

PATIENT

Hansel Jordan

PRESENTING CLINICAL SIGNS

History: Recent elevation in liver values (ALT 184, ALP 228). Long history of splenomegaly, presumed EMH by internist in 2018. Patient is asymptomatic.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Dachshund

Urinary System

The urinary bladder is moderately distended with anechoic urine, and no luminal sediment is present. The ureteral papillae, trigone and pelvic urethra are of normal appearance, and the ureters are not visible (normal). No masses, calculi or mucosal irregularities are noted. Urethra visualized to 3.0 cm.

SEX

Neutered Male

Both kidneys are hyperechoic and exhibit poor corticomedullary differentiation. There are multiple small cortical cysts present bilaterally. There is no evidence of nephrolithiasis, pyelectasias or hydronephrosis. The proximal ureters are not visible (normal). The left kidney is 4.4 cm in length. The right kidney is 5.2 cm in length.

AGE

15 years

Adrenal Glands

The adrenal glands are both identified in their normal locations. They are normal in size and shape with appropriate parenchymal echogenicity and normal phrenic vasculature. The left adrenal gland height is 5.8 mm at the cranial pole and 5.7 mm at the caudal pole. The right adrenal gland height is 5.7 mm at the cranial pole and 5.1 mm at the caudal pole.

WEIGHT

17 lbs

Spleen

The spleen appears diffusely enlarged. The capsular margins are regular and the parenchyma is normal. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal.

INTERPRETED BY

Tam Mengine, DVM,
DABVP (canine/feline
practice)

Liver

The liver is diffusely hyperechoic and subjectively enlarged. The portal and hepatic vasculature are of normal size and appearance with no evidence of congestion or thrombosis.

**IMAGING
PERFORMED BY**

Dr. Tam Mengine

The gallbladder is moderately distended with anechoic contents. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.

HOSPITAL NAME

Stoney Creek VH

Gastrointestinal

The stomach is empty. The gastric wall is 4.2 mm with normal deviations due to rugal folds and exhibits appropriate wall layering. The pylorus is of normal appearance.

REFERRING VET

Dr. Mandy Becker

The visualized portions of the duodenum, jejunum, and ileum are of normal thickness with intact wall layering that exhibits the appropriate 1:3 muscularis to mucosa ratio. The duodenal wall measures 4.8 mm. The jejunal wall measures up to 3.1 mm. Intestinal motility appears normal.

INVOICE

12446

Pancreas

The areas of the limbs and body of the pancreas are isoechoic to the surrounding mesenteric fat, with normal capsular appearance. There is no evidence of peripancreatic inflammation. The pancreatic duct appears normal.

DATE

3.16.23



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Free Abdomen

There is no evidence of free fluid within the peritoneal cavity. The omentum and intra-abdominal fat are of appropriate echogenicity. Enlarged abdominal lymph nodes are not observed. The aortic trifurcation has normal blood flow with no evidence of thrombosis.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Findings

- Hepatic changes consistent with vacuolar hepatopathy
- Bilateral chronic renal changes
- Splenomegaly consistent with prior history of EMH

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes in the liver are non-specific and could be attributed to endocrine disease, other vacuolar hepatopathies, reactive hepatopathy, storage hepatopathy, chronic infectious or inflammatory disease (including leptospirosis), hepatic lipidosis, or less likely neoplasia. Ultrasound-guided or laparoscopic biopsies would be needed for definitive diagnosis. Recommendations include:

- Screening for diabetes mellitus and hyperlipidemia if not already performed.
- Testing for Cushing's disease is recommended only if clinical signs support the diagnosis.
- Bile acid testing is recommended to further assess severity of hepatic disease - if elevated then liver biopsies should be considered.
- If bile acids are normal, but the ALT is increased, then initiation of liver support therapies such as sams, Vitamin E and ursodiol, along with serial monitoring of liver enzyme levels every 2-3 months, could be initiated.

WEIGHT

17 lbs

The changes in the kidneys are consistent with chronic renal disease. Findings should be correlated with laboratory values, IRIS staging and clinical signs.

INTERPRETED BY

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REFERRING VET

Dr. Mandy Becker

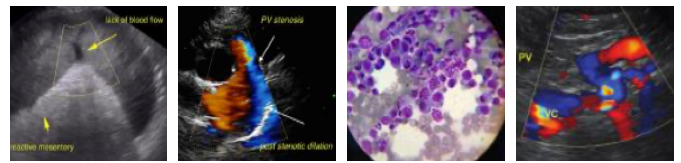
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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