



PATIENT PRESENTING CLINICAL SIGNS

Hope Frank History: Recent increase in ALP (522). TBili 1.5 on in-house analyzer but may have been artifact from hemolysis.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine 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.

BREED

Cockapoo

The kidneys are of normal size and shape and exhibit appropriate corticomedullary differentiation with a normal 1:3 cortex to medulla ratio. There is no evidence of nephrolithiasis, mineralization, pyelectasia, cystic change or hydronephrosis. The proximal ureter is not visible (normal). The left kidney is 5.4 cm in length. The right kidney is 5.3 cm in length.

SEX

Spayed Female

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 6.7 mm at the cranial pole and 5.1 mm at the caudal pole. The right adrenal gland height is 5.0 mm at the cranial pole and 5.9 mm at the caudal pole.

AGE

12.5 years

Spleen

The spleen is of appropriate size and has a normal, homogenous parenchyma with a smooth, continuous capsular surface. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal.

WEIGHT

27.80 lbs

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.

INTERPRETED BY

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

The gallbladder is moderately distended with anechoic contents. The gallbladder wall is focally thickened with small focal polypoid lesions, with no evidence of rupture. The cystic and common bile ducts are normal / not visible.

IMAGING PERFORMED BY

Dr. Tam Mengine

Gastrointestinal

The stomach is moderately distended with gas. The gastric wall is 2.8 mm with normal deviations due to rugal folds and exhibits appropriate wall layering. The pylorus is of normal appearance.

HOSPITAL NAME

Stoney Creek VH

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 4.2 mm. The jejunal wall measures up to 3.2 mm. Intestinal motility appears normal.

REFERRING VET

Dr. Beth Henry

The visible portions of the colon are of normal thickness, up to 1.5 mm, with intact wall layering. The ileocecal junction is visualized and appears normal.

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.

INVOICE

13428

DATE

6.20.23



PATIENT *Free Abdomen*

Hope Frank

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 **ULTRASONOGRAPHIC FINDINGS**

Canine **Findings**

- Reactive hepatopathy

BREED

Cockapoo

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Spayed Female

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:

AGE

12.5 years

- Screening for diabetes mellitus and hyperlipidemia if not already performed
- Testing for Cushing's disease is recommended only if clinical signs support the diagnosis.
- If liver values continue to increase, then 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 SAME, Vitamin E and ursodiol, along with serial monitoring of liver enzyme levels every 2-3 months, could be initiated.

WEIGHT

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PATIENT

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SPECIES

Canine

BREED

Cockapoo

SEX

Spayed Female

AGE

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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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