



## PATIENT

Remi Stoudt

## SPECIES

Canine

## BREED

Labrador Retriever

## SEX

Intact Female

## AGE

5 Years 6 Months

## WEIGHT

44 kg

## INTERPRETED BY

R. McKenzie Daniel,  
DVM, DABVP

## IMAGING PERFORMED BY

Renee Trionfetti VMD

## HOSPITAL NAME

Blue Pearl Wyomissing

## REFERRING VET

Blue Pearl Wyomissing  
ER

## INVOICE

12916

## DATE

01/02/26

## PRESENTING CLINICAL SIGNS

AUS to further evaluate abdominal mass. Right shoulder wrapping around ventral neck is a very large SQ mass aspirated at mast cell. Concern for metastatic disease. Dark tarry stools, vomited once yesterday, epistaxis yesterday and sneezing blood in ER, icteric. Elevated LES, GGT, T. bili, prolonged PT, anemia. Currently in the ER. Benadryl 100 mg given.

Abnormal PE/Chem/CBC/UA Results: CXR/AXR: Concern for sternal lymphadenopathy and a widened mediastinum. Hepatomegaly. Concern for abdominal mass, likely splenic. -CBC: Hct 25.5% L, Hgb 8.4 L, RBC 4.0 L, MCHC 33.1 L, Plts 241-n, Lymphs 0.23 L - PCV/TS: 25%L / 7.4 H - Chem: ALP > 993 H, ALT 404 H, GGT 71 H, T. bili 1.8 H, Ca 8.6 L, BUN 37.3 H, Cr 0.6, K 3.3 L, Phos 6.2 H - PT 23.3 s H (12-17), aPTT 109.5 s -wnl (96-116)

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic change were noted.

No obvious pathology in the area of the uterus. The bilateral ovaries were not definitively visualized.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 6.0 cm in length. The right kidney measured 6.0 cm in length.

### Adrenal Glands

No obvious pathology in the area of the left adrenal gland.

The right adrenal gland was overtly normal in size, position and shape. The right adrenal gland measured 0.79 cm width at the caudal pole.

### Spleen

The spleen presented asymmetrically enlarged in size with diffuse nonhomogenous nodular parenchyma. Adequate splenic vascularity was evident.

### Liver

The liver revealed generalized hepatomegaly with mild nonhomogenous parenchyma. Multiple homogenous hypoechoic intraparenchymal nodules were visualized.

The gallbladder was non distended in size with mild nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

### Gastrointestinal



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The stomach presented wall thickening. Intact mildly prominent wall layering was present exhibiting mild decreased mural echogenicity and prominent gastric mucosa of the stomach. The stomach contained a mild amount of retained anechoic fluid without overt obstruction to pyloric outflow.

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The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A segmental to diffuse ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present without obstruction or foreign material.

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Normal visible colon wall layers were present with apparent formed feces in lumen.

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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.

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### Free Abdomen

A medial iliac lymph node was present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). The lymph node measured 3.1 cm x 1.0 cm Moderate, cellular peritoneal effusion was present. The mesentery exhibited increased echogenicity with a diffuse nodular pattern. Mild increased omental echogenicity.

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Intermittent mesenteric lymph nodes were present. The lymph nodes were hypoechoic to swollen in appearance with abnormal width: length ratio (>0.5). The mild to moderately enlarged lymph nodes were bordered by echogenic to reactive mesentery.

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Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window. Subjective normal overall cardiac structure and function without evidence of left or right heart chamber enlargement or subjective LV systolic dysfunction. Similar appearing hypoechoic to swollen cranial thoracic or mediastinal lymphadenopathy was visualized.

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## ULTRASONOGRAPHIC FINDINGS

- Irregular enlarged nonhomogenous nodular spleen.
- Hepatomegaly with intraparenchymal nodules.
- Gastroenteropathy exhibiting mild nonobstructive gastric and segmental intestinal ileus.
- Bicavitary hypoechoic to swollen lymphadenopathy.
- Peritoneal effusion.
- Subjective normal cardiac structure/function.

## REFERRING VET

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unfortunately, multicentric, primary or metastatic neoplastic criteria has been met. Hepatosplenic and accessible lymph node FNA cytology could be considered with potential oncology consult for immediate chemotherapeutic intervention with gastrointestinal support, however, a poor prognosis is unfortunately indicated.

