



**PATIENT**

Stella Bann

**SPECIES**

Canine

**BREED**

Corgi Mix

**SEX**

Spayed female

**AGE**

10.5 years

**WEIGHT**

24 lbs

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Valeryia Shumskaya

**HOSPITAL NAME**

Ramapo Valley AH

**REFERRING VET**

Dr. Katara

**INVOICE**

42831

**DATE**

2/15/23

**PRESENTING CLINICAL SIGNS**

History: Suspect neoplasia (possible hemangiosarcoma) due to axr findings. Want to confirm / r/o immune mediated neutropenia Current meds: Prednisone, cyclosporine, cerenia, mirtazapine, yunnan baiyo, +/- Flagyl  
Abnormal PE/Chem/CBC/UA Results: 2/8/23 ALP+ALT off the charts, GGT 103, TSH 5.3

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. The left kidney measured 3.67 cm. The right kidney measured 4.57 cm.

**Adrenal Glands**

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 1.26 x 0.34 cm at the cranial pole and 0.44 cm at the caudal pole. The right adrenal gland measured 1.57 x 0.7 cm at the cranial pole and 0.54 cm at the caudal pole.

**Spleen**

The **spleen** was uniform with multi focal hyperechoic changes. This is consistent with lipogranuloma. This is not overtly pathological.

**Liver**

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder was over distended with striating bile and a double layered wall. Enhanced surrounding mesentery consistent with gallbladder mucocele and cholecystitis. The liver itself was uniform enlargement.



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**Gastrointestinal**

Stella Bann

The **stomach** revealed concentric thickening without loss of mural detail. Hypertrophic mucosal/ruggae was noted. The small intestines and colon are unremarkable.

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**Pancreas**

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Corgi Mix

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

**SEX**

Spayed female

**ULTRASONOGRAPHIC FINDINGS**

Mildly inflamed gallbladder mucocele.

**AGE**

10.5 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

This is a surgical urgency. Cholecystectomy is indicated along with common bile duct lavage. The common bile duct was mildly dilated with mucous debris. This is consistent with muco duct. The common bile duct measured up to 0.7 cm.

