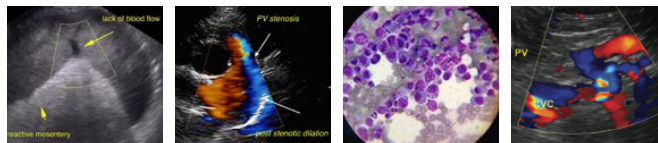




<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Rikr Madison	History: dog was diagnosed with reactive canine cutaneous histiocytosis. Rule out systemic histiocytosis
<b>SPECIES</b>	
Canine	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
<b>BREED</b>	<b>Urinary System</b>
Doberman Pinscher	Urinary 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.
<b>SEX</b>	Prostate is normal in size for an intact male. Parenchyma is diffusely homogenous and relatively hyperechoic. Normal distinct margins and symmetrical bilobed shape are maintained.
Male	Left kidney is normal is size (7.6 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.
<b>AGE</b>	Right kidney is normal is size (7.2 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.
13 months	
<b>WEIGHT</b>	<b>Adrenal Glands</b>
80 lbs	Left adrenal gland is normal in size (0.53 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. The cranially pole cannot be fully visualized for a measurement. Visible surrounding vasculature appears normal.
<b>INTERPRETED BY</b>	The area of the right adrenal gland is examined without evidence of pathology.
Beth Johnson, DVM DACVIM	
<b>IMAGING PERFORMED BY</b>	<b>Spleen</b>
Nicole Gotfredson	Spleen is subjectively large in size with normal smooth margins. Parenchyma is normal in echogenicity with a coarse/heterogenous echotexture. No focal nodules or masses are observed. Splenic vasculature appears normal.
<b>HOSPITAL NAME</b>	
Buffalo VC	
<b>REFERRING VET</b>	<b>Liver</b>
Dr. Gotfredson	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.
<b>INVOICE</b>	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.
32639	
<b>DATE</b>	
8/22/22	



**PATIENT**

**Gastrointestinal**

Rikr Madison

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.

**SPECIES**

Canine

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.

**BREED**

Doberman Pinscher

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

**SEX**

Male

**Pancreas**

The observed pancreas appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

**AGE**

13 months

**Free Abdomen**

There is no evidence of free peritoneal effusion noted in these images.

**WEIGHT**

80 lbs

The medial iliac lymph node is enlarged and mildly heterogenous in appearance measuring 1.0 cm. There was no apparent free fluid visible in these images.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings**

**Coarse splenomegaly** – can be associated with congestion caused by sedation (if sedated) but can also be associated with diffuse infiltrative disease. Both benign conditions such as extramedullary hematopoiesis, lymphoid hyperplasia, amyloidosis (leave amyloidosis out if canine) as well as infiltrative neoplastic diseases such as round cell neoplasia should be considered.

**IMAGING PERFORMED BY**

Nicole Gotfredson

**Medial iliac lymphadenopathy.** Reactive and infiltrative neoplastic differentials are possible.

**HOSPITAL NAME**

Buffalo VC

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Given this patient's history and diagnosis a FNA of the spleen and enlarged medial iliac lymph node if possible is recommended if the patient's coagulation status is appropriate, to fully stage the reported histiocytic disease.

**REFERRING VET**

Dr. Gotfredson

**INVOICE**

32639

**DATE**

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**PATIENT**

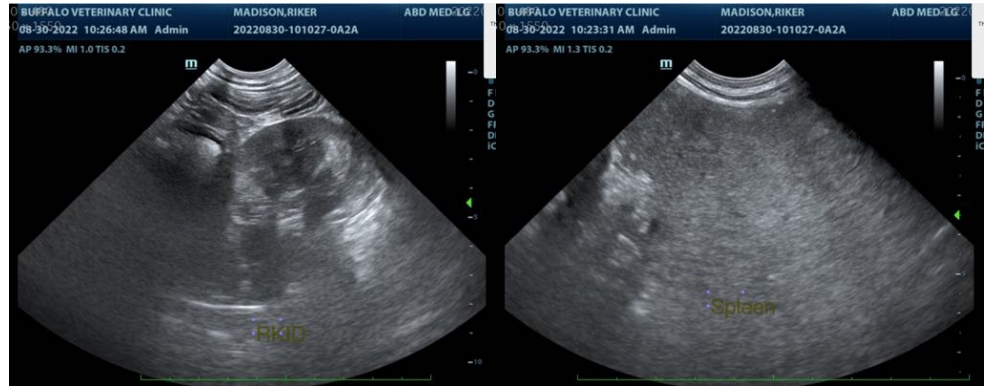
Rikr Madison

**SPECIES**

Canine

**BREED**

Doberman Pinscher



**SEX**

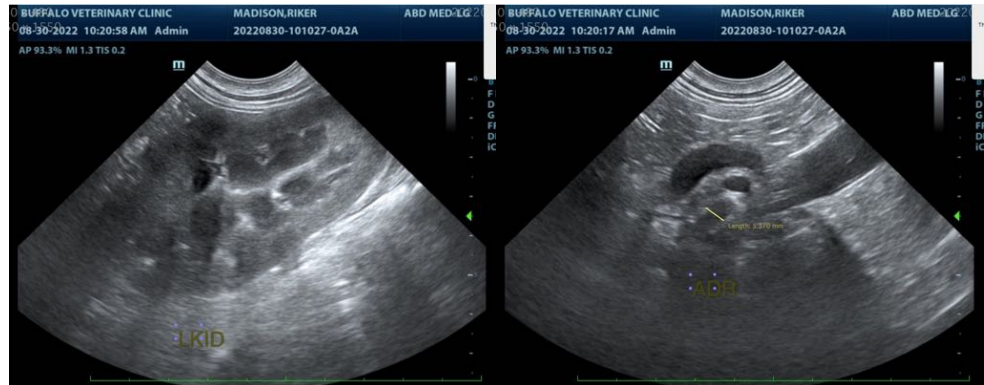
Male

**AGE**

13 months

**WEIGHT**

80 lbs



**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM



**IMAGING PERFORMED BY**

Nicole Gotfredson

**HOSPITAL NAME**

Buffalo VC

**REFERRING VET**

Dr. Gotfredson

**INVOICE**

32639

**DATE**

8/22/22

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**

Beth.Johnson@SonoPath.com