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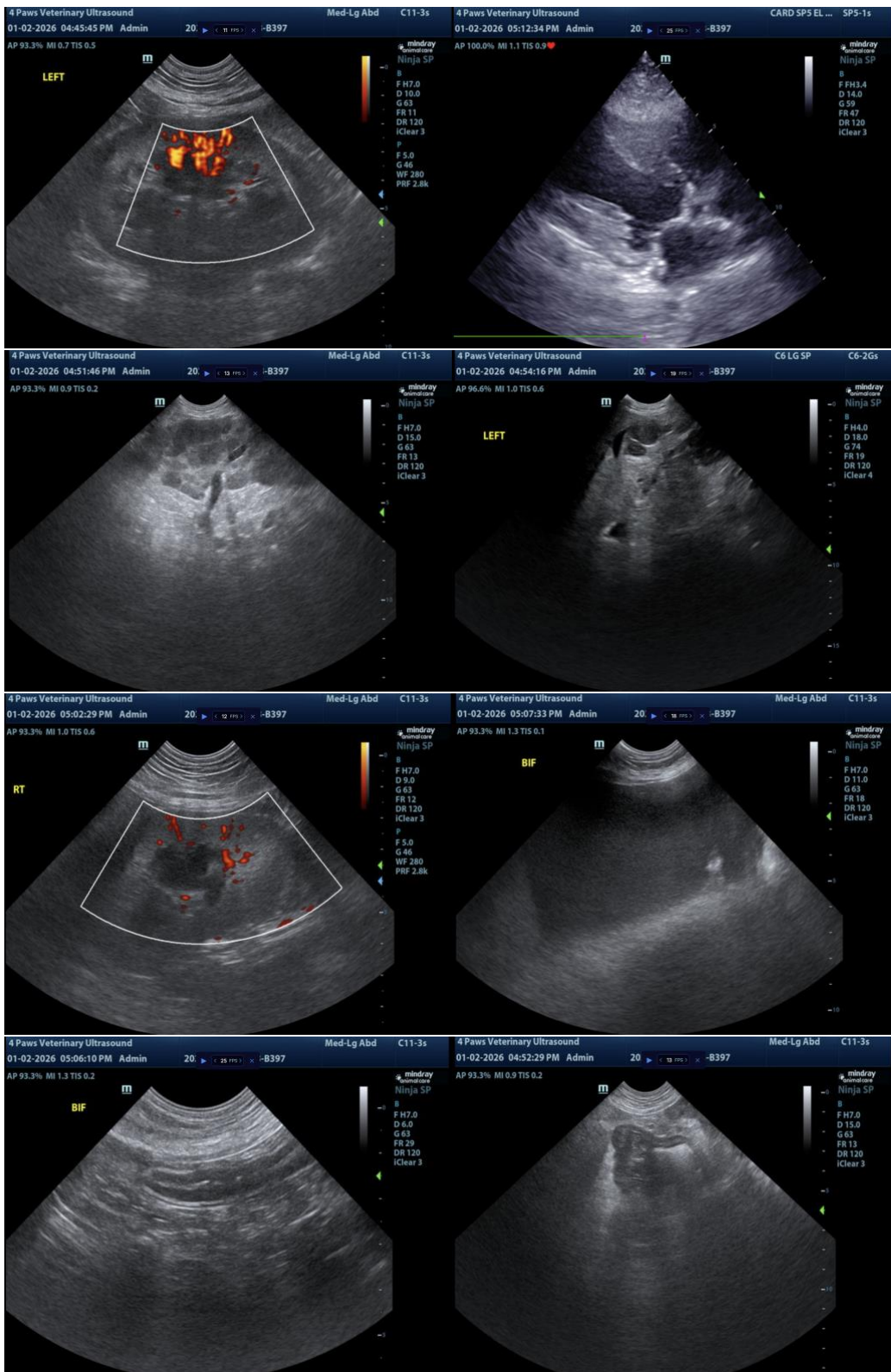
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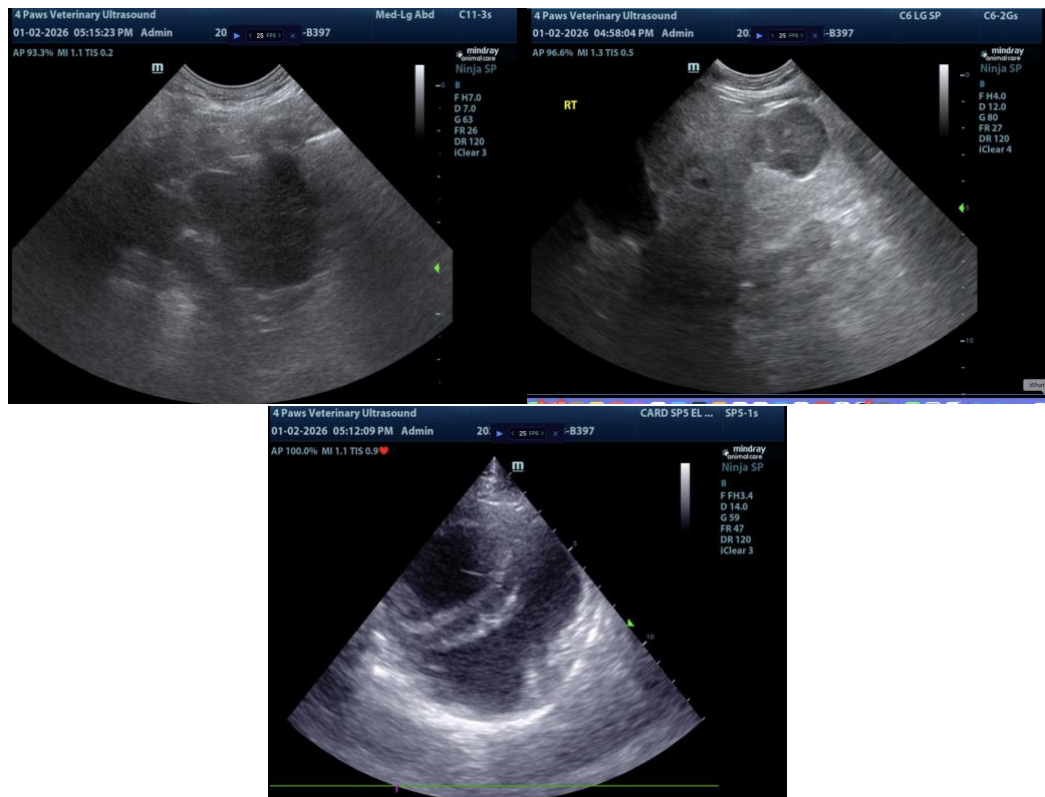
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

[info@SonoPath.com](mailto:info@SonoPath.com)