



PATIENT

Louie Squirlock

SPECIES

Canine

BREED

Bernese Mountain
Dog

SEX

MN

AGE

5.5 years

WEIGHT

110.6 lbs.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

**IMAGING
PERFORMED BY**

Shari Reffi, CVT

HOSPITAL NAME

Companion AH
(Parsipany)

REFERRING VET

Dr. Tsai

INVOICE

15907

DATE

1/24/23

PRESENTING CLINICAL SIGNS

Anemic. R/O Liver vs spleen vs both vs other.

Abnormal PE/Chem/CBC/UA Results: Wbc 16.4; RBC 2.2; Hgb 5.7; Hct 21; MCV 95; MCHC 28; NRBC 9; Neuts 12628; T4 <5; Ca 8.3; Chol 89; SDMA 18.9; TBili 1.0

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 5.0 cm 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 changes was noted.

The residual prostate was overtly normal in size and contour, given patient size and breed, exhibiting subtle nonhomogeneous yet nonmineralized parenchyma measuring 2.1 cm in diameter. This is likely a patient variant without evidence of residual prostatic inflammatory or neoplastic criteria.

No evidence of medial Iliac or sublumbar lymphadenopathy.

Normal size and margination were 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 7.3 cm in length. The right kidney measured 7.5 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.9 cm length x 0.70 cm width at the caudal pole. The right adrenal gland was uniform 3.0 cm length x 0.73 cm width at the caudal pole.

Spleen

The spleen presented marked variable enlargement exhibiting maintained finely textured homogeneous parenchyma with associated variable swollen to asymmetrical capsule contour. Normal splenic vascularity was present without evidence of splenic vein thrombosis. The spleen measured up to 8.0-9.0 cm in diameter in the area of the subjective mid-cranial spleen.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild, non-dependent yet nonorganized, echogenic gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.



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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate, variably echogenic, non-shadowing ingesta most consistent with post prandial presentation or recent meal ingestion without signs of ileus, obstruction or foreign material.

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.

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

Pancreas

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 were evident.

Free Abdomen

Mild volume peri splenic / peritoneal free fluid was present. No overt lymphadenopathy was noted.

Rapid view of the heart revealed no obvious evidence of cardiac or right atrial masses. Possible very scant pericardial effusion was noted.

ULTRASONOGRAPHIC FINDINGS

- Marked variable splenomegaly with splenic folding
- Sonographically normal liver
- Mild gallbladder debris (non-mucocele)
- Mild perisplenic / peritoneal free fluid, possible very scant pericardial effusion

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Considerations for the marked variable splenomegaly may include hyperplasia, hematopoiesis, and splenitis, although primary concern for infiltrative round cell neoplasia is warranted.

Assuming normal clotting status and using a 25-gauge needle, with recommended Benadryl pretreatment, FNA splenic cytology is recommended for further assessment.

No obvious evidence of intraabdominal metastatic disease. Serial sonographic monitoring for evidence of possible progressive pericardial effusion, especially if neoplastic splenic disease is confirmed, is recommended. CBC pathology review and three view chest radiographs, if not done, may be considered.



