



**PATIENT**

Ivan Miller

**PRESENTING CLINICAL SIGNS**

History: Doctor's pet. Ivan is an osteosarcoma patient, distal tibial left forelimb-amputation performed 11/2021, and Chemotherapy completed in March 2023, doing excellent.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: None.

**BREED**

Labrador Retriever

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

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**

Male

Prostate is normal in size, echotexture and echogenicity for a neutered male.

**AGE**

6 Years 11 Months

The left kidney is not able to be visualized in these images. In the area of the left kidney there is a mixed area of anechoic, hypoechoic and echogenic tissue, that appears consistent with just remodeled fat and connective tissue in the area of the left kidney. No concern for infiltrative neoplasia.

Right kidney is normal in size (9.51 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**

61.2 Pounds

**Adrenal Glands**

Left adrenal gland is normal in size (1.36 cm long x 0.51 cm at cranial pole and 0.8 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

Right adrenal gland is unable to be visualized in these images.

**Spleen**

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**

Susan Lincoski, VMD

**HOSPITAL NAME**

University Drive VH

**Liver**

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.

**REFERRING VET**

Susan Lincoski, VMD

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.

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**Gastrointestinal**

The visible stomach wall is normal in thickness and layering. The lumen of the stomach is mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

**DATE**

9/19/22



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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 mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease.

**SPECIES**

Canine

The visible colon is normal in wall thickness and layering. Contents are consistent with normal formed feces and gas.

**BREED**

***Pancreas***

Labrador Retriever

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.

**SEX**

Male

***Free Abdomen***

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy.

**AGE**

6 Years 11 Months

**ULTRASONOGRAPHIC FINDINGS**

- A presumed absent left kidney, may be secondary to renal aplasia with remodeled fat/connective tissue in the area of the left kidney. There is no evidence of infiltrative neoplasia or metastatic disease present in these images at this time.

**WEIGHT**

61.2 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recommendations are to continue therapy and follow up as directed by this patients oncologist.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

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**HOSPITAL NAME**

University Drive VH

**REFERRING VET**

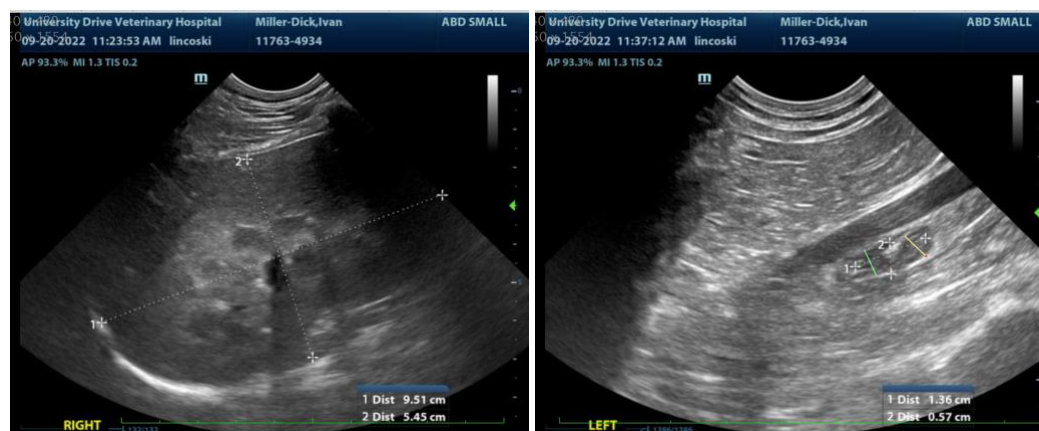
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## SPECIES

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## BREED

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## SEX

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## AGE

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## WEIGHT

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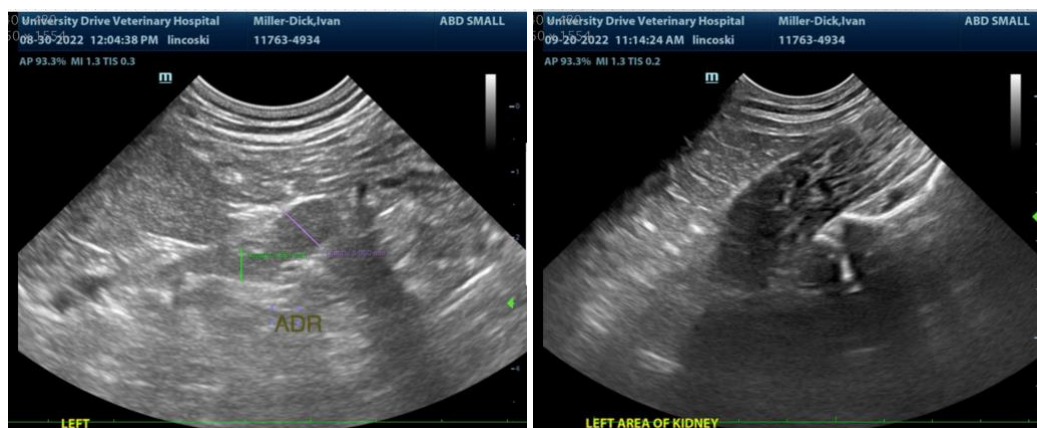
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Beth Johnson, DVM DACVIM**

Beth.Johnson@SonoPath.com