



PATIENT PRESENTING CLINICAL SIGNS

Annabelle Barber

SPECIES

Canine

BREED

Golden Ret

P gagging in exam. Not bringing anything up. Appears comfortable on abdominal palpation, no obvious masses felt. Lumps: ~4X5CM round, soft-firm mass located on right submandibular LN region (lipoma vs enlarged LN) Mild-mod tartar. Gums slightly dark pink. No foreign material seen in mouth. Abnormal PE/Chem/CBC/UA Results: CBC: RETIC (120), PLT (102) (Confirmed with smear) Electrolytes, Chem: Mild hypoglobulinemia (23) cPLI:Normal Urine analysis: Pending Radiographs: Suspect mass occupying mediastinal space. More visible on DV view. Large amount of food within stomach. No abdominal masses or foreign obstruction seen. No foreign material seen within trachea, large SQ mass seen on lateral of head and neck.

SEX

FS

AGE

8 years

WEIGHT

35.6 kg

ULTRASONOGRAPHIC EXAMINATION OF THE HEART & ABDOMEN

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Beattie Pet Hospital Burlington

REFERRING VET

Dr. Ruggieri

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10/25/22

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (Boon method)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	<1.3	28-40	40-100	<0.6
PATIENT	5.2	<2.0		1.34	41	76	0.25
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT (kg)	LA (2D short axis Base view) (cm)	LVIDd (Avg; 2D and m-mode short axis) (cm)	LVIDs (Avg; 2D and m-mode short axis) (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6				
PATIENT	135	1.3	1.3		4.5	4.3	

Cardiac Presentation

The echocardiogram in this patient demonstrated normal **left atrial** size based on 3 different LA measurement methods. Chamber volumes and echogenicity were normal. The cranial and caudal **mitral** valve leaflets presented mild thickening suggestive of mild endocardiosis. No evidence of valvular prolapse was noted. Doppler indicated measurable mild eccentric insufficiency. The **left ventricle** presented thicknesses with linear contour and was not dilated nor restricted. The **myocardium** presented normal echogenicity without subjective evidence of significant fibrotic or ischemic disease. **Contractility** of the ventricular walls was adequate and in normal range for this patient evidenced by the fractional shortening measurement and subjective evaluation of the different regions of the myocardium. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology. Trace tricuspid valve insufficiency was present. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and



PATIENT	thickness. Pulmonic tract assessment revealed normal valve structure, laminar flow, and diameter (approx. 1:1 pa/ao ratio). No visible pericardial or free pleura fluid was noted. No echographically detectable evidence of infiltrative disease was visible. No overt or visualized mass lesions in the area of the cranial mediastinum or pericardial regions .
Annabelle Barber	
SPECIES	Urinary System
Canine	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 was noted.
BREED	
Golden Ret	The area of the aortic trifurcation was free of pathology.
SEX	
FS	Borderline prominent size based on caudal pole width measurements, in light of body weight, was noted in both 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 6.1 cm in length. The right kidney measured 6.6 cm in length.
AGE	
8 years	Adrenal Glands
WEIGHT	
35.6 kg	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 x 0.8 cm width at the caudal pole. The right adrenal gland measured 3.8 cm length x 0.89 cm width at the caudal pole. No evidence of adrenal neoplastic criteria was noted.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP	The spleen was normal in size with areas of mild lateral and medial capsule asymmetry exhibiting subtle generalized parenchyma heterogeneity. No masses or nodules were noted. Normal splenic vascularity was noted.
IMAGING PERFORMED BY	Liver/ Gallbladder
Kelly Reschny	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance 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.
HOSPITAL NAME	Gastrointestinal
Beattie Pet Hospital Burlington	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. The stomach appeared to contain a mild to moderate amount of luminal gas. No evidence of gastric distention with retained ingesta or fluid.
REFERRING VET	
Dr. Ruggieri	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.
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PATIENT

Pancreas

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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.

SPECIES

Canine

Free Abdomen

No omental masses, lymphadenopathy, or evidence of peritoneal free fluid were noted.

BREED

Golden Ret

ULTRASONOGRAPHIC FINDINGS

SEX

FS

- Compensated mitral valve insufficiency (ACVIM B1)
- Trace TR - no evidence of clinical pulmonary hypertension
- Mild age-related renal/adrenal changes
- Mild asymmetrical to heterogeneous spleen - subjectively benign
- Normal gastrointestinal tract with gastric gas

AGE

8 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

35.6 kg

No obvious evidence of a space-occupying mass in the area of the cranial mediastinum was noted. However, a small mass obscured by aerated lung cannot be definitively excluded.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

The splenic presentation is suggestive of a patient or age-related variant with potential for incidental hyperplasia, hematopoiesis, splenitis, or similar. No overt evidence of splenic neoplastic criteria was noted. Screening splenic FNA cytology could be considered if evidence of splenomegaly or weight loss, primarily to ensure only benign changes are present.

IMAGING PERFORMED BY

Kelly Reschny

Thoracic CT may be considered if clinical concern for cranial mediastinal mass. Gastroprotectant protocol may be considered with an assessment of clinical response if clinical concern for possible esophagitis/ mild gastritis.

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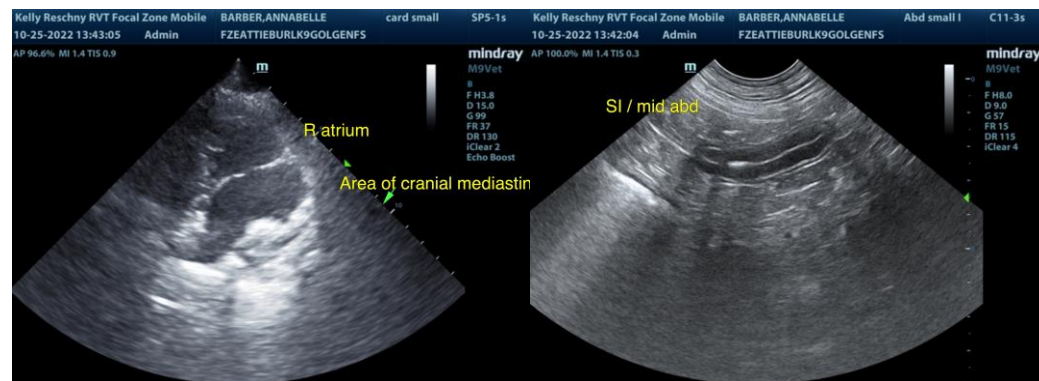
Dr. Ruggieri

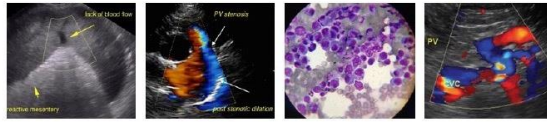
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