



PATIENT

Evie Chen

PRESENTING CLINICAL SIGNS

P presented for US and chest rads for met check. rDVM removed mammary mass last thursday (right caudal mammary chain)- Biopsy pending. Owner requested Met check.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

DSH

The urinary bladder is adequately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

SEX

Spayed Female

The right kidney is normal is size (4.1 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

AGE

9 Years 5 Months

The left kidney is normal is size (3.5 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

WEIGHT

8.1 lbs

Adrenal Glands

The right adrenal gland is normal in size (0.30 cm at cranial pole and 0.28 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

INTERPRETED BY

Beth Johnson, DVM
 DACVIM

The left adrenal gland is normal in size (0.39 cm at cranial pole and 0.35 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Spleen

The spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

IMAGING PERFORMED BY

Kathleen Byrnes

Liver

The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

HOSPITAL NAME

Vine Veterinary Hospital

REFERRING VET

Dr. Beeson

The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

INVOICE

72591

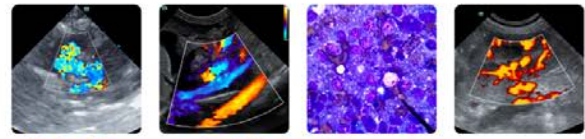
Gastrointestinal

The visible stomach wall is normal in thickness and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

DATE

12/16/25

The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.



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The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

Pancreas

SPECIES

Canine

Pancreas is prominent (enlarged) in size, hypoechoic to surrounding tissue and has a mildly irregular undulating contour. Parenchyma is coarse with mixed echogenic remodeling noted. No pancreatic duct dilation is noted.

BREED

DSH

Free Abdomen

There is no visible free peritoneal effusion noted in these images.

SEX

Spayed Female

Medial iliac and mid abdominal (just caudal to the left kidney) lymph nodes are prominent in size with swollen capsular contour. Normal elongated shape (length to width ratio) is maintained. There is no loss of parenchymal detail. The mid abdominal nodes measure approximately 0.30 cm thick, with a medial iliac lymph node measuring 0.80 cm thick.

AGE

9 Years 5 Months

ULTRASONOGRAPHIC FINDINGS

WEIGHT

8.1 lbs

- Chronic low-grade smoldering pancreatitis can't be ruled out, but this change is very mild/subtle and should be interpreted in combination with any clinical history.
- Mildly reactive mid abdominal (caudal to left kidney) lymphadenopathy, and more significantly reactive medial iliac lymphadenopathy – infiltrative neoplastic disease cannot be ruled out but is considered less likely.

INTERPRETED BY

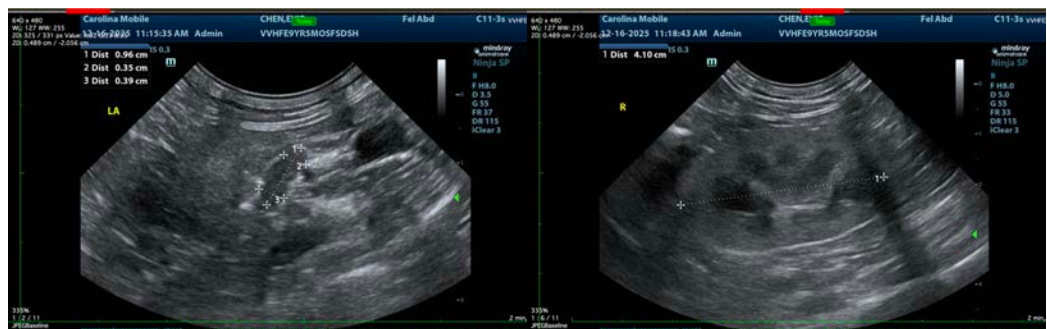
Beth Johnson, DVM
 DACVIM

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Metastatic disease to the lymph nodes can't be ruled out, but the lymph nodes were reportedly unable to be safely aspirated. Therefore, monitoring may be appropriate at this time, or pending biopsy results, consultation with a veterinary oncologist could be considered.

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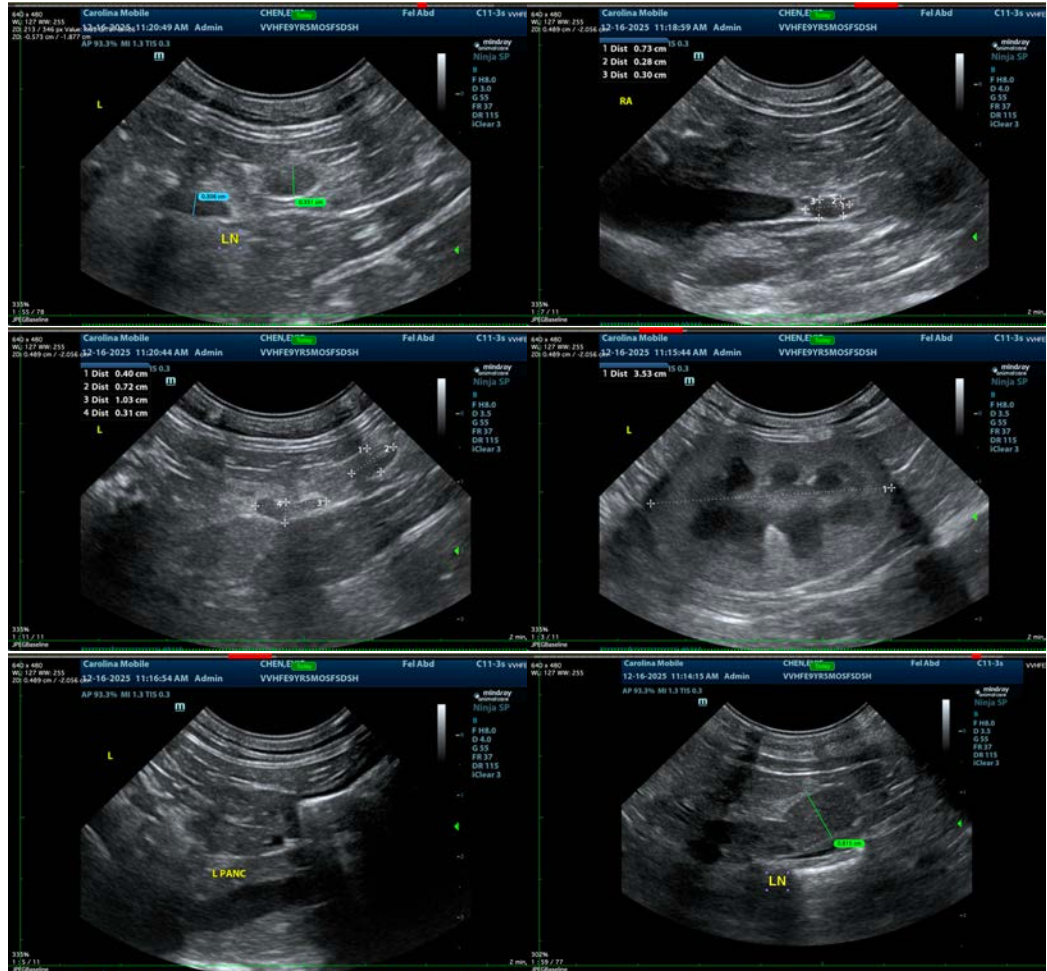
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Beth Johnson, DVM, DACVIM
 info@sonopath.com