



PATIENT	PRESENTING CLINICAL SIGNS
Sterling Frank	Owner has noticed some periodic loose stool, occasional vomiting. Diagnosed with IBD of the colon 2018 via endoscopy but has been doing well until recently on hydrolyzed protein diet. Today has a palpable abdominal mass effect in right cranial abdomen, non-painful.
SPECIES	
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	<i>Urinary System</i>
Grey Hound	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 cm exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Mild, particulate, nondependent sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.
SEX	
FS	
AGE	The area of the aortic trifurcation was free of pathology.
9 years	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. Small corticomedullary cysts were noted in cranial right kidney, along with concurrent left kidney cortical cysts. No evidence of pelvic dilation was present. The left kidney measured 7.7 cm in length. The right kidney measured 6.8 cm in length.
WEIGHT	
85 lbs.	
INTERPRETED BY	<i>Adrenal Glands</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.68 cm width at the caudal pole.
IMAGING PERFORMED BY	The right adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry were present without suspicion for overt neoplasia. The right adrenal gland measured 2.8 cm length x 0.9 width in the caudal pole.
Jenna Walsh, CVT	
HOSPITAL NAME	<i>Spleen</i>
AMazon Park AC	The spleen exhibited marked generalized enlargement with symmetrical yet swollen capsule contour. The spleen extended into the right cranial abdomen adjacent to the right lateral and caudate liver. The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present. Distinct splenic masses or nodules were not noted. Normal splenic vascularity was noted. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.
REFERRING VET	
Dr. Jones	
INVOICE	<i>Liver/ Gallbladder</i>
12400	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance
DATE	
10/20/21*	



PATIENT	without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
Sterling Frank	
SPECIES	<i>Gastrointestinal</i>
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.
BREED	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.
Grey Hound	Normal visible colon wall layers were present with apparent formed feces in lumen.
SEX	<i>Pancreas</i>
FS	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 were evident.
AGE	<i>Free Abdomen</i>
9 years	A small pocket of scant free fluid was noted around the lateral spleen. No overt lymphadenopathy was noted.
WEIGHT	Rapid view of the heart (SDEP 3 position) revealed subjectively normal function without pathology in the right auricle or pericardium.
85 lbs.	
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<i>Primary Findings</i>
IMAGING PERFORMED BY	<ul style="list-style-type: none">• Marked splenomegaly• Sonographically unremarkable liver• Scant perisplenic free fluid• Age-related kidneys with cortical to corticomedullary cysts
Jenna Walsh, CVT	
HOSPITAL NAME	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
AMazon Park AC	Primary concern for Infiltrative splenic neoplasia such as lymphoma, mast cell neoplasia, or other. Potential for nonneoplastic causes of severe splenomegaly such as severe hyperplasia, hematopoiesis, or splenitis is possible yet is thought less likely.
REFERRING VET	Assuming normal clotting status, splenic FNA using a 25-gauge needle following pretreatment with an appropriate dose of Benadryl could be considered for screening cytology. Assuming no evidence of pathology or metastasis on three view chest radiographs, splenectomy may be considered.
Dr. Jones	
INVOICE	
12400	
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PATIENT

Sterling Frank

SPECIES

Canine

BREED

Grey Hound

SEX

FS

AGE

9 years

WEIGHT

85 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh, CVT

HOSPITAL NAME

AMazon Park AC

REFERRING VET

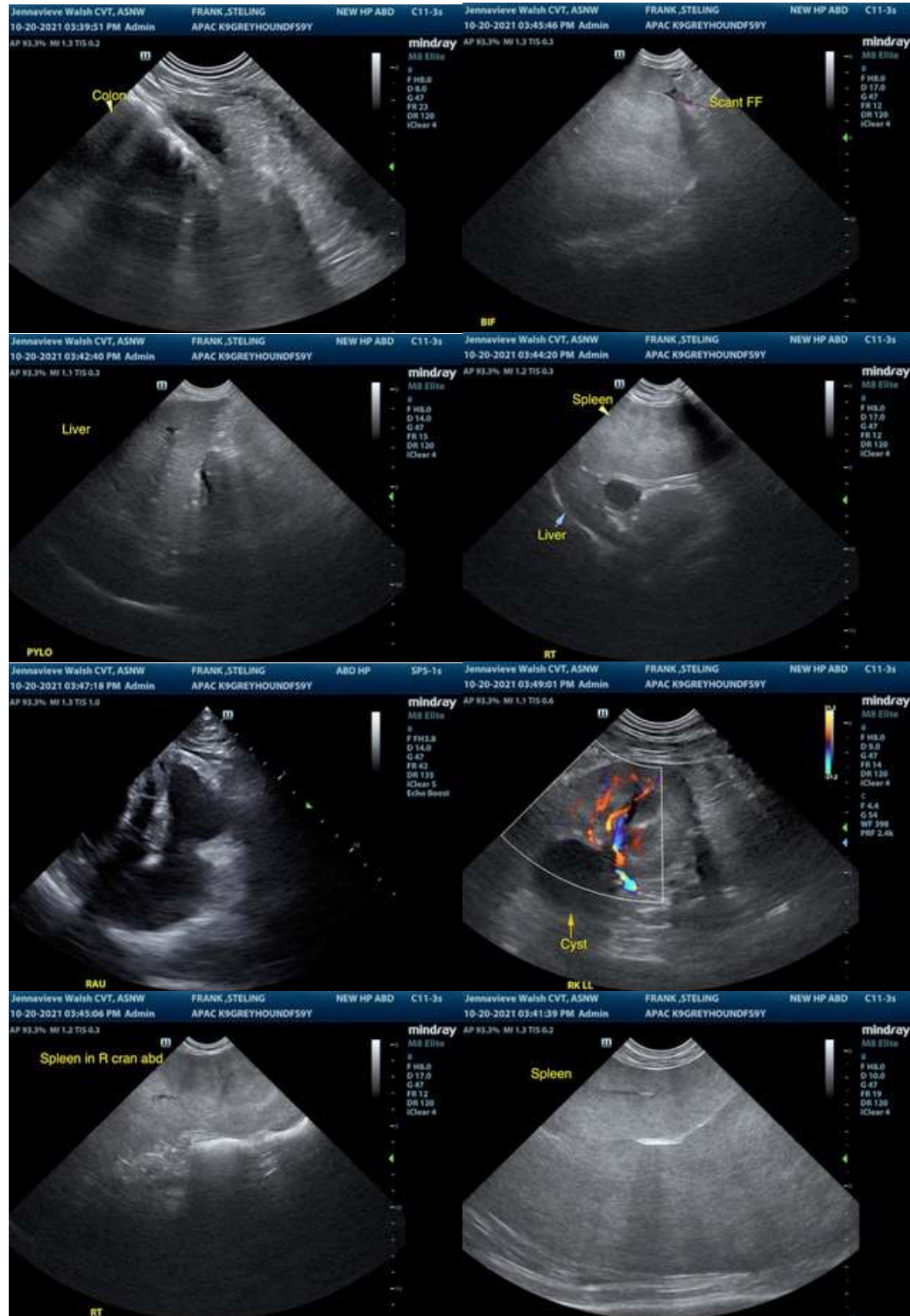
Dr. Jones

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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