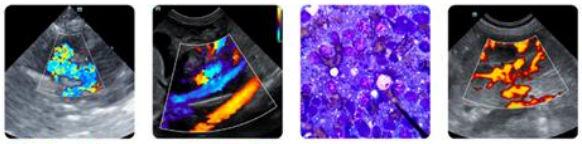


PATIENT

Hazel Evans

SPECIES

Canine

BREED

Mix Shepherd

SEX

FS

AGE

9yr

WEIGHT

21.4kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Erin Wicks

HOSPITAL NAME

Shores Veterinary Emergency Center

REFERRING VET

Dr Kerr

INVOICE
23676

DATE
01/27/2026

PRESENTING CLINICAL SIGNS

- P lethargic, laying in one spot for 2 hours. P didn't eat today, vomited once (bile). While laying down, O noticed her stomach was spasming. O also noticed that her gums were pale and her lips and feet were cold.

Abnormal PE/Chem/CBC/UA Results: 3- Moderate Pain, with abdominal palpation Coag- wnl CBC Hct 44 %(N) plat 111k (L) Chem- TP 4.5(L) glob 1.9(L) glucose 128(H) EPOC- pH 7.302(L) lactate 7.28(H) Radiographs generalized decreased detail abdomen; no visible spleen; (confirmed effusion with fast scan) chest- slightly smaller cardiac silhouette

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 evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 6.2 cm in length. The right kidney measured 6.1 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.61 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.62 cm width at the caudal pole.

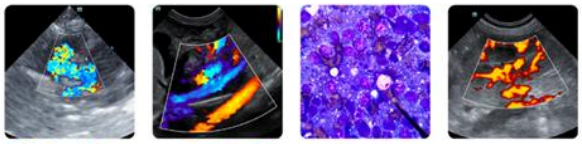
Spleen

A mass involving the spleen with secondary capsule expansion and disruption was present and measured 5-6 cm in diameter. The parenchyma of the mass was heterogeneous to hypoechoic without areas of cavitation. The non-affected spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

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. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and mild congealed hyperechoic debris. The cystic and common bile ducts were normal.

Gastrointestinal



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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.

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 mechanical/metabolic 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 was evident.

Free Abdomen

No obvious visualized overt lymphadenopathy was present.

Generalized normal omental echogenicity was present.

Mild to moderate volume mildly echogenic peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary

- Splenic mass
- Sonographically normal non-congested liver
- Non-edematous gallbladder with mild non-organized gallbladder debris (non-mucocele)
- Normal visualized gastrointestinal tract
- Mild to moderate volume peritoneal effusion

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other). Neoplasia, i.e. sarcoma, round cell neoplasia is favored.

Obvious sonographic evidence of major organ or cardiac metastasis was not overtly evident. Non sonographically evident metastasis / micrometastasis cannot be definitively excluded. If no pathology on thoracic radiographs, splenectomy with gross inspection of the perisplenic omentum and abdominal cavity is warranted. Ideally brief cardiac assessment is suggested prior to potential surgical considerations to rule out cardiac metastases or pericardial effusion.

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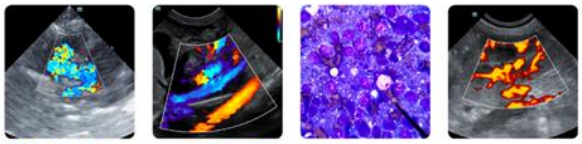

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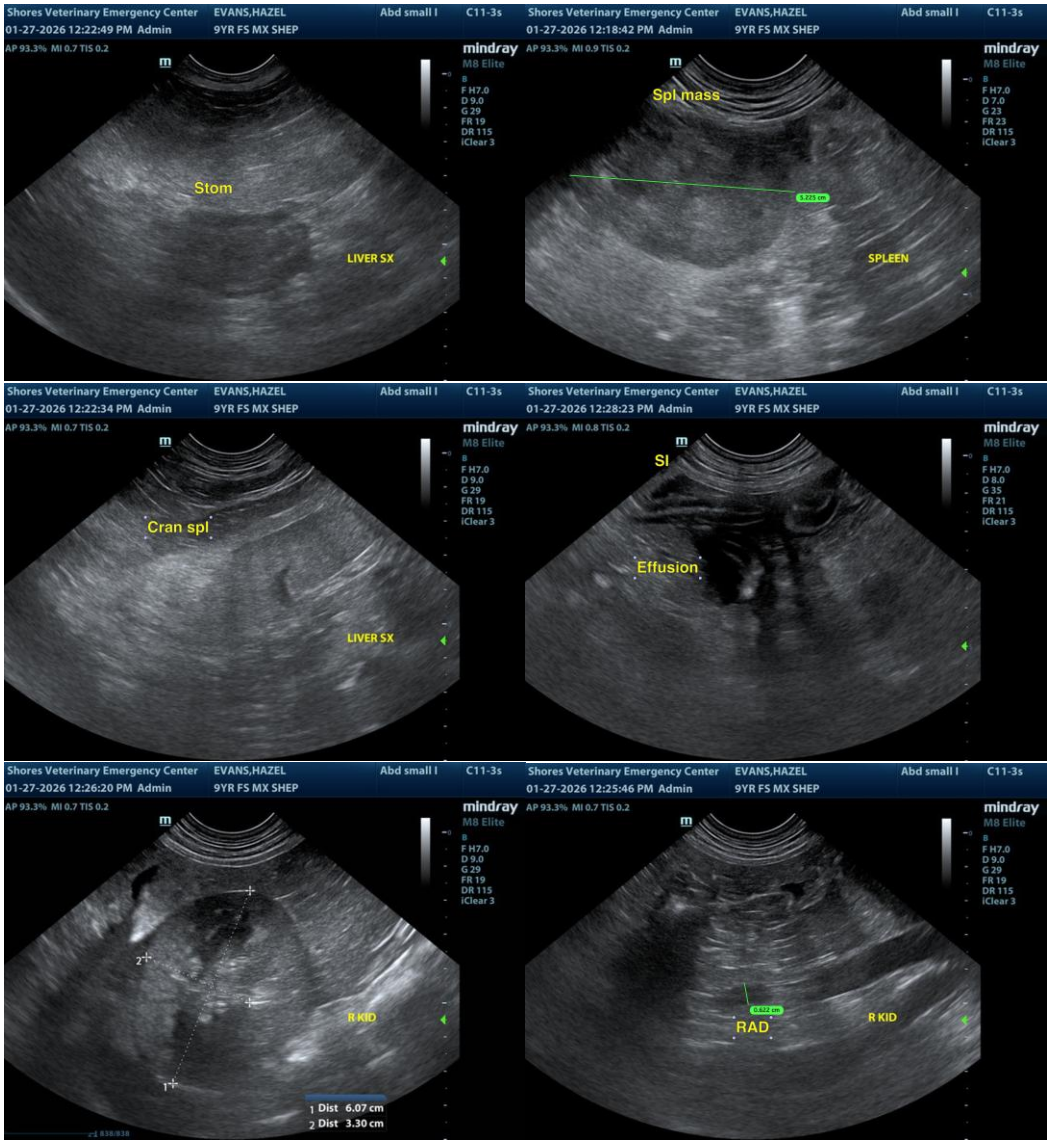

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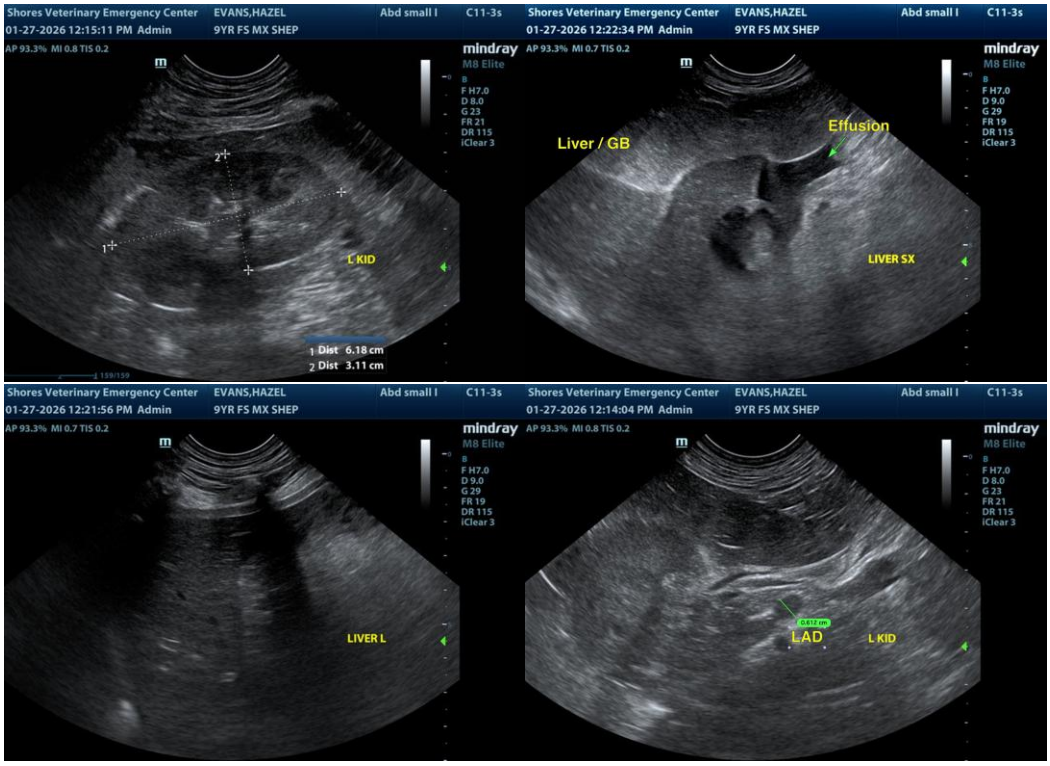

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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