



PATIENT	PRESENTING CLINICAL SIGNS
Newman McKenzie	Patient presents for trouble breathing, lethargy, abdominal ascites, R/O splenic mass vs. other. No current meds. Abnormal PE/Chem/CBC/UA Results: Pending.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	<i>Urinary System</i>
BREED	The bladder contained mild urine which prohibited full evaluation of the urinary bladder walls. The urinary bladder presented uniformly thickened urinary bladder wall isoechoic to the adjacent normal urinary bladder wall. The luminal margin of the thickened urinary bladder wall was mildly asymmetrical in contour. The apical urinary bladder wall thickness measured 0.55 cm. Mineralization or echogenic foci within the thickened areas of urinary bladder wall was not present. The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of neoplastic criteria.
German Shepherd	The area of the residual prostate appeared normal and free of pathology.
SEX	AGE
MN	8.5 Years
WEIGHT	79 lbs
INTERPRETED BY	<i>Adrenal Glands</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.53 cm width at the caudal pole and 0.55 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.45 cm width at the caudal pole and 0.55 cm width at the cranial pole.
IMAGING PERFORMED BY	<i>Spleen</i>
Kelly Vazquez	The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease. No splenic masses or nodules noted.
HOSPITAL NAME	<i>Liver / Gallbladder</i>
Bergen County Vet Center	The liver presented mild to moderately enlarged in size with symmetrical yet swollen contour. The parenchyma exhibited conserved uniform parenchyma with normal echogenicity isoechoic to the spleen and falciform fat. The hepatic vasculature exhibited mild dilation suggestive of congestion most notable at the level of the hepatic vein / caudal vena cava junction, without evidence of thrombosis.
REFERRING VET	INVOICE
Dr. Halloran	49421
DATE	1-10-22
	The gallbladder was non-distended in size. The gallbladder wall was thickened in appearance consisting of an echogenic double rim corresponding to the inner and outer portions of the wall. This is consistent with generalized moderate gallbladder wall edema. Possible causes may include acute inflammation,



PATIENT	edema, and anaphylaxis. Concurrent mild particulate nonorganized luminal mucus was present in the gallbladder. The gallbladder wall measured 0.67 cm width.
Newman McKenzie	
SPECIES	<i>Gastrointestinal</i>
Canine	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.
BREED	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.
German Shepherd	Normal visible colon wall layers were present with apparent formed feces in lumen.
SEX	<i>Pancreas</i>
MN	The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.
AGE	<i>Free Abdomen</i>
8.5 Years	Small to moderate volume peritoneal free fluid was present. The omentum was of uniform echogenicity. No overt lymphadenopathy was present.
WEIGHT	Brief assessment of the heart revealed moderate volume pericardial effusion with subjective echogenic to increased thickness of the right ventricle free wall in the area of the right atrioventricular groove. Potential for possible mass associated or in the area in the area of the right auricle was present although potential for the thickened auricle also possible. Cardiac tamponade secondary to pericardial effusion was present during diastole.
79 lbs	
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Primary
IMAGING PERFORMED BY	<ul style="list-style-type: none"> • Mild congestive hepatopathy pattern with concurrent gallbladder wall edema. • Small volume peritoneal free fluid. • Moderate volume pericardial effusion with secondary cardiac tamponade, potential for mass in the area of the right auricle with subjective thickening of the right ventricle free wall in the area of the right atrioventricular groove.
Kelly Vazquez	Secondary
HOSPITAL NAME	<ul style="list-style-type: none"> • Possible mild cystitis.
Bergen County Vet Center	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
REFERRING VET	The gallbladder wall edema is likely owing to increased hydrostatic pressure owing to pericardial effusion and cardiac tamponade. Potential for acute gallbladder inflammation, anaphylaxis, or neoplasia considered less likely.
Dr. Halloran	
INVOICE	General considerations for the pericardial effusion may include neoplasia, which is suspected in this case, infectious disease, inflammatory disease, or idiopathic. Therapeutic and diagnostic pericardial centesis along with effusion analysis recommended.
49421	
DATE	Very guarded prognosis.
1-10-22	



PATIENT

Newman McKenzie

SPECIES

Canine

BREED

German Shepherd

SEX

MN

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INTERPRETED BY

R. McKenzie Daniel,
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IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Bergen County Vet
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REFERRING VET

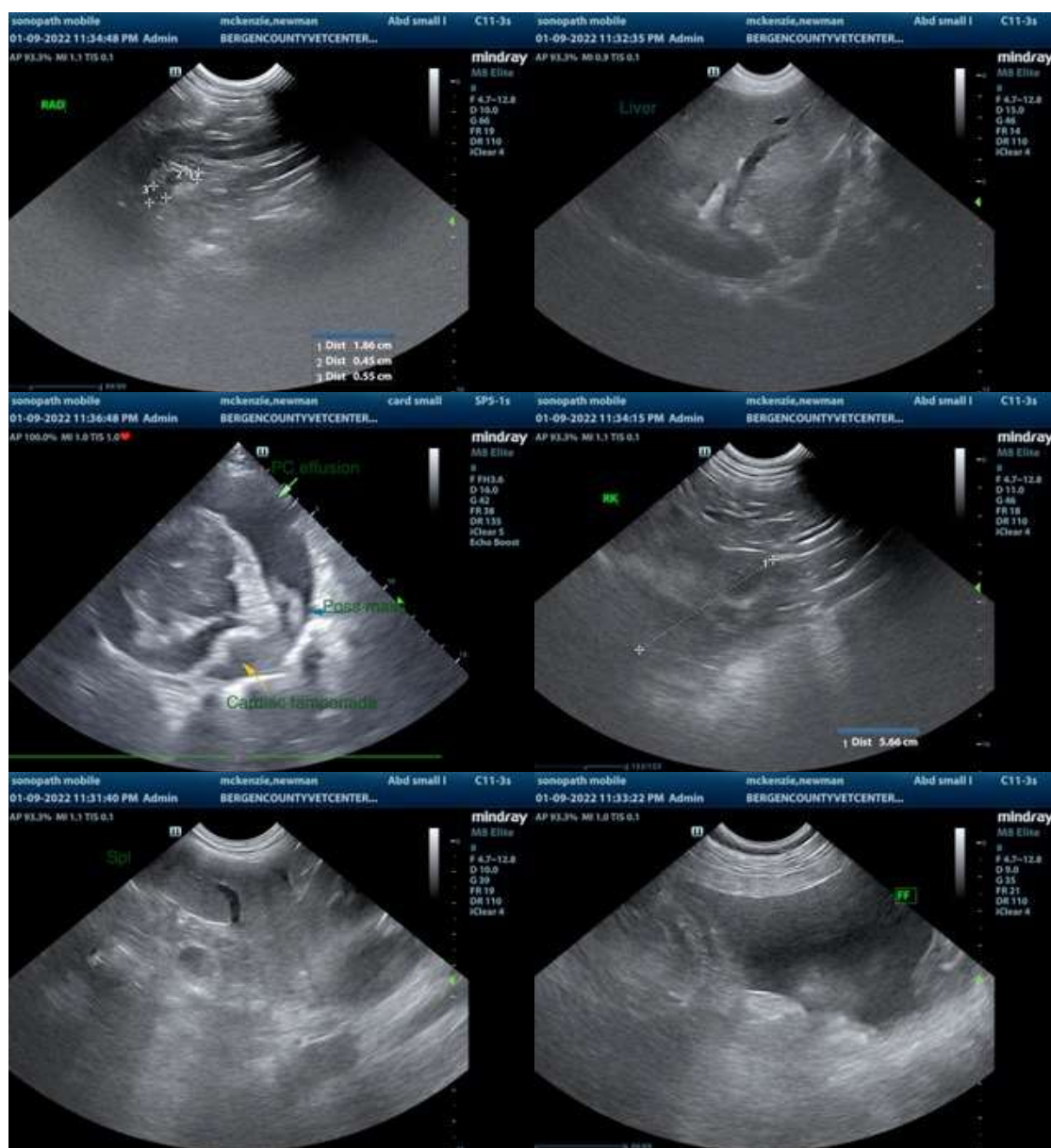
Dr. Halloran

INVOICE

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PATIENT

Newman McKenzie

SPECIES

Canine

BREED

German Shepherd

SEX

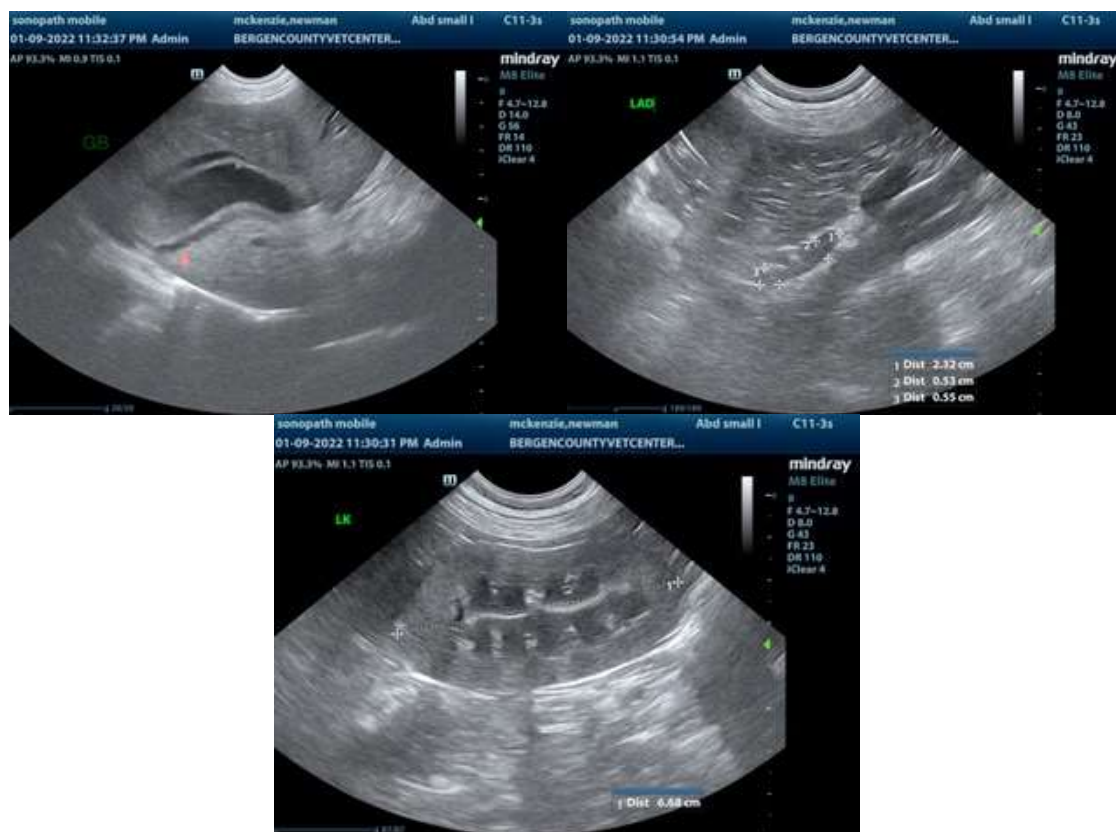
MN

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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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com