



PATIENT

Jax Premo

SPECIES

Canine

BREED

Boxer

SEX

Neutered Male

AGE

8 Years

WEIGHT

58 pounds

INTERPRETED BY

Kim Radway, DVM,
DABVP (Canine/
Feline)

IMAGING PERFORMED BY

Dr. Beth Coe

HOSPITAL NAME

Riverside Animal Clinic

REFERRING VET

Dr. Beth Coe

INVOICE

13364

DATE

01/23/26

PRESENTING CLINICAL SIGNS

- Diagnosed suspect Degenerative Myelopathy via genetic testing and correlation with clinical signs. Currently undergoing treatment with rehabilitation specialist/veterinarian locally, with once to twice weekly UWTM and proprioceptive placing exercises. At therapy yesterday, veterinarian noted patient mucous membranes were pale and abdomen seemed tense. Owners report a slowly decreasing appetite for the past 2-3 weeks, and for the past 2-3 days, patient only consumed small number of scrambled eggs. Patient vomited twice while at rehab yesterday, as well.
- Patient received injection of Cerenia, and one dose of PO Entyce 1/22 PM. Owner reports good appetite last night, but for about 4 hours following Entyce, was panting heavily. No reported vomiting.
- Patient has been receiving several supplements for his DM, though inconsistently with decreased appetite recently. He is on monthly Interceptor plus/Advantix. No other medications.

Abnormal PE/Chem/CBC/UA Results: PE 1/22/26: Mucous membranes pink, moist. Gingivitis, halitosis, and dental tartar (chronic). Cardiothoracic auscultation revealed a quiet diastolic heart murmur initially, which dissipated as patient became more excited. Rate/rhythm WNL. BVS WNL. Eupneic. Profound bilateral ataxia hindlimbs (DM, chronic progressive), but ambulatory. No abdominal distention or guarding noted on palpation. Temp WNL. CBC: WNL. HCT 44% Chem: NSF/WRI TT4: WRI Chest radiographs: NSF Blood pressure 1/22/26: ~100/52 (MAP ~60's) Blood pressure today: ~140/95

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone and pelvic urethra presented with normal wall thicknesses with anechoic urine and normal tone. No uroliths or masses were noted in the lumen of the bladder. No evidence of inflammatory or neoplastic changes were noted. The ureters were not visible and considered normal.

The **prostate** was normal in appearance and homogeneous echogenicity measuring 0.93 cm width.

The **kidneys** revealed normal size, corticomedullary definition and ratio with the cortex being 1/3 of medulla. Medullary echogenicity differed distinctly from that of the cortex and no evidence of dilation could be seen. The renal pelvic diverticuli were distinct in character. The capsules were acceptably uniform without dramatic irregularities. The left kidney measured 5.02 cm in length. The right kidney measured 5.16 cm in length.

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 acceptable. The left adrenal gland measured 2.33 cm x 0.59 cm x 0.68 cm. The right adrenal gland measured 2.95 cm x 0.74 cm x 0.83 cm.

Spleen



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The **spleen** presented with an abnormal and heterogenous appearance containing a large mixed echogenicity mass measuring at least 5.8 cm x 7.3 cm in size. The outer capsule contour was rounded and expansile.

Liver

The **liver** revealed normal size, contour, and structure. Parenchymal echogenicity was smooth and homogenous in appearance. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented with anechoic contents and a thin hyperechoic wall. The cystic and common bile ducts were normal. No periportal lymphadenopathy was evident.

Gastrointestinal

The **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. There was a small amount of gas in the lumen of the stomach. No obstructive or overt infiltrative disease was noted. There was a discrete hypoechoic round structure noted within the images provided which could either represent an enlarged mesenteric lymph node or a metastatic mass to the omentum. The structure measured 1.27 cm x 1.65 cm in size. There was a small volume of free abdominal fluid present.

Pancreas

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

Free Abdomen

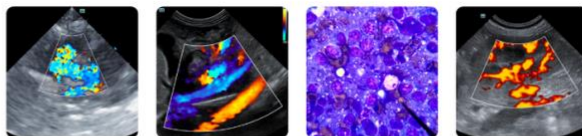
Views of the heart were obtained and found no evidence of a discrete right atrial mass and no pericardial effusion.

