



PATIENT

Coco Simmons

SPECIES

Canine

BREED

Silky Terrier

SEX

SF

AGE

13 years 2 months

WEIGHT

10.5

INTERPRETED BY

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

IMAGING PERFORMED BY

Michaleen

HOSPITAL NAME

DPC VH

REFERRING VET

Dr. Feldt

INVOICE

15218

DATE

10/13/22

PRESENTING CLINICAL SIGNS

History: Chronic Neutropenia

Abnormal PE/Chem/CBC/UA Results: Testing Performed: CBC: Leukopenia 2,800 (was 2700 10/2021, 3940 11/2020, 3,600 5/2020) Neutropenia 1509 (was 1,485 10/2021, 2640 11/2020, 2304 5/2020) Lymphopenia 997 (was 918 10/2021, 880 11/2020) - r/o normal variation, consumption (oral infection), tick borne dz (4DX neg), bone marrow dz Chem: BUN 32 (was 28 10/2021) - r/o GI given SDMA 12 Creat WNL 0.9 Chol 386 - r/o post prandial T4 WNL 3.8

The submitted study contained 9 videos of the spleen and perisplenic abdomen.

ULTRASONOGRAPHIC EXAMINATION OF THE SPLEEN

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Visualized segments of the gastrointestinal tract appeared to be sonographically normal.

No visualized perisplenic lymphadenopathy, masses, or evidence of perisplenic / peritoneal free fluid were noted.

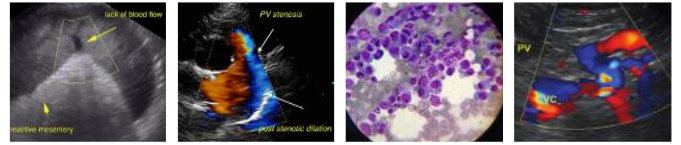
ULTRASONOGRAPHIC FINDINGS

- Sonographically normal spleen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of splenic or regional perisplenic pathology was noted.





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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)
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