



PATIENT PRESENTING CLINICAL SIGNS

Bella Bourne intermittent hyporexia - mild hypochromic nonregenerative anemia - hypoalbuminemia - hyperglobulinemia - mild hypocholesterolemia

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

Terrier Mix

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.

SEX

FS

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 4.9 cm in length. The right kidney measured 4.9 cm in length.

AGE

10yr

The area of the aortic trifurcation was free of pathology.

WEIGHT

10.5lb

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.53 cm width at the caudal pole and 2.4 cm. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.53 cm width at the caudal pole and 1.5 cm.

INTERPRETED BY

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

Spleen

A moderately sized mixed echogenic to nodular mass appearing to involve the cranial spleen was present measuring ~ 5-6 cm in diameter. The spleen not involved with the mass exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

IMAGING PERFORMED BY

Sara Hansen

Liver

HOSPITAL NAME

Willakenzie Animal
Clinic

The liver was potentially enlarged in size, with normal 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 without signs of congestion. No masses or nodules were noted.

REFERRING VET

Dr. Fischer

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with moderate mineralized luminal debris to non-obstructive cholelithiasis. No evidence of gallbladder or peripheral gallbladder inflammation was present. The cystic and common bile ducts were normal.

INVOICE

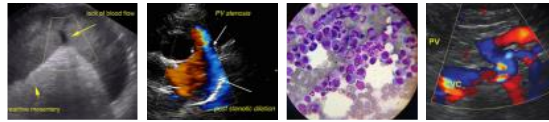
11957ag

Gastrointestinal

DATE

10/20/2022

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.



PATIENT

Bella Bourne

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

Canine

Pancreas

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.

BREED

Terrier Mix

Free Abdomen

SEX

FS

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

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

AGE

10yr

ULTRASONOGRAPHIC FINDINGS

- Irregular to mixed echogenic cranial splenic mass
- Minor hepatic parenchyma remodeling-benign
- Non-obstructive mineralized gallbladder debris/cholelithiasis
- Mild chronic renal changes

WEIGHT

10.5lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

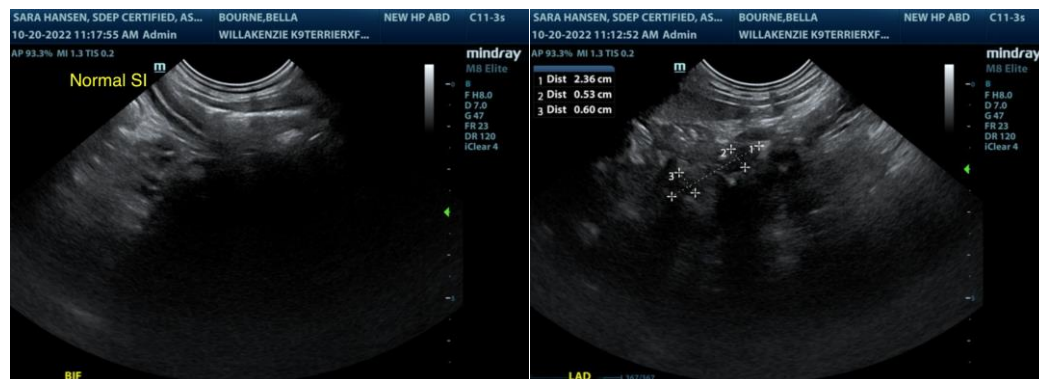
The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other). Neoplastic criteria is favored. No overt evidence of intra-abdominal or cardiac metastasis was observed. Assuming normal clotting status and using a 25g needle, a splenic mass FNA for screening cytology could be considered however if no evidence of thoracic pathology on three view chest radiographs, splenectomy with gross inspection of the liver and perisplenic omentum could be considered.