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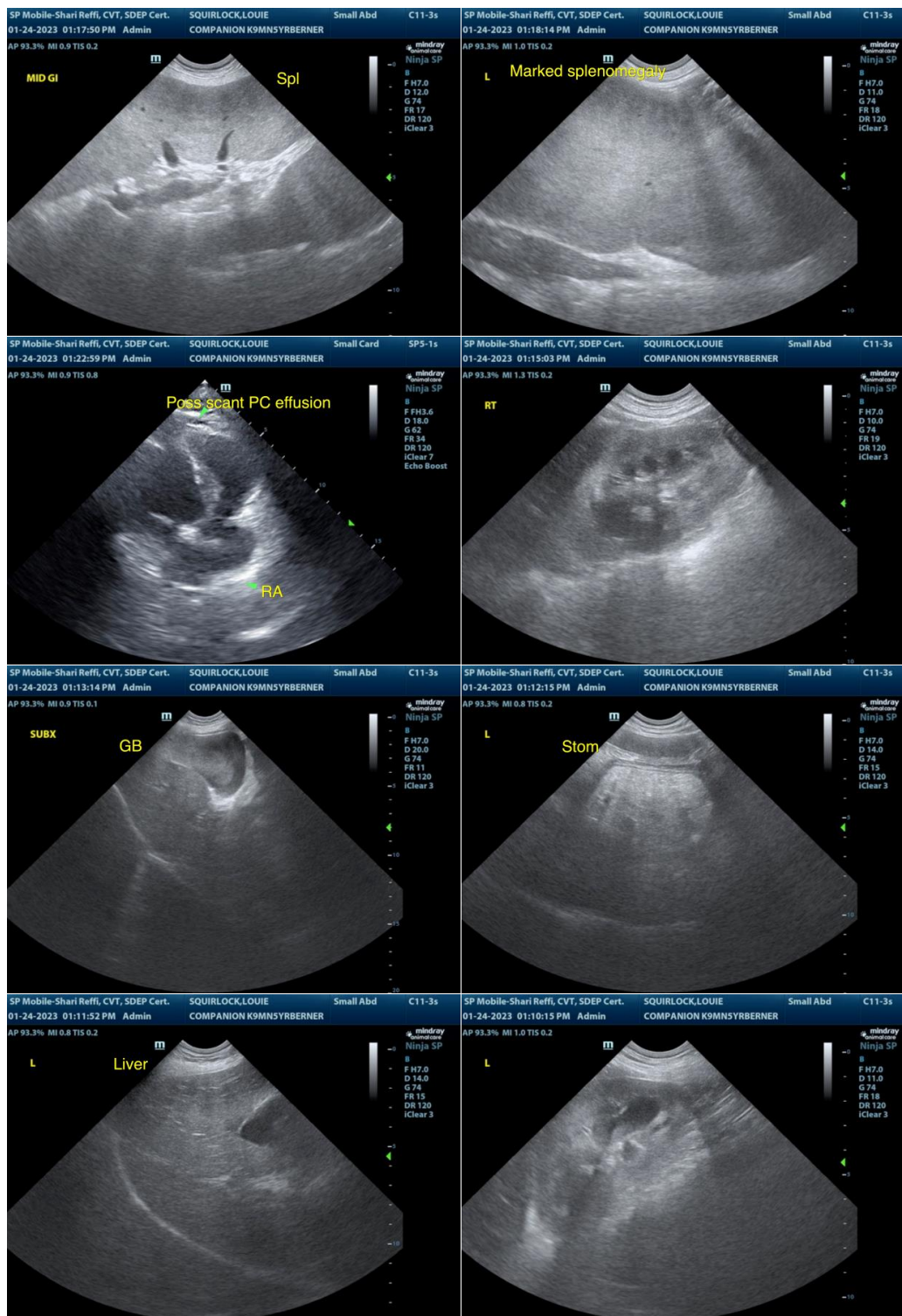
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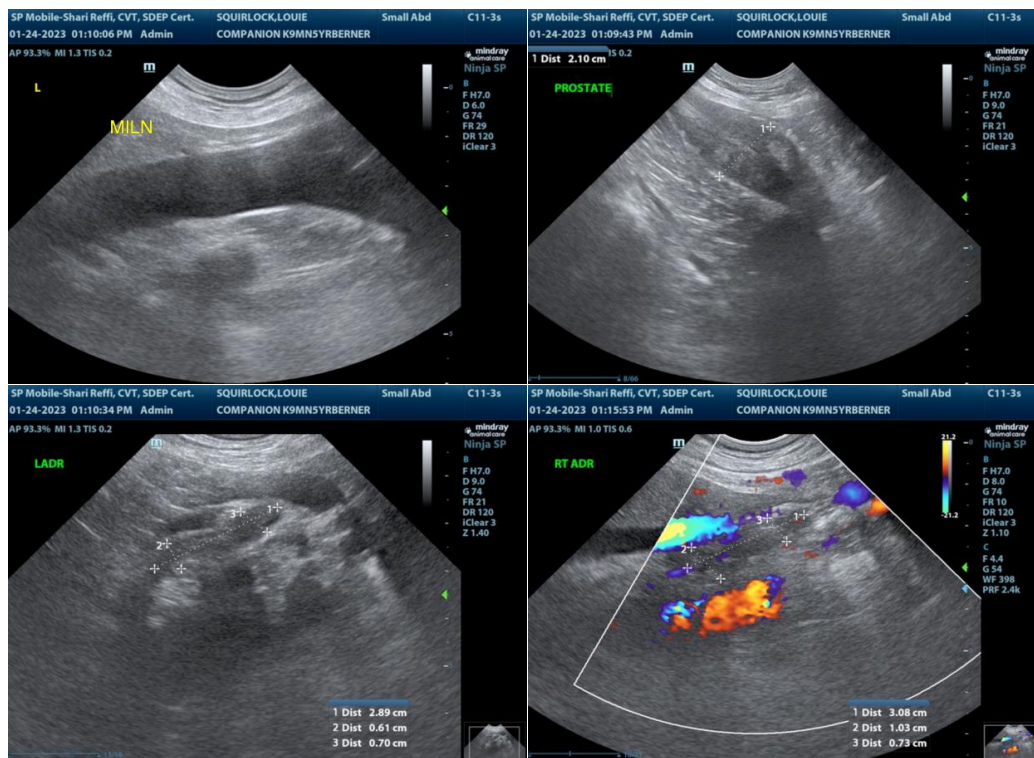
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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