



PATIENT PRESENTING CLINICAL SIGNS

Fella Nairn Fella has had some intermittent vomiting. On 7-29-21 CBC/Chem- ALT-616; ALP-1406; GGT-23 Was treated with amoxicillin, metronidazole, and Denamarin On 8-31-21 CBC/Chem- ALT501; ALP- 1651' GGT-20

SPECIES Abnormal PE/Chem/CBC/UA Results: See History

Canine **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

BREED *Urinary System*

Lab The urinary bladder normal thickness and tone. Primarily anechoic urine was present in the lumen. Subjective mild dependent, non-particulate sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

SEX Intact Male The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured 3.0 cm in diameter.

AGE 10 Years 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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint areas of dystrophic medullary mineralization were present in both kidneys. The left kidney measured 8.3 cm. The right kidney measured 8.2 cm.

WEIGHT 76.2 Pounds

Adrenal Glands

INTERPRETED BY The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.84 cm at the cranial pole and 0.80 cm at the caudal pole. The right adrenal gland measured 1.1 cm at the cranial pole and 0.83 cm at the caudal pole.

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DVM, DABVP
(Canine and Feline)

Spleen

IMAGING PERFORMED BY The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.

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Liver

The liver presented enlarged in size. Mild to moderate coarse echotexture noted with evidence of minor hepatic parenchymal remodeling. 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 mild to moderate echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

Gastrointestinal

DATE

9/3/21

The visualized stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was primarily empty with mild luminal gas. No overt evidence of retained ingesta, fluid or foreign material. Gastric body wall measured 0.36 cm.



PATIENT The visualized segments of small intestine were sonographically unremarkable.

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

Pancreas

SPECIES 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.

Canine

BREED *Free Abdomen*

Lab No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- SEX**
- Urinary bladder sediment
- Intact Male
- Benign prostatic hyperplasia, mild
- AGE**
- Mild age related kidneys
- 10 Years
- Non-specific hepatopathy – subjectively benign
 - Mild to moderate gallbladder debris – non-mucocele
- WEIGHT**
- Subjectively normal stomach

76.2 Pounds **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended.

INTERPRETED BY

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The appearance of the liver was nonspecific but most consistent with benign hepatopathy. Considerations for the liver may include benign vacuolar hepatopathy in light of the elevated ALP or inflammatory hepatic disease in light of the elevated ALT. No overt evidence of hepatic neoplasia which is considered unlikely. Ultrasound guided FNA of the liver using a 25-gauge needle and assuming normal coagulation parameters would be warranted for screening cytology, primarily to assess for evidence of inflammatory cells and to rule out unlikely neoplasia. Continued hepatosupportive medications such as Denamarin or Vitamin E as well as Ursodiol due to its antioxidant and immunomodulatory effects within the liver would be warranted, although these medications may not result in decreased hepatic enzyme levels. Hepatic core biopsy may be required for definitive diagnosis. Without evidence of overt gastrointestinal pathology or ileus, the vomiting in this patient may be owing to hepatic disease. As-needed gastrointestinal support indicated.