INTERPRETED BY

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

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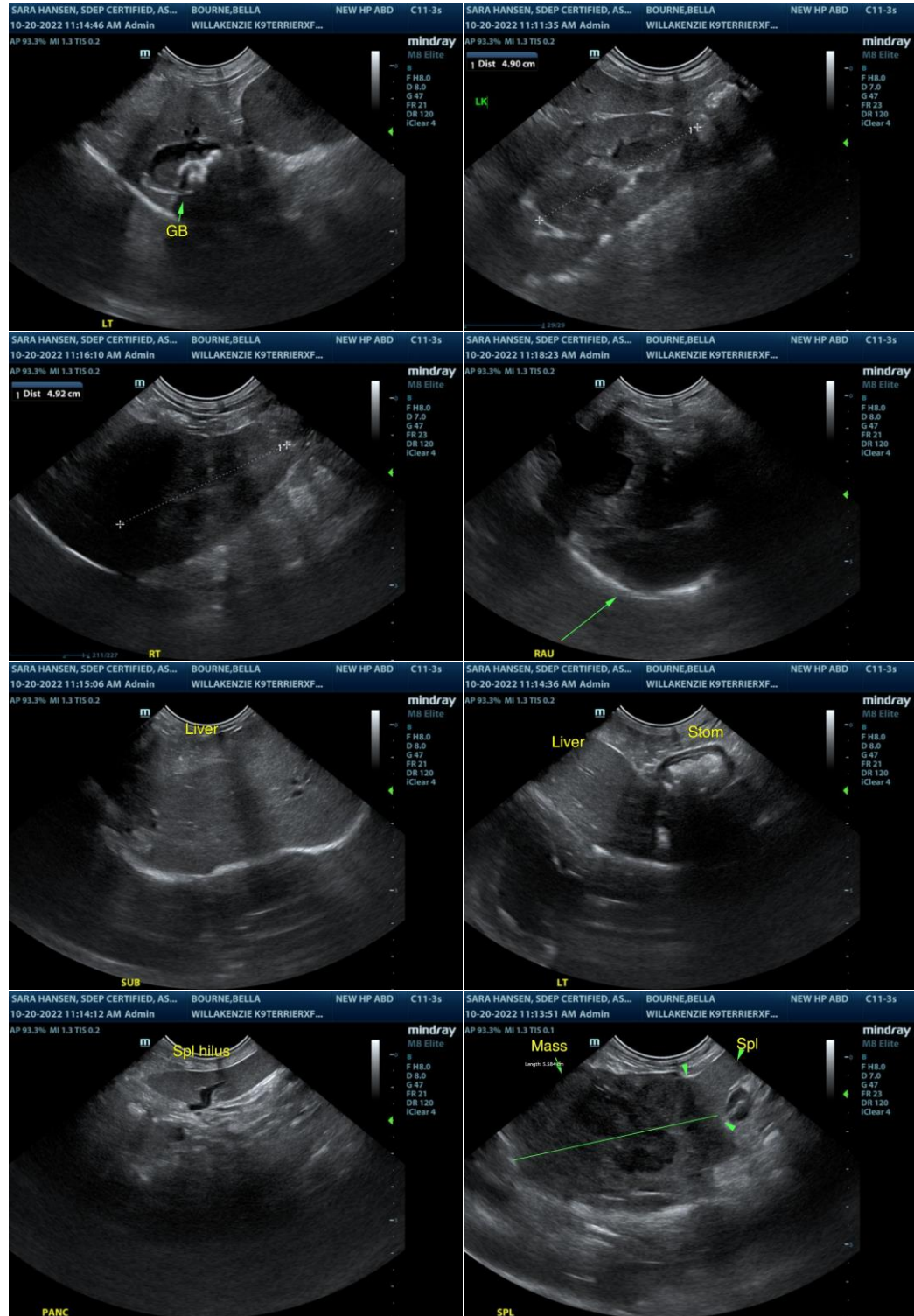
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not



PATIENT visible in the image/video clips provided.

Bella Bourne 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.

SPECIES R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

Canine **info@SonoPath.com**

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