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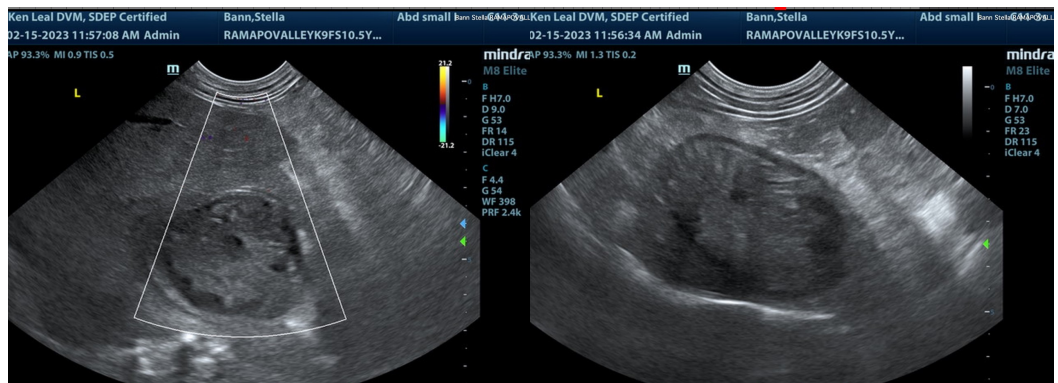
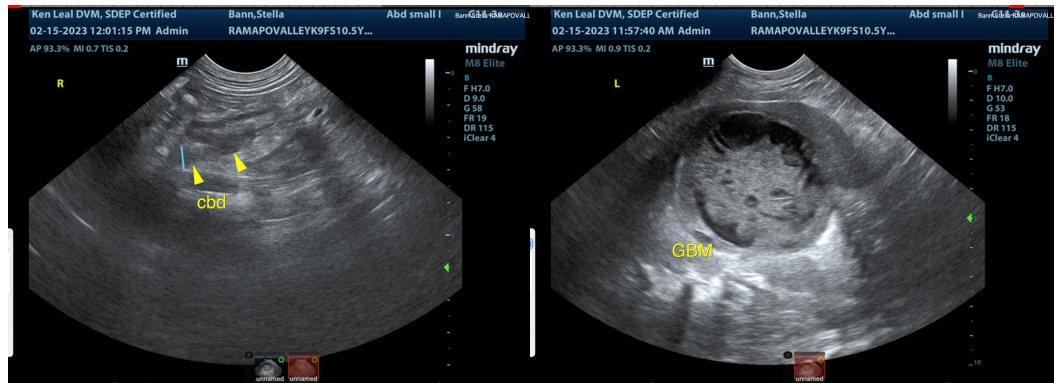
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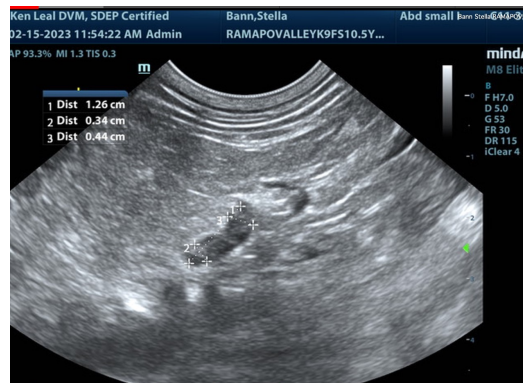
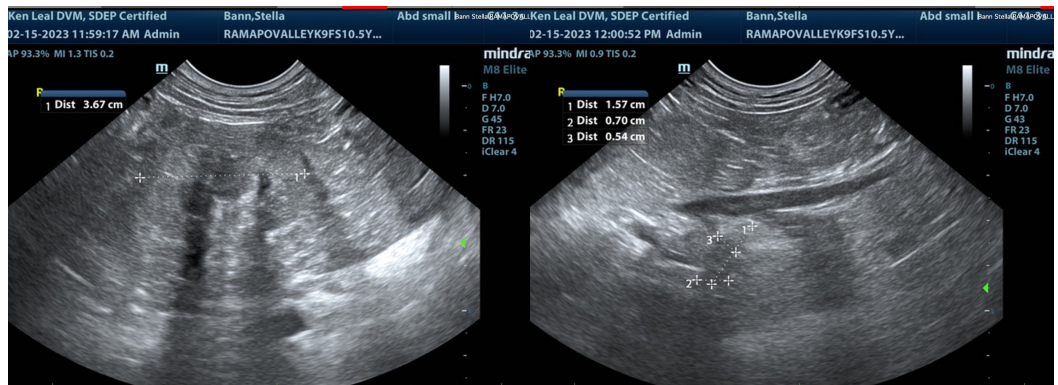
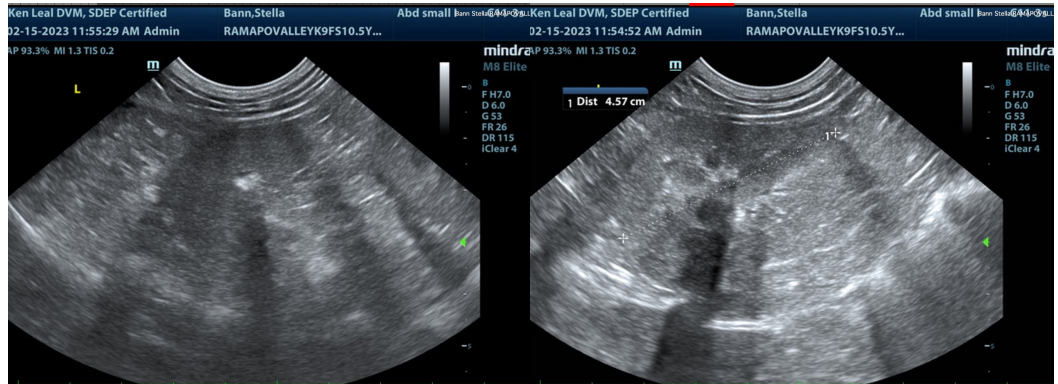
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

info@SonoPath.com