



PATIENT

William Hernandez

PRESENTING CLINICAL SIGNS

Increased liver enzymes. No current meds.
Abnormal PE/Chem/CBC/UA Results: Neu 12.13, MCHC 30.9, MPV 11.5, ALB 4.1, ALKP 1454, ALT 255. USG 1.022

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Boston Terrier

The urinary bladder 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

Neutered Male

The residual prostate 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. The left kidney measured 4.8 cm. The right kidney measured 5.4 cm.

AGE

9 Years

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

27 Pounds

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 0.78 cm at the cranial pole and 0.73 cm at the caudal pole. The right adrenal gland measured 0.88 cm at the cranial pole and 0.57 cm at the caudal pole.

INTERPRETED BY

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

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, echogenic nodules were present throughout the cranial to caudal 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

BPH of Bridgewater

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 mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate echogenic ingesta with mild progressive distal acoustic shadowing, most consistent with post prandial presentation without signs of ileus, obstruction or foreign material.

DATE

9/30/21

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Segmental mild echogenic non-shadowing digesta was present.



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

William Hernandez

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

PRIMARY FINDINGS

BREED

- Hepatopathy – subjectively benign.
- Mild gallbladder debris (non-mucocele)
- Gastric ingesta – probable post-prandial presentation.

Boston Terrier

SEX

SECONDARY FINDINGS

Neutered Male

- Benign splenic nodules – consistent with probable myelolipomas.

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

9 Years

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. 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.

WEIGHT

27 Pounds

Potential for underlying adrenal disease is considered unlikely given the lack of reported clinical signs and urine specific gravity > 1.020. Adrenal workup could be considered if clinical suspicion of hyperadrenocorticism, although thought unlikely.

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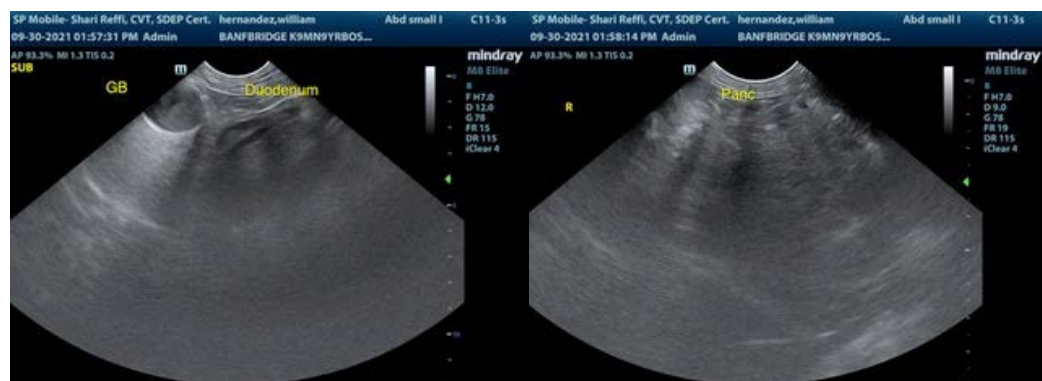
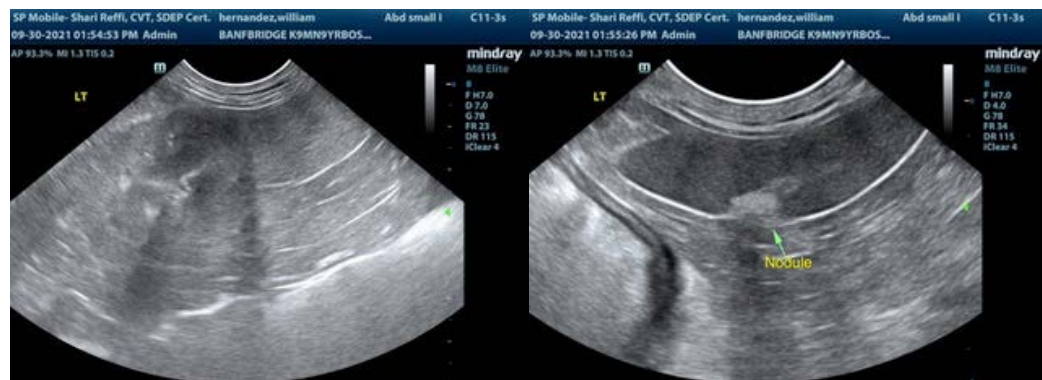
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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