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PATIENT

Fella Nairn

SPECIES

Canine

BREED

Lab

SEX

Intact Male

AGE

10 Years

WEIGHT

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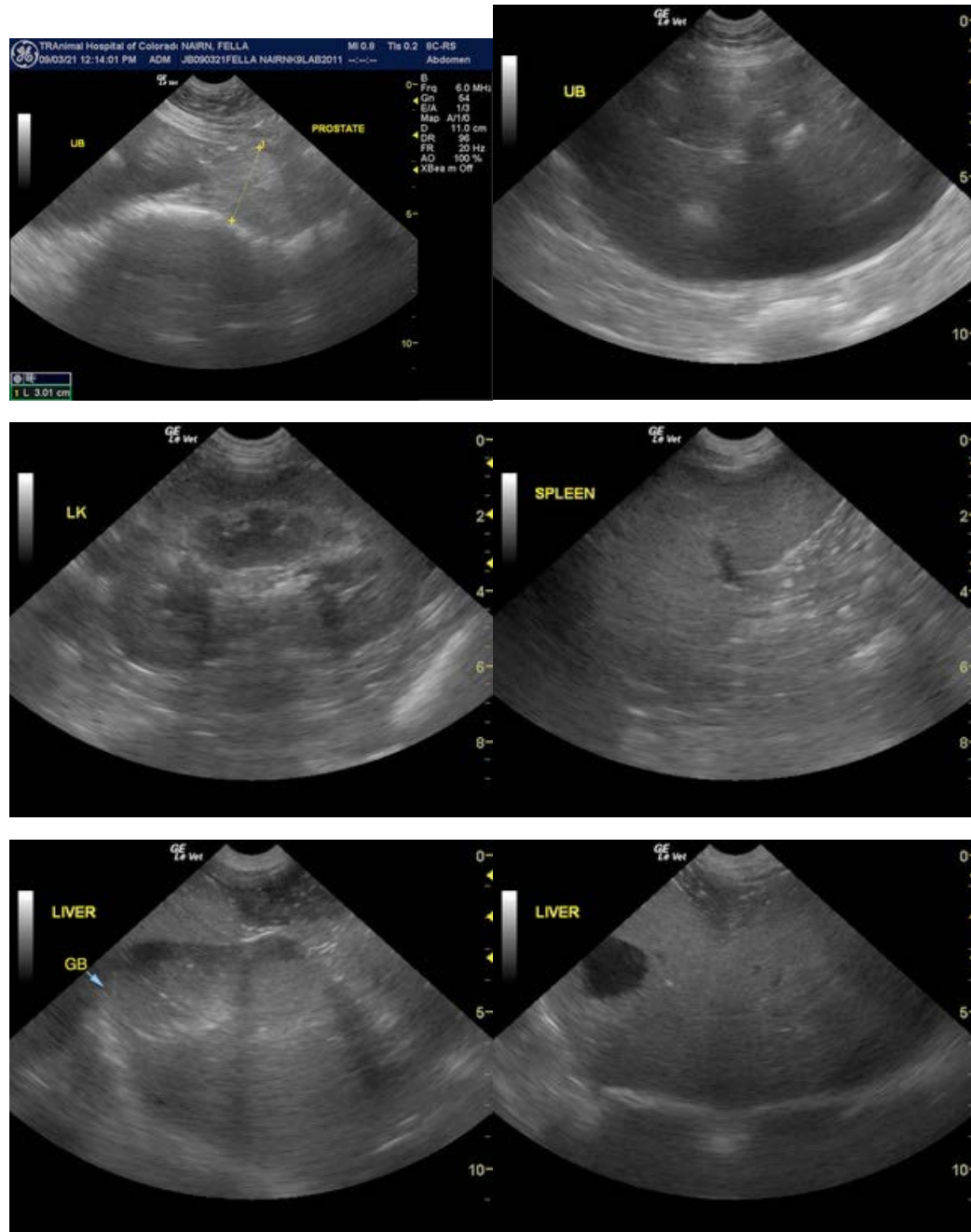
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PATIENT

Fella Nairn

SPECIES

Canine

BREED

Lab

SEX

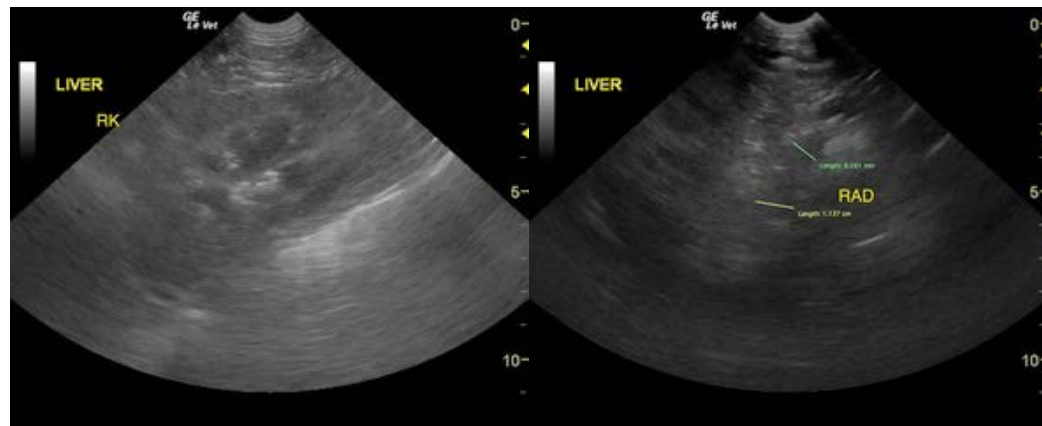
Intact Male

AGE

10 Years

WEIGHT

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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.

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