



PATIENT

Simba Siso

SPECIES

Canine

BREED

Morkie

SEX

Male Neuter

AGE

3

WEIGHT

4.8 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Chaparral AH

REFERRING VET

Dr. Gadzeheva

INVOICE

14916

DATE

9-20-22

PRESENTING CLINICAL SIGNS

Vomiting suspect MHVD - pancreatitis
Abnormal PE/Chem/CBC/UA Results: Moderate elevation ALT normal bile acids

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

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 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. No evidence of renomegaly or renal calculi. The left kidney measured 3.7 cm in length. The right kidney measured 4.2 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 0.35 cm width at the caudal pole and 0.36 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 0.45 cm width at the caudal pole and 0.37 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/ Gallbladder

The liver exhibited normal to possible subnormal size with normal structure and contour. Subjective normal hepatoportal vascular volume was present. The visualized portal vein and caudal vena cava appear to be of similar size with subjective normal portal vein volume and laminar flow. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. 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

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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 were evident.

Canine

BREED

Free Abdomen

Morkie

No overt lymphadenopathy or peritoneal effusion was present.

SEX

ULTRASONOGRAPHIC FINDINGS

Male Neuter

- Low-grade hepatopathy - low-grade inflammatory hepatopathy, potential for microvascular dysplasia / portal vein hypoplasia
- Overtly normal pancreas
- Suspect mild gastritis

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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No overt evidence of intrahepatic or extrahepatic shunting was noted. FNA could be considered for screening hepatic cytology, primarily to assess for or possibly identify inflammatory cell type, if present. Core surgical biopsy is likely necessary for further definitive as to whether underlying mild inflammatory disease vs. portal hypoplasia / microvascular dysplasia is present. No overt evidence of gastrointestinal structural pathology, active pancreatitis, or GI metabolic or mechanical ileus. As-needed gastrointestinal support is suggested.

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Hepatic diet, as well as Hepatosupportive medications including Denamarin +/- Lactulose if clinically indicated, may be considered.

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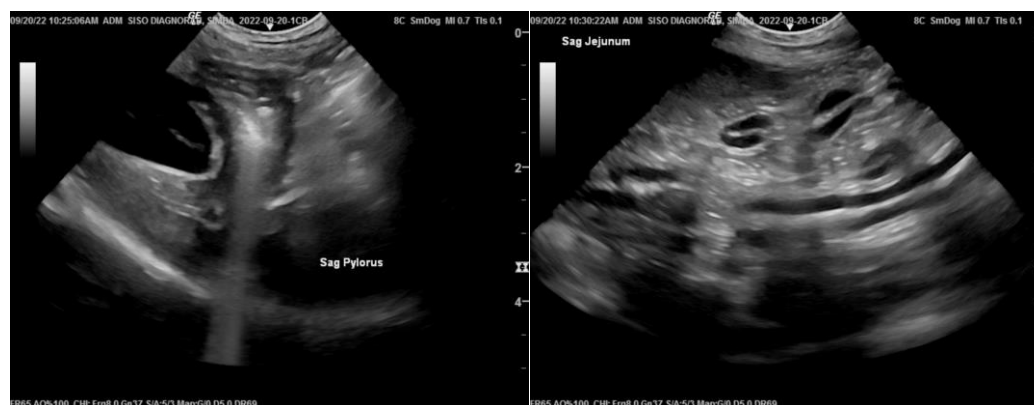
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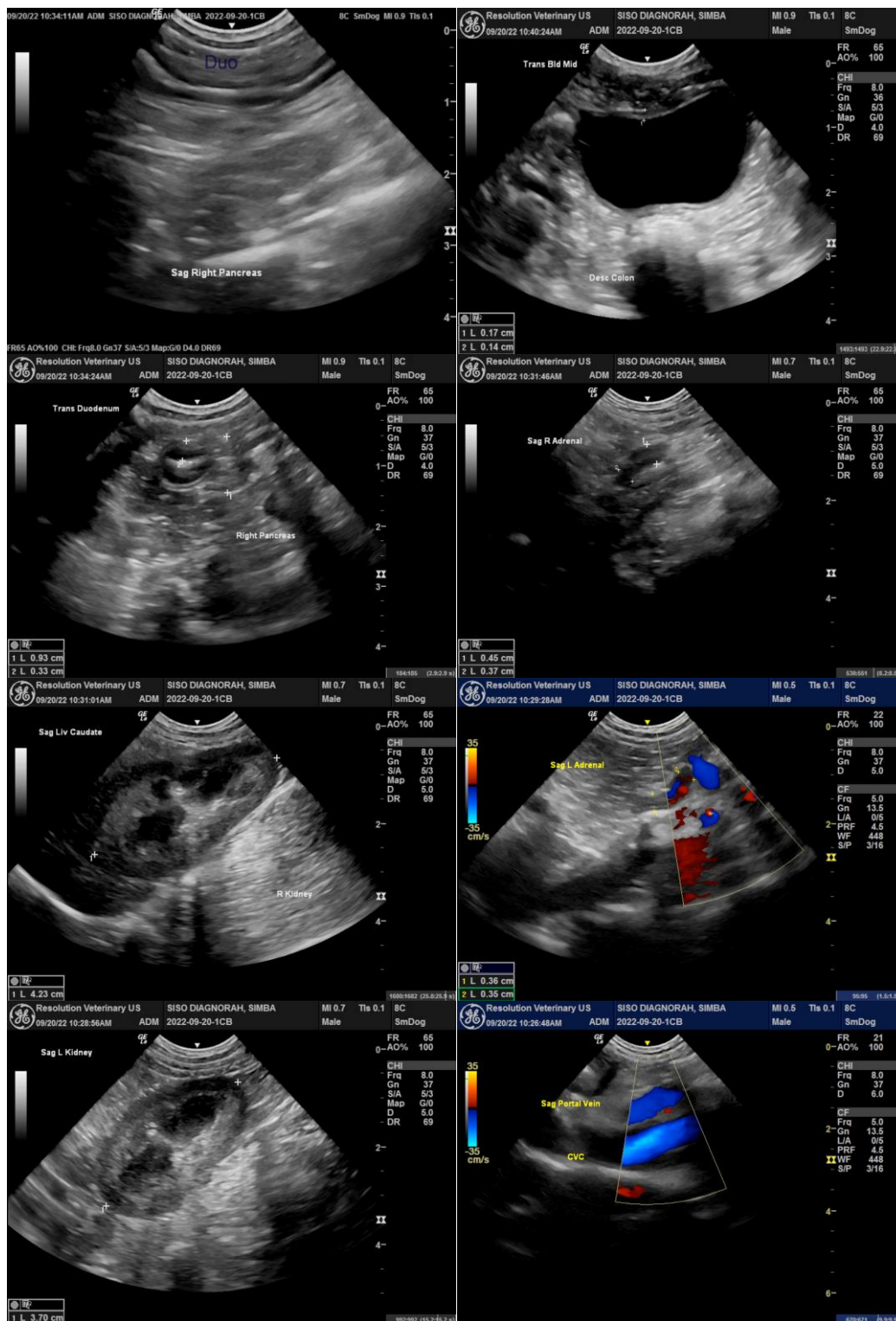
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@SonoPath.com