ULTRASONOGRAPHIC FINDINGS

- Large mixed echogenicity and hypoechoic mass within the spleen.
- Small moderate amount of free abdominal effusion present.
- A hypoechoic structure within the omentum which may represent a metastatic lymph node or mass within the omentum. It is also possible that this could represent a hematoma within the mid abdominal region.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

It is recommended to consider an exploratory surgery for splenectomy which will not only prevent further hemorrhage but also allow a more definitive diagnosis with histopathology. If surgery is declined, then the long-term prognosis in this patient is considered poor due to the degree of hemorrhage currently present within the abdomen. Prior to surgery, it is also important to obtain three view thoracic radiographs for further metastatic screening.



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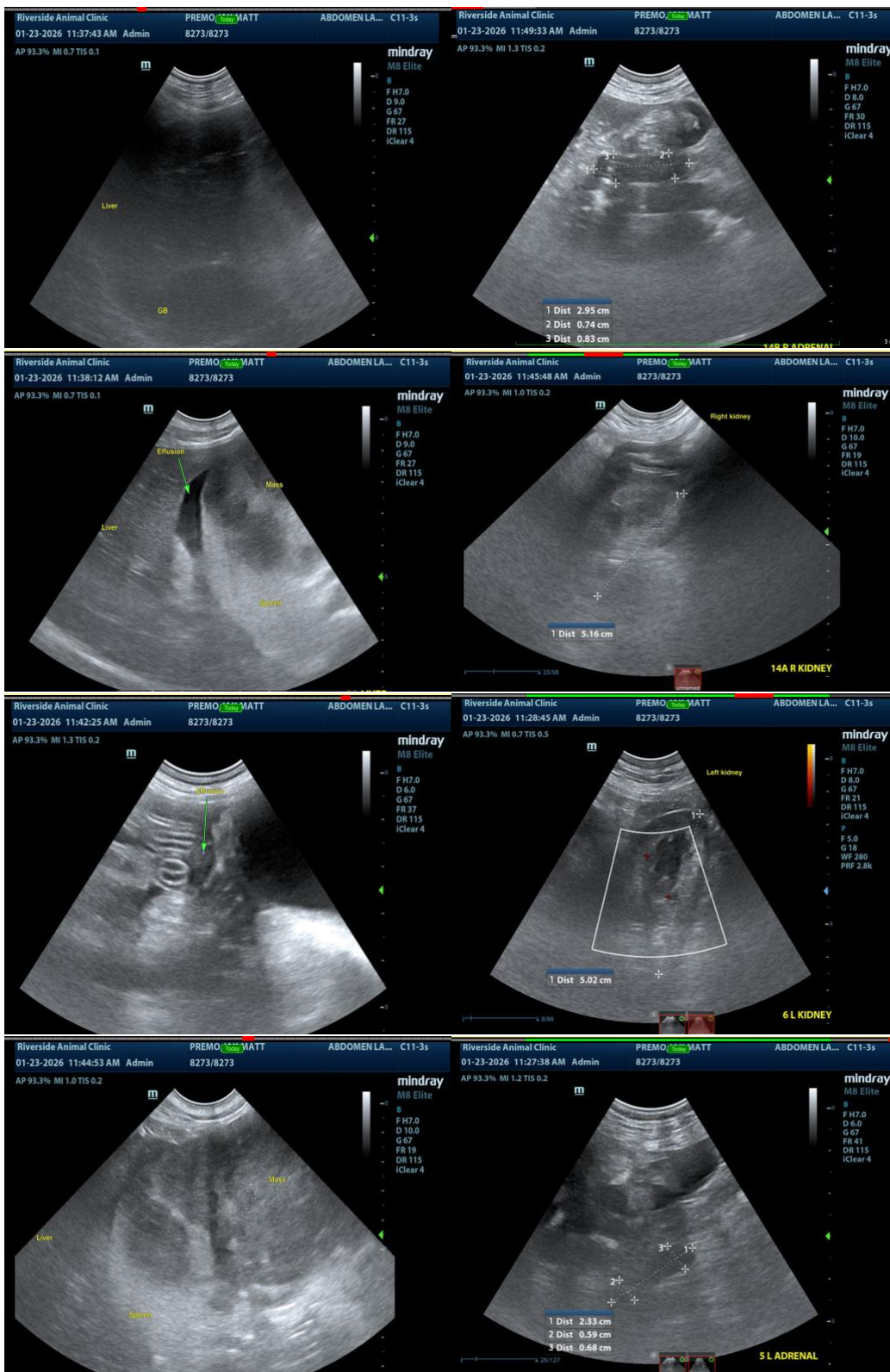
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Kim Radway, DVM, DABVP (Canine/ Feline)

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