

**PATIENT**

Zoey Doonan

PRESENTING CLINICAL SIGNS

Weight loss and decrease appetite.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: BCS 3/9, Thoracic rads revealed a VHS of 11.5, a small soft tissue opacity to the right of the bifurcation of the trachea, congestion is also present around the bifurcation area. Pt has some bronchiolar pattern and sporadic air bronchogram seen. Abdominal x-ray revealed a possibly enlarged/mal-positioned liver and spleen. The detail of the abdomen was difficult due to loss of fat. Pt has a drained cyst with some secondary matting on the left hip region. Pt has severe crepitus in the rear legs and some in the elbows/shoulder regions. Bilateral sunken globes due to weight loss. CBC/Chem WNL

BREED

Bernese Mountain Dog

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN WITH CURSORY THORAX**SEX**

FS

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 changes were noted.

AGE

10yr

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 7.2 cm in length. The right kidney measured 7.0 cm in length

WEIGHT

73lb

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 3.0 cm length and 0.79 cm width in the caudal pole. The right adrenal gland measured 3.0 cm length and 0.72 cm width in the caudal pole.

IMAGING PERFORMED BY

Sarah Pender CVT

Spleen

The spleen exhibited mild enlargement with multiple mildly expansive well demarcated hypoechoic splenic nodules. An example of a splenic nodule measured 1.7 cm in diameter. A mildly hyperechoic nodular mass/lesion was present in the cranial spleen with subtle associated splenic capsule distortion.

HOSPITAL NAME

SVS Imaging QC

Liver/Gallbladder

The liver exhibited generalized enlargement with heterogenous parenchyma and multiple discrete intraparenchymal nodules. The nodules exhibited mild central hyperechogenicity with hypoechoic periphery. Concurrent mildly expansive to irregular isoechoic intraparenchymal mass was present in the mid liver measuring ~ 6.0 cm in diameter. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with moderate echogenic non-organized debris. The cystic and common bile ducts were normal.

REFERRING VET

Dr. Yerkey

Gastrointestinal

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. in width.

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DATE

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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.

SPECIES

Pancreas

Canine

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/Thorax

Small pockets of scant peritoneal free fluid were present.

SEX

FS

Multiple focally enlarged mesenteric lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node adjacent to the portal vein measured 5.7 cm x 2.8 cm.

AGE

10yr

Brief sonographic assessment of the thorax revealed concurrent similar appearing hypoechoic thoracic masses vs lymphadenopathy. An example of potential thoracic mass measured 3-4 cm in diameter. Concurrent mild volume pleural effusion was present. Brief subjective echocardiogram revealed potential for mild left and right heart chamber enlargement with possible decreased LV contractility.

WEIGHT

73lb

ULTRASONOGRAPHIC FINDINGS

- Multiple mildly expansive hypoechoic to variably echogenic splenic nodules
- Hepatomegaly exhibiting target like intraparenchymal nodules with discrete isoechoic intraparenchymal mass
- Multicentric intra-abdominal hypoechoic to swollen lymphadenopathy
- Concurrent similar appearing thoracic mass vs lymphadenopathy and pleural effusion

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

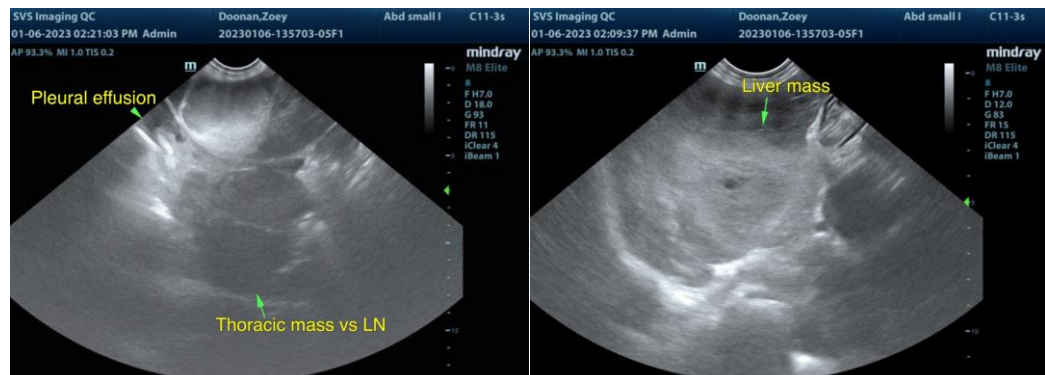
The sonographic findings in this case are consistent with disseminated round cell neoplasia with primary concern for disseminated histiocytic sarcoma given the breed. Other round cell neoplastic etiologies are possible. Assuming normal clotting status and using a 25g needle, a lymphatic and hepatosplenic FNA +/- effusion analysis for screening cytology could be considered for further assessment and potential oncology consult, however an unfavorable prognosis is indicated.

IMAGING PERFORMED BY

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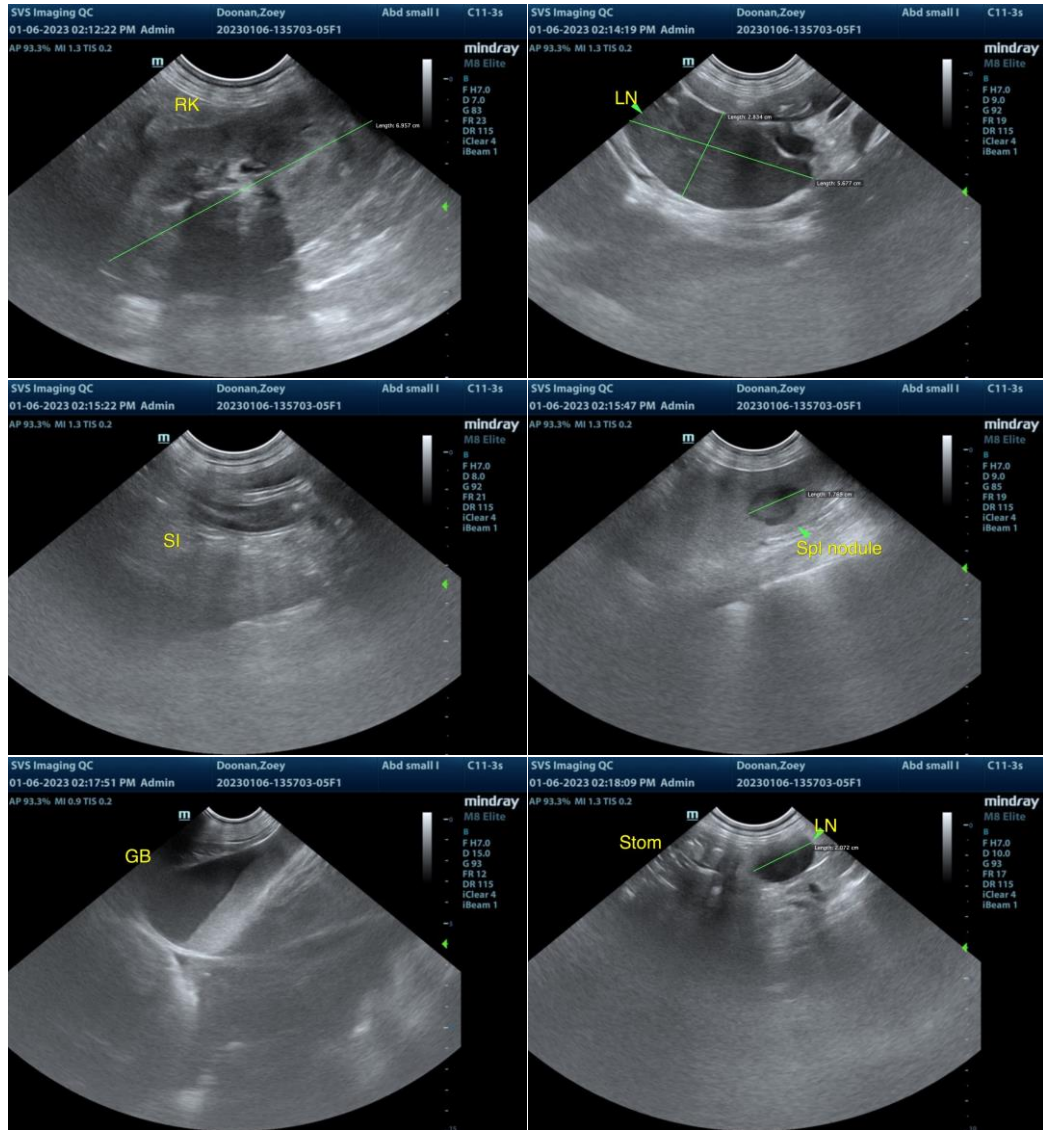
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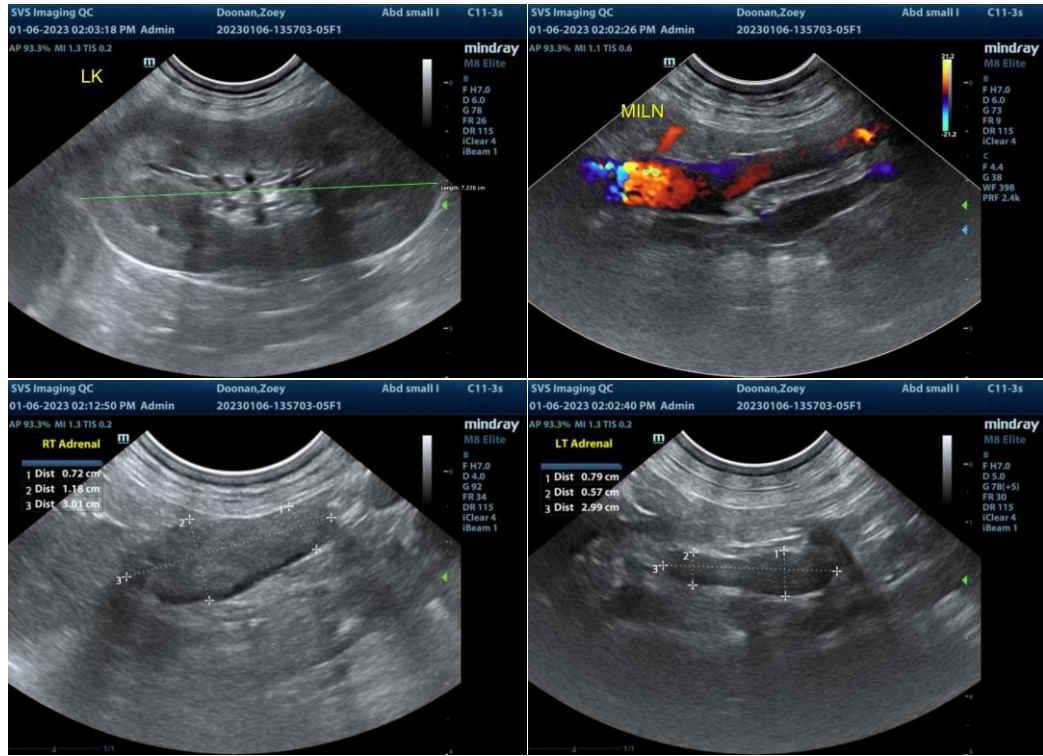
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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