



PATIENT

Budda Michuda

SPECIES

Canine

BREED

Pitbull

SEX

Neutered Male

AGE

9 Years

WEIGHT

69.6 Pounds

INTERPRETED BY

Kim Radway, DVM,
DABVP (Canine/
Feline)

IMAGING PERFORMED BY

Dr. Sydney Jackson

HOSPITAL NAME

New Hope AH

REFERRING VET

Dr. Sydney Jackson

INVOICE

35714

DATE

2/6/26

PRESENTING CLINICAL SIGNS

- 1/22/26 - Pt had MCT removal with histopathology diagnosis of cutaneous MCT, high grade, grade III with complete margins:
- Low or high grade: High
- Patnaik grade: Grade 3
- Mitotic count in 10 HPF (2.37 mm²): >30
- Multinucleation >3 in 10 hpf = 2.37 mm²: Yes
- Bizarre nuclei >3 in 10 hpf = 2.37 mm²: Yes
- Karyomegaly (nuclear diameters of at least 10% of neoplastic cells vary by at least two-fold): No
- Angiolymphatic invasion: No
- Histologic margins:
- Lateral: 0.82 mm
- Deep: 5.39 mm, which includes collagen and adipocytes
- Pt has history of multiple subcutaneous and cutaneous MCT low grade, grade II removal with complete margins each time
- Pt has no clinical symptoms
- Pt on long-term Apoquel 16mg Q24hrs
- Abnormal PE/Chem/CBC/UA Results: CBC-WNL Chem 17 - ALP 258 (0-140) No peripheral lymph node enlargement

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 not shown in the images provided.

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 or dilation could be seen. The renal pelvic diverticuli were distinct in character. The capsules were acceptably uniform without dramatic irregularities. There was a single anechoic cyst in the cortex of the right kidney, measuring 0.51 cm x 0.8 cm in size. The left kidney measured 6.57 cm. The right kidney measured 7.3 cm.



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Adrenal Glands

The left **adrenal gland** was 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 2.68 cm x 0.54 cm x 0.71 cm.

The **right adrenal gland** was not seen in the images provided.

Spleen

The **spleen** presented with a smooth homogeneous parenchyma hyperechoic to liver and kidney. The capsule was smooth and linear in its contour. The splenic vasculature demonstrated normal volume without signs of congestion, significant contraction, or thrombosis.

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 moderate amount of hyperechoic food and ingesta within the lumen of the stomach, consistent with not being fasted for this study. No obstructive or overt infiltrative disease was noted. No abnormal lymphatic activity was noted, and the abdomen was free of gastrointestinal masses and pathological fluid.

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.

ULTRASONOGRAPHIC FINDINGS

- Normal abdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This was a normal abdomen despite the history of having a high-grade mast cell tumor removed recently. There was no gross evidence of metastasis noted in the images provided. It is recommended to continue with the current recommendation of primary therapy for the high-grade mast cell tumor.



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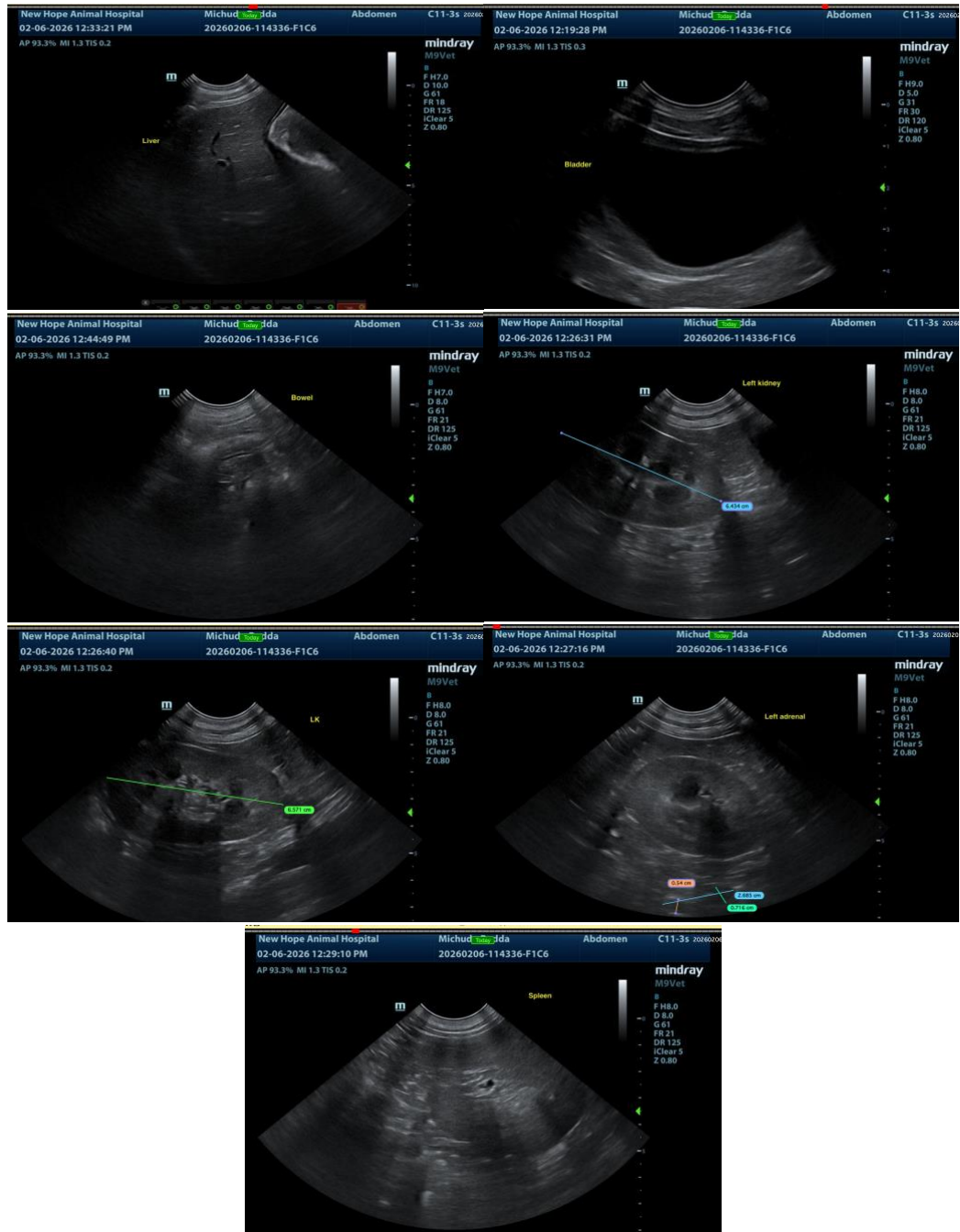
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



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can be of any further assistance please contact me.

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info@SonoPath.com