clotting status, hepatic FNA using 25-gauge needle may be considered for screening cytology and potential identification of inflammatory cell type. However, given the relatively low-grade ALT elevation at this time, hepatosupportive medications including Denamarin and Ursodiol with continued monitoring would be appropriate. No evidence of a portosystemic vacuolar anomaly. Hepatic functionality is likely normal, assuming normal BUN, glucose, albumin and cholesterol levels. No overt anesthetic contraindications.





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SEX

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**IMAGING
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Dr. Sharkaway

HOSPITAL NAME

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REFERRING VET

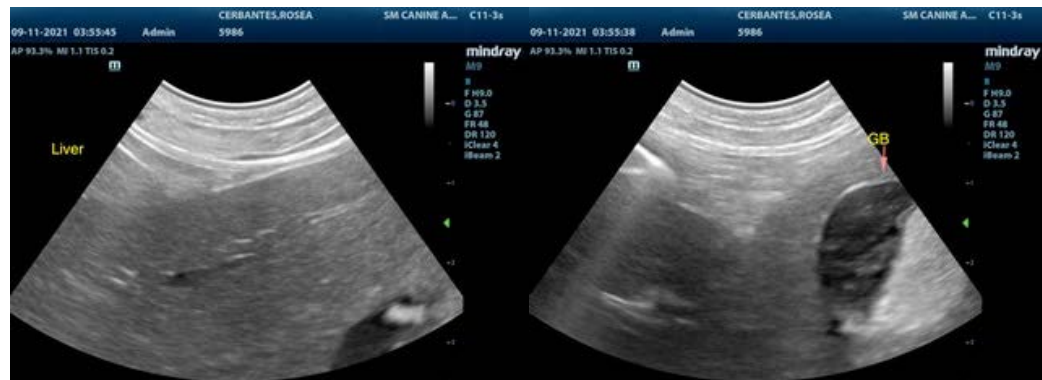
Dr. Sharkaway

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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