



PATIENT PRESENTING CLINICAL SIGNS

Hero Garrett Overweight and very frantic. Recent TPLO. Initial elevation in ALT during presurg bloodwork for TPLO surgery. Patient placed on Zentonil for 1 month. Recheck bloodwork performed showed further increase in ALT. No other abnormalities noted. Was previously on Onsior, but stopped after receiving blood results.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Shiloh Shepherd

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic 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 4.4 cm x 4.3 cm. Anechoic, thinly walled parenchyma cysts were present.

AGE

7 Years

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 left kidney measured 7.7 cm. The right kidney measured 7.5 cm.

WEIGHT

52.8 kg

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

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 0.63 cm at the caudal pole. The right adrenal gland was indistinctly visualized owing to patient size without overtly pathology, subjectively measuring 0.80 cm at the caudal pole.

IMAGING PERFORMED BY

Crystal Hill

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.

HOSPITAL NAME

Graham Animal
Hospital

Liver

The liver presented enlarged in size. 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 primarily anechoic luminal content. The cystic and common bile ducts were normal.

REFERRING VET

Dr. Sutton

INVOICE

25967

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.

DATE

9/30/21



PATIENT

Hero Garrett

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.

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

SPECIES

Canine

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.

BREED

Shiloh Shepherd

ULTRASONOGRAPHIC FINDINGS

SEX

Intact Male

- Hepatopathy – subjectively benign
- Mild prostatomegaly with parenchymal cysts – benign prostatic hyperplasia with parenchymal cysts likely, minor potential for prostatitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

7 Years

The overall liver was non-specific, yet suggestive of benign hepatopathy. Given the increasing ALT, considerations may include non-specific hepatitis (immune mediated, infectious, or other), hepatotoxicosis (i.e., copper storage hepatopathy), reactive hepatopathy, vacuolar hepatopathy or other. Hepatic neoplasia is considered a less likely differential diagnosis without overt evidence of neoplastic criteria. Assuming normal clotting status, hepatic FNA for screening cytology may be considered. Leptospirosis titers/PCR (if clinically indicated or if potential exposure) would be warranted. Hepatic core biopsy for histopathology, tissue culture and sensitivity and copper assessment may be required for definitive diagnosis. Empirically, hepatosupportive medications including Denamarin +/- Ursodiol due to its antioxidant and immunomodulatory effects within the liver may prove beneficial.

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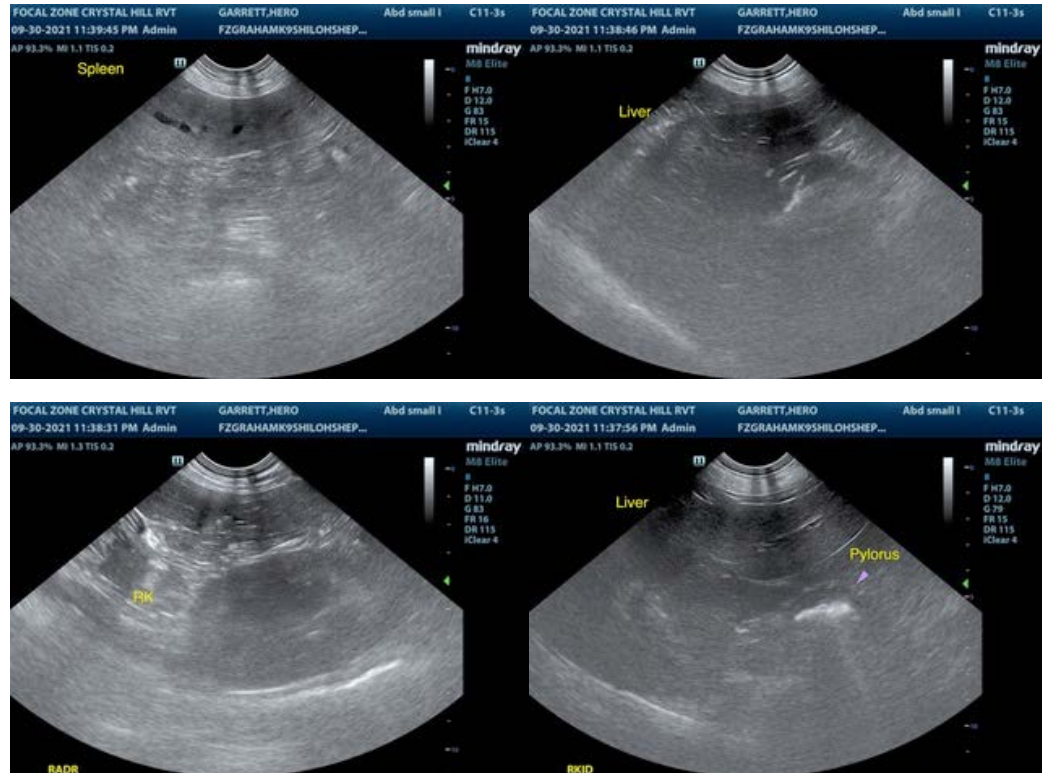
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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