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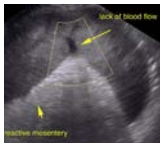
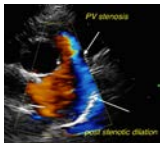
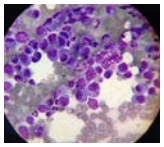
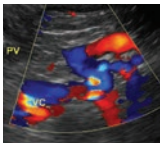

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1-800-838-4268 info@sonopath.com

PATIENT
Hops Hofmeister

SPECIES
Canine

BREED
Hound X

SEX
Neutered Male

AGE
10 Years

WEIGHT
60.4 Pounds

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

IMAGING PERFORMED BY
A Murphy, CVT

HOSPITAL NAME
Wauwatosa Vet

REFERRING VET
Dr. Elaine Binor

INVOICE
39295

DATE
7/7/22

PRESENTING CLINICAL SIGNS

Here today for a dental prophy, but pre-surgical bloodwork indicated severely elevated liver enzymes. Open diagnosis for elevated liver enzymes, but want to r/o structural disease such as neoplasia. Rest of chem panel indicated a mildly elevated lipase. Imaging to check cause of elevated liver enzymes and check for structural disease.
Abnormal PE/Chem/CBC/UA Results: ALT 1854 (10-125) with a double-dilution. Lipase 2058 (200-1800). Alk phos 1284 (23-212). rest of panel was WNL.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is 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.

The prostate is of appropriate size for patient age and neutering status, with a homogenous parenchyma and smooth capsule. The prostatic urethra is non-dilated with normal margins).

The kidneys are of normal size and shape. There is a mild decrease in corticomedullary differentiation, consistent with patient age. There is no evidence of nephrolithiasis, mineralization, pyelectasia, cystic change or hydronephrosis. The proximal ureter is not visible (normal). The left kidney measures 6.4 cm in length. The right kidney measures 6.7 cm in length.

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 measures 5.0 mm at the cranial pole and 7.0 mm at the caudal pole. The cranial pole of the right adrenal gland measures 5.0 mm. The caudal pole measures 6.9 mm.

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.

Liver

The liver is of appropriate size and shape, with sharp borders and a mildly coarse parenchymal echotexture that is hypoechoic to the spleen. The portal and hepatic vasculature are of normal size and appearance with no evidence of congestion or thrombosis.

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

Gastrointestinal

The stomach is empty. The gastric wall is 3.8 mm with normal deviations due to rugal folds, and exhibits appropriate wall layering. The pylorus is of normal appearance.

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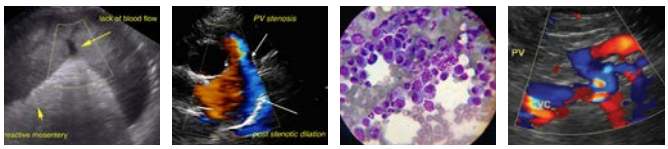

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The visualized portions of the duodenum, jejunum, and ileum are of normal thickness with intact wall layering that exhibits the appropriate 1:3 muscularis to mucosa ratio. Intestinal motility appears normal.

The visible portions of the colon are of normal thickness 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.

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.

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS:

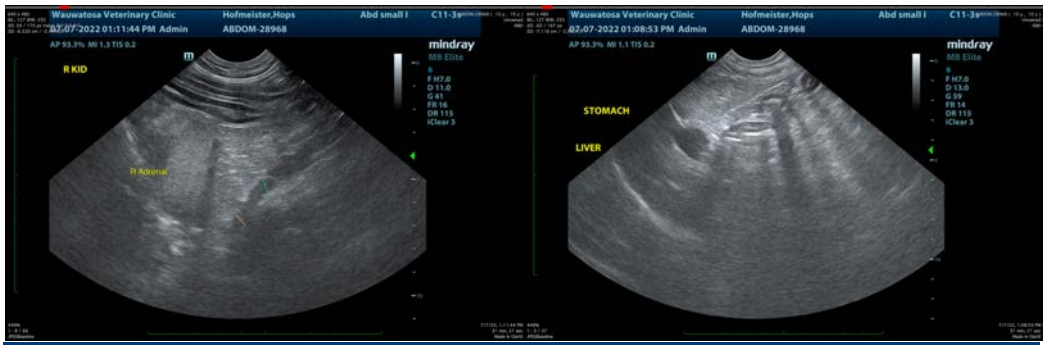
- Unremarkable liver and gallbladder

SECONDARY FINDINGS:

- Mild age related kidney changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no apparent cause for the elevated ALT and ALP. Screening FNA would be indicated to assess inflammatory cell type regarding cause for acute ALT elevation. Recommendations include testing for Leptospirosis. Consider empirical treatment with antibiotics and liver protectants such as Denamarin and Ursodiol. If there is no improvement after one week of empirical treatment, liver biopsies could be considered. Bile testing is also recommended.



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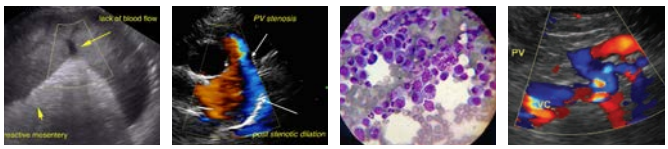

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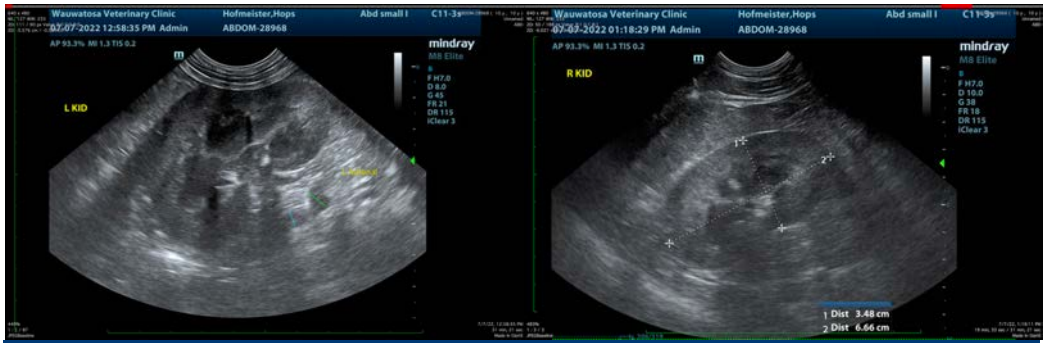

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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