



PATIENT	PRESENTING CLINICAL SIGNS
Meeka Hallett	Patient presented on 1/25/2023 for evaluation of a possible seizure, however may be syncopal event, secondary to pulmonary hypertension, or episodic systemic hypertension/vertigous event, as no gum chewing behavior, nor loss of consciousness described. Described as "glazed over, fell over, lost bowels". PPH: >1 year history of pruritis and dermatitis that has responded well to Apoquel, Cephalexin, baths, etc. Patient received butorphanol IV to facilitate AUS
SPECIES	
Canine	
BREED	
Shepherd Mix	Abnormal PE/Chem/CBC/UA Results: PE: Mild paraspinal epaxial muscle atrophy. Heart murmur 2/6, R side. LS OU, no nystagmus OU, Normal PLRs CBC: -- Unremarkable, HCT: 49% -- Mild lymphopenia, 720/uL (1000-4800 CHEM: -- BUN: 29 mg/dL (7-25) -- Creat: 1.6 mg/dL (0.3-1.4) -- ALT and ALP are WNL No USG available, but BUN has historically been slightly elevated THORACIC RADS: -- NSF ABDOMINAL RADS: -- Cranial abdominal mass, LS and lumbar spondylosis, shallow acetabulum R hip Systolic BP: 113 mmHg (oscillometric)
SEX	
FS	
AGE	
13yr	
WEIGHT	
22kg	
INTERPRETED BY	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Urinary System The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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 were noted.
IMAGING PERFORMED BY	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. Pinpoint medullary mineral was present. The left kidney measured 4.9 cm in length. The right kidney measured 5.2 cm in length.
Patti Mayfield DVM	The area of the aortic trifurcation was free of pathology.
HOSPITAL NAME	Adrenal Glands
La Paw Animal Hospital	A discrete caudal left adrenal nodule with associated symmetrical caudal capsule distortion without evidence of parenchymal escape or vascular invasion. The left adrenal gland measured 1.6 cm width at the caudal pole and 2.6 cm length.
REFERRING VET	The right adrenal gland was enlarged with asymmetrical contour and non-homogenous parenchyma. The right adrenal gland measured 1.1 cm width at the caudal pole and 3.0 cm length.
Dr. La Paugh	Spleen
INVOICE	The spleen exhibited normal size with areas of lateral and medial capsule asymmetry and generalized parenchyma heterogeneity. Multiple non-disruptive coalescing hyperechoic nodules were present, an example measured 1.3 cm in diameter. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.
12820ag	Liver/Gallbladder
DATE	The liver presented mildly enlarged in size. A caudally expansive well demarcated uniform mass exhibiting similar echogenicity to adjacent hepatic parenchyma was present measuring 6-7 cm in diameter. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-
01/30/2023	



PATIENT

Meeka Hallett

distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

SPECIES

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.

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. No evidence of GI mural masses.

BREED

Shepherd Mix

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

SEX

FS

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum, likely consistent with age related changes and considered incidental. No signs of active inflammation or neoplasia.

AGE

13yr

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

WEIGHT

22kg

ULTRASONOGRAPHIC FINDINGS

- Mild chronic renal changes
- Bilateral irregular nodular adrenomegaly
- Non-specific subjective benign multiple to coalescing splenic nodules
- Caudally expansive hepatoma-like liver mass
- Sonographically unremarkable small bowel

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A full urinary work up including urine C/S and baseline UPC level is recommended. A screening BP is advised to assess for evidence of hypertension which may allude to emerging adrenal neoplastic criteria i.e., pheochromocytoma +/- urine catecholamine levels if systemic hypertension is documented. Assuming normal clotting status and using a 25g needle, a liver mass FNA for screening cytology is warranted for further assessment although the mass is not overtly consistent with neoplastic criteria.

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

La Paw Animal
Hospital

Monitoring of serum BG levels is recommended as episodes of hypoglycemia may be associated with hepatic masses. The hepatoma-like liver mass appears to be amendable to surgical resection.

REFERRING VET

Dr. La Paugh

Sonographic monitoring of the bilateral adrenal glands for evidence of progressive enlargement or parenchymal changes is likely ideal.

INVOICE

12820ag

DATE

01/30/2023



PATIENT

Meeka Hallett

SPECIES

Canine

BREED

Shepherd Mix

SEX

FS

AGE

13yr

WEIGHT

22kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

La Paw Animal
Hospital

REFERRING VET

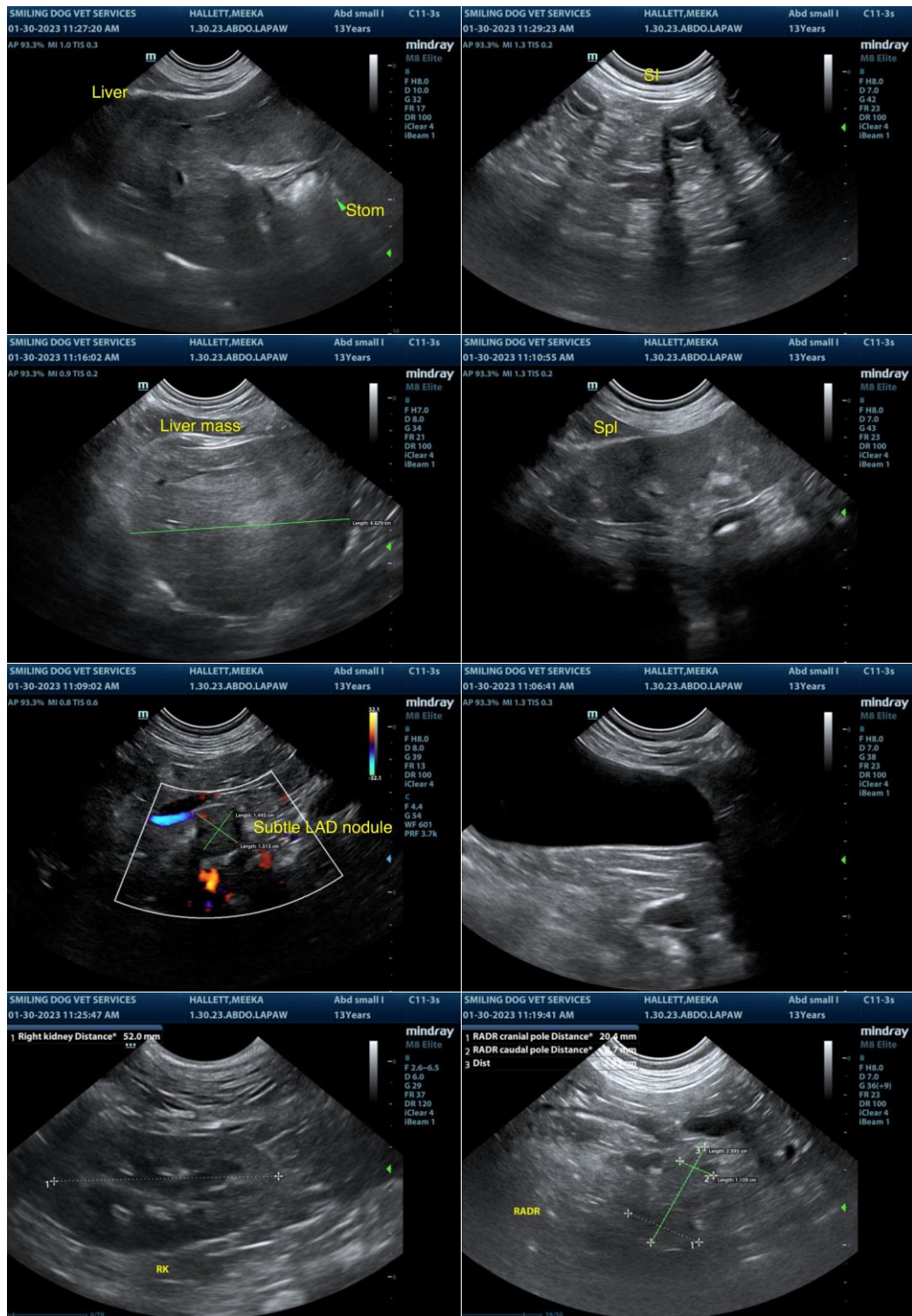
Dr. La Paugh

INVOICE

12820ag

DATE

01/30/2023





PATIENT

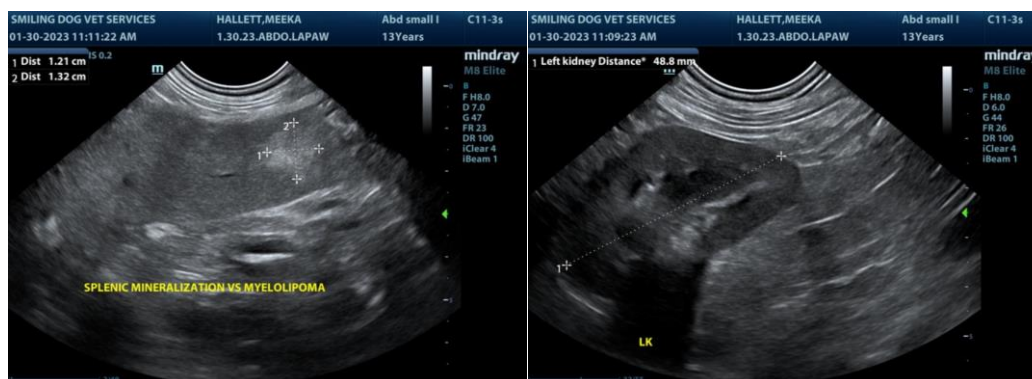
Meeka Hallett

SPECIES

Canine

BREED

Shepherd Mix



SEX

FS

AGE

13yr

WEIGHT

22kg

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)
mac.daniel@sonopath.com

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield DVM

HOSPITAL NAME

La Paw Animal
Hospital

REFERRING VET

Dr. La Paugh

INVOICE

12820ag

DATE

01/30/2023