



PATIENT PRESENTING CLINICAL SIGNS

Governor Smith Suspected MVD/portal hypoplasia. Had elevated liver values which prompted AUS. AUS suspected possible PSS; submitting CT to further assess.

SPECIES COMPUTED TOMOGRAPHIC STUDY OF THE ABDOMEN

Canine Plain and post contrast studies are available for review.

COMPUTED TOMOGRAPHIC FINDINGS

BREED

Yorkshire Terrier

The liver is normal in size, shape and attenuation. No significant microhepatica is noted. Intra hepatic and extra hepatic portal vasculature are well visualized and anatomically normal. The portal vein is of normal caliber and course. No evidence of congenital or acquired portosystemic shunt, aberrant vascular connections or portal vein hypoplasia is seen within the limits of CT resolution. The caudal vena cava is of normal course and caliber. Normal portal systemic connections are identified.

SEX

M

Both kidneys present within normal limits for size, shape and organ architecture. After contrast administration, a bilaterally symmetric and uniform nephro- and pyelogram is noted.

AGE

8m

The adrenal glands are within normal limits for size, shape and organ architecture.

The spleen presents with normal shape, even surface, uniformly attenuating parenchyma and homogeneous contrast enhancement, unremarkable.

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

The pancreas is evenly contoured, the pancreatic parenchyma is homogeneous and presents uniform contrast enhancement.

The position, delineation, wall and content of the gastrointestinal tract are considered within normal limits throughout.

HOSPITAL NAME

Southern Oregon
Veterinary Specialty
Center

The bony and surrounding soft tissue structures reveal no abnormalities.

COMPUTED TOMOGRAPHIC DIAGNOSIS

- No CT evidence of congenital or acquired portosystemic shunt
- Normal hepatic morphology and portal venous anatomy
- No secondary CT signs of portal hypertension or morphologic alterations of the liver

REFERRING VET

Rory Applegate

INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

24608

This CT study does not support the presence of a macroscopic portosystemic shunt. Portal vein hyperplasia /microvascular dysplasia cannot be ruled out as it occurs on a microscopic level and does not produce consistent or detectable macroscopic vascular changes. Given the history and signalment, MVD remains a relevant differential diagnosis.

DATE

04/18/2026

Consider pre and post-prandial bile acids testing if not already performed and ammonia testing. Definitive diagnosis of MVD requires liver biopsy with histopathology.



PATIENT

Governor Smith

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

M

AGE

8m

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

HOSPITAL NAME

Southern Oregon
Veterinary Specialty
Center

REFERRING VET

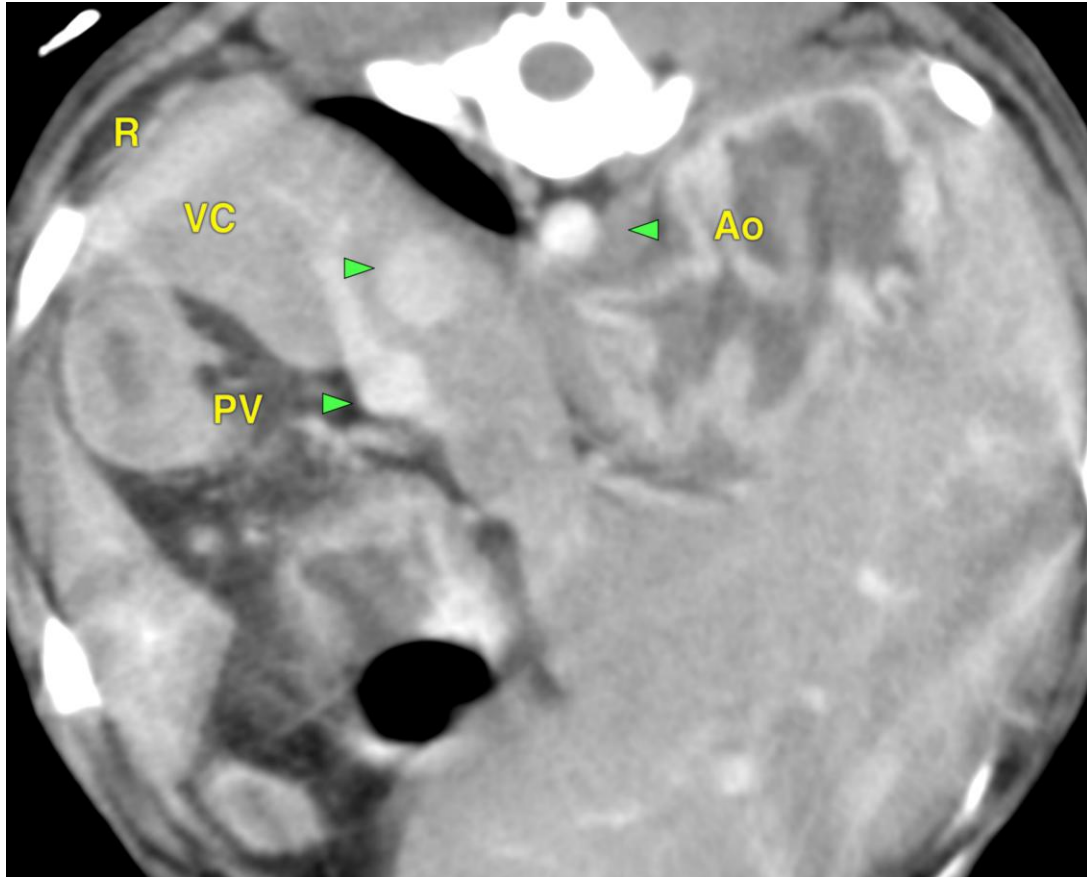
Rory Applegate

INVOICE

24608

DATE

04/18/2026



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.

Nele Eley (Ondreka), DVM, Dr. med. vet., DipECVDI
European Specialist in Veterinary Diagnostic Imaging, Cert. Radiology,
Senior lecturer University of Giessen/Germany, Veterinary Faculty, Department of Radiology.
info@sonopath.com



PATIENT

Governor Smith

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

M

AGE

8m

INTERPRETED BY

Nele Eley (Ondreka),
DVM Dr. med. vet.,
DipECVDI

HOSPITAL NAME

Southern Oregon
Veterinary Specialty
Center

REFERRING VET

Rory Applegate

INVOICE

24608

DATE

04/18/2026