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| PATIENT | PRESENTING CLINICAL SIGNS |
| Buddy Mefford | Presented on 10/4 for lethargy and abnormal neuro symptoms (dizziness). Current meds: Cefpoxime 100mgs, Cytopoint 40 mgs. |
| SPECIES | Abnormal PE/Chem/CBC/UA Results: Non-regenerative anemia, neutrophilia with bands, severe elevated nucleated RBCs, marked high ALP 520, severely elevated amylase 3454 and lipase 1800, mildly elevated SDMA 16. U/A: 3+ proteinuria, trace blood, 1+ bilirubin, USG: 1.034. |
| Canine | |
| BREED | ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN |
| Shetland Sheepdog | Urinary System |
| SEX | 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. |
| MN | |
| AGE | 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 5.0 cm in length. The right kidney measured 4.9 cm in length. |
| 11.5 | |
| WEIGHT | The area of the aortic trifurcation was free of pathology. |
| 37.5lb | The area of the residual prostate appeared normal and free of pathology. |
| INTERPRETED BY | Adrenal Glands |
| R. McKenzie Daniel, DVM, DABVP (Canine and Feline) | 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 2.4 cm length and 0.68 cm width in the caudal pole. The right adrenal gland measured 2.6 cm width length and 0.58 cm width in the caudal pole. |
| IMAGING PERFORMED BY | Spleen |
| Kelly Vazquez | The spleen exhibited a large diffuse asymmetrical mixed echogenic to irregular mass measuring at least 10 cm in diameter but likely larger as the entire mass would not fit into a single viewing window. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. |
| HOSPITAL NAME | Liver |
| Vetco Total Care Kinnelon | The liver was subjectively mildly enlarged with areas of asymmetrical contour and non-uniform generalized decreased parenchyma echogenicity exhibiting moderate coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. No overt masses or nodules were visualized. |
| REFERRING VET | The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. No evidence of gallbladder or peripheral gallbladder inflammation was present. The cystic and common bile ducts were normal. |
| Dr. Rodriguez | Gastrointestinal |
| INVOICE | |
| 11861ag | |
| DATE | |
| 10/14/2022 | |



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| PATIENT | The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. The gastric body wall measured ~cm width. Mild gastric distension with mild retained nonshadowing ingesta was present. |
| Buddy Mefford | |
| SPECIES | 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. |
| Canine | Normal visible colon wall layers were present with apparent formed feces in lumen. |
| BREED | Pancreas |
| Shetland Sheepdog | The left limb, right limb, and base of the pancreas presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic reactivity / inflammation. No overt evidence of neoplasia. |
| SEX | Free Abdomen |
| MN | Regional perisplenic to perihepatic generalized hyperechoic mesentery along with mild volume peritoneal free fluid was present. |
| AGE | Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window. |
| 11.5 | ULTRASONOGRAPHIC FINDINGS |
| WEIGHT | <ul style="list-style-type: none">• Large diffuse mixed echogenic splenic mass• Hepatomegaly exhibiting nonuniform parenchyma hypoechogenicity• Intact yet prominent gastric walls with mild retained ingesta/chyme• Mild chronic renal changes• Regional perisplenic to perihepatic hyperechoic mesentery and mild volume free fluid |
| 37.5lb | |
| INTERPRETED BY | INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS |
| R. McKenzie Daniel, DVM, DABVP (Canine and Feline) | The diffuse splenic mass is consistent with neoplastic criteria. Concern for multicentric hepatosplenic neoplasia is warranted given the hepatic presentation. Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology is warranted for further assessment. |
| IMAGING PERFORMED BY | Three view chest radiographs are recommended if not done to assess for occult thoracic pathology. |
| Kelly Vazquez | Potential for splenic omental adhesions or regional perisplenic omental seeding cannot be definitively excluded. If not overt neoplastic criteria on hepatic cytology and assuming no evidence of thoracic pathology on radiographs, a splenectomy with gross inspection of the liver, perisplenic omentum +/- hepatic biopsies could be considered. However, given this presentation a suspected unfavorable long term prognosis is indicated. |
| HOSPITAL NAME | |
| Vetco Total Care Kinnelon | |
| REFERRING VET | |
| Dr. Rodriguez | |
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PATIENT

Buddy Mefford

SPECIES

Canine

BREED

Shetland Sheepdog

SEX

MN

AGE

11.5

WEIGHT

37.5lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Vetco Total Care
Kinnelon

REFERRING VET

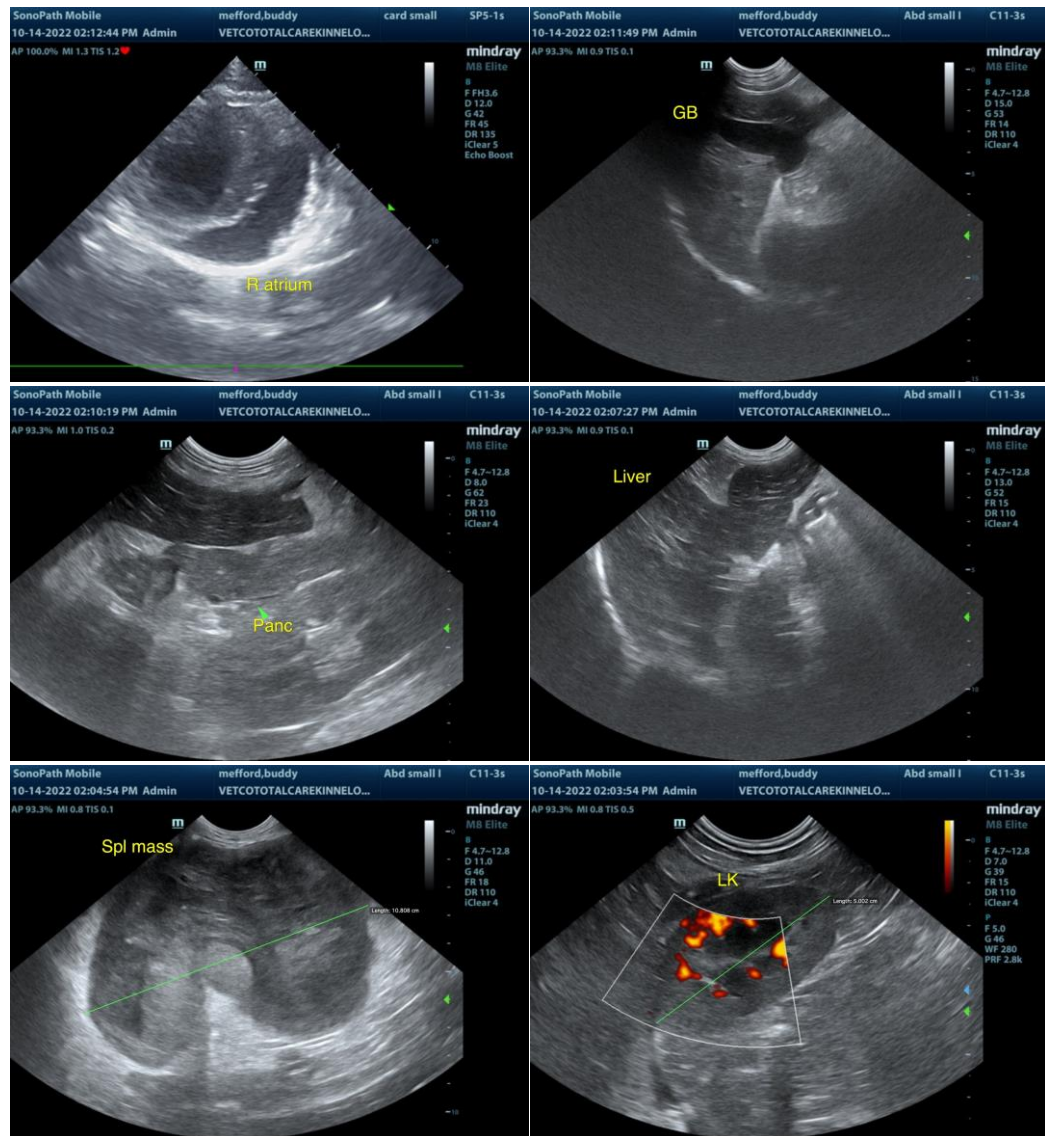
Dr. Rodriguez

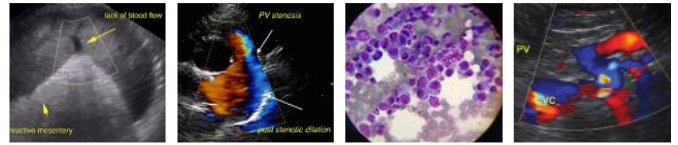
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PATIENT

Buddy Mefford

SPECIES

Canine

BREED

Shetland Sheepdog

SEX

MN

AGE

11.5

WEIGHT

37.5lb

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HOSPITAL NAME

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Kinnelon

REFERRING VET

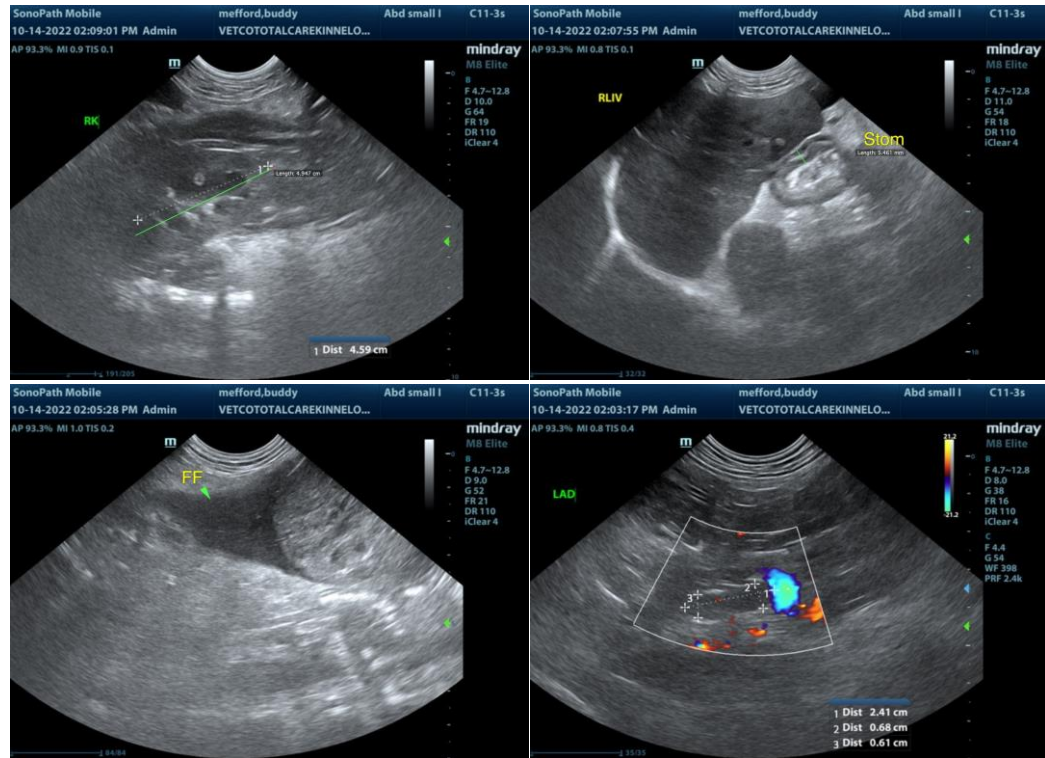
Dr. Rodriguez

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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