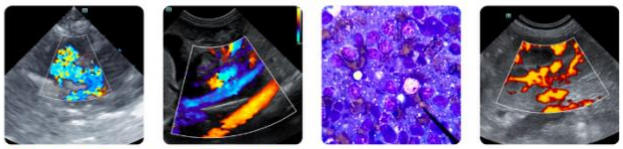



**PATIENT**

Bella Guzzo

**SPECIES**

Canine

**BREED**

Schnauzer

**SEX**

Spayed Female

**AGE**

13 Years 11 Months

**WEIGHT**

19.2 lbs

**INTERPRETED BY**

Kim Radway, DVM, DABVP (Canine/ Feline)

**IMAGING PERFORMED BY**

Kathleen Byrnes

**HOSPITAL NAME**

Pet Care Clinic of the High Country

**REFERRING VET**

Dr. Sturgill

**INVOICE**

16304

**DATE**

06/03/26

## PRESENTING CLINICAL SIGNS

P presented for US due to persistent diarrhea and rads showing diffuse splenomegaly with a possible cranial/mid abdominal mass effect. Bloodwork and fecal unremarkable

## 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 **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. The left kidney measured 4.98 cm length. The right kidney measured 5.29 cm 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 1.93 cm x 0.52 cm x 0.49 cm. The right adrenal gland measured 1.92 cm x 0.5 cm x 1.11 cm.

### *Spleen*

The **spleen** had a heterogeneous appearance with multiple discrete hyperechoic myelolipomas throughout the splenic parenchyma. Within the central aspect of the spleen, there was a hyperechoic and mixed echogenicity nodule measuring 1.39 cm x 2.0 cm in size.

### *Liver*

The **liver** was found to have a hyperechoic and coarse echogenicity throughout the parenchyma but no evidence of discrete masses or nodules present. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented with a moderate amount of hyperechoic suspended gravity dependent debris 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. No abnormal lymphatic activity was noted, and the abdomen was free of gastrointestinal masses and pathological fluid.

### *Pancreas*

The left limb and base 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. The right limb of the pancreas was heterogeneous in appearance and mildly hypoechoic.

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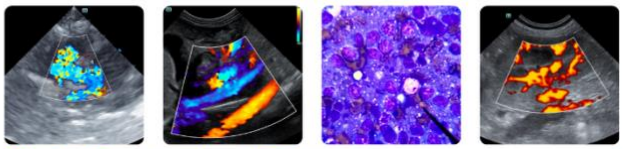

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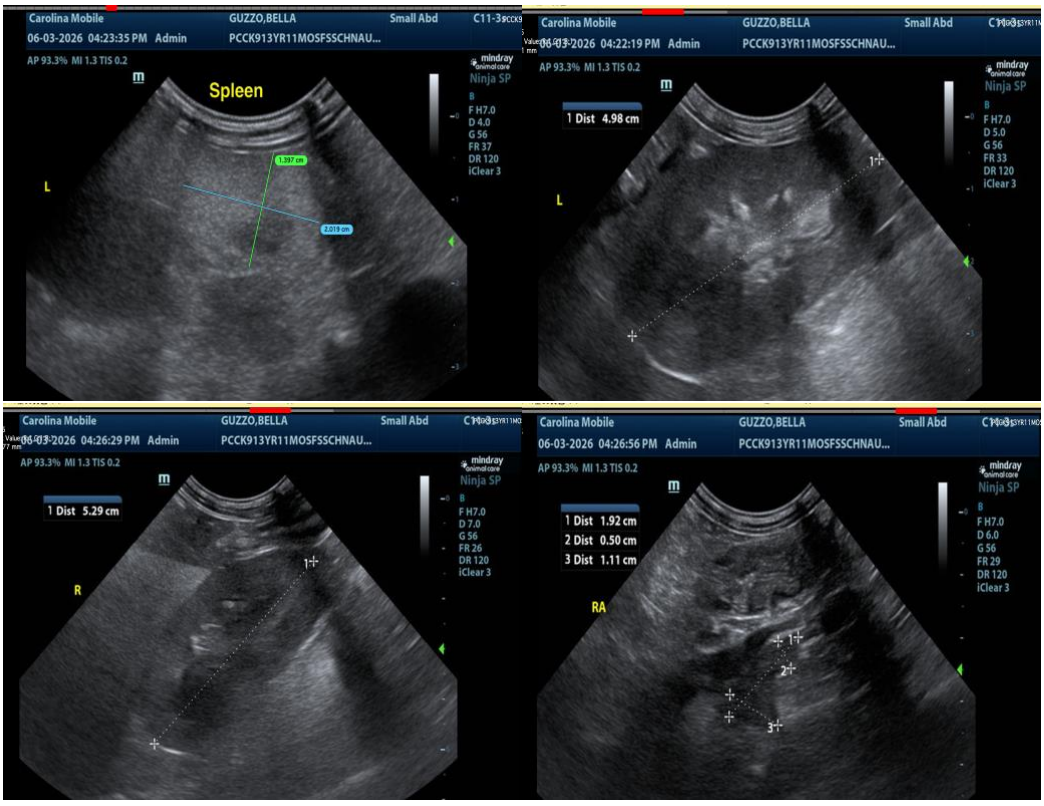
## ULTRASONOGRAPHIC FINDINGS

- Hyperechoic and coarse hepatic parenchyma.
- Moderate amount of hyperechoic suspended gravity dependent debris within the gallbladder lumen.
- Multiple hyperechoic myelolipomas throughout the spleen.
- Hyperechoic mixed echogenicity nodule within the mid aspect of the spleen.
- Heterogenous right limb of the pancreas.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The hyperechoic and coarse echogenicity to the hepatic parenchyma may represent vacuolar hepatopathy, steroid hepatopathy, or less likely active hepatitis or infiltrative neoplasia. Since the liver values are normal at this time, continued close monitoring of the blood work would be recommended. Beginning supportive care with Denamarin can be considered.

The hyperechoic myelolipomas throughout the spleen are considered benign and can be carefully monitored. Since this patient has a clinical history of chronic diarrhea, a diet change to a Hill's biome or a low-fat, high-fiber diet is recommended. It is also recommended to begin daily probiotics. A GI panel can be submitted in order to determine if there is evidence of underlying cobalamin deficiency, which may improve with vitamin B12 supplementation.



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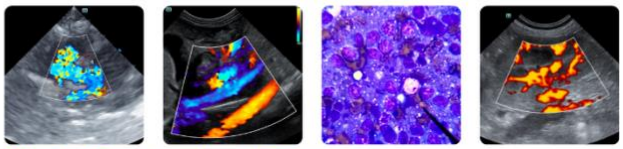

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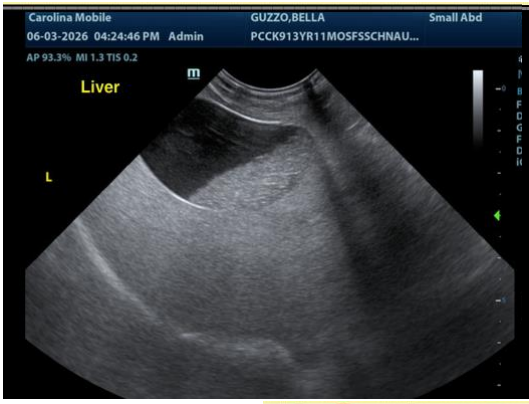


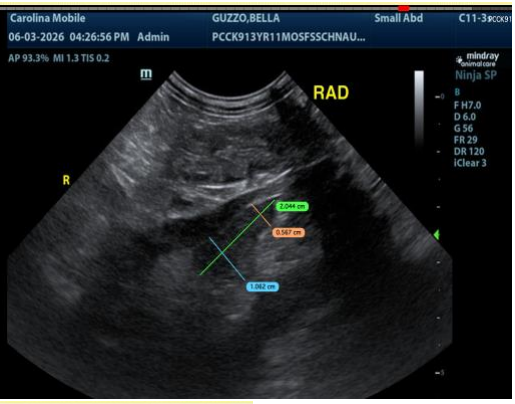


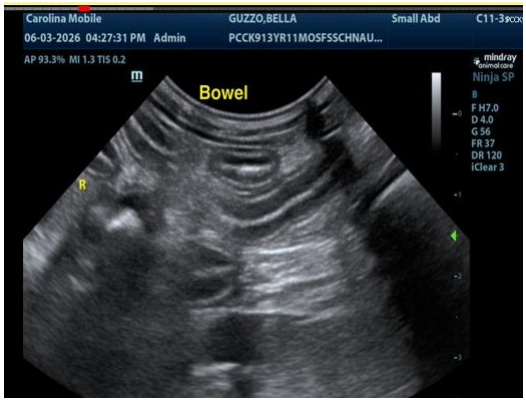


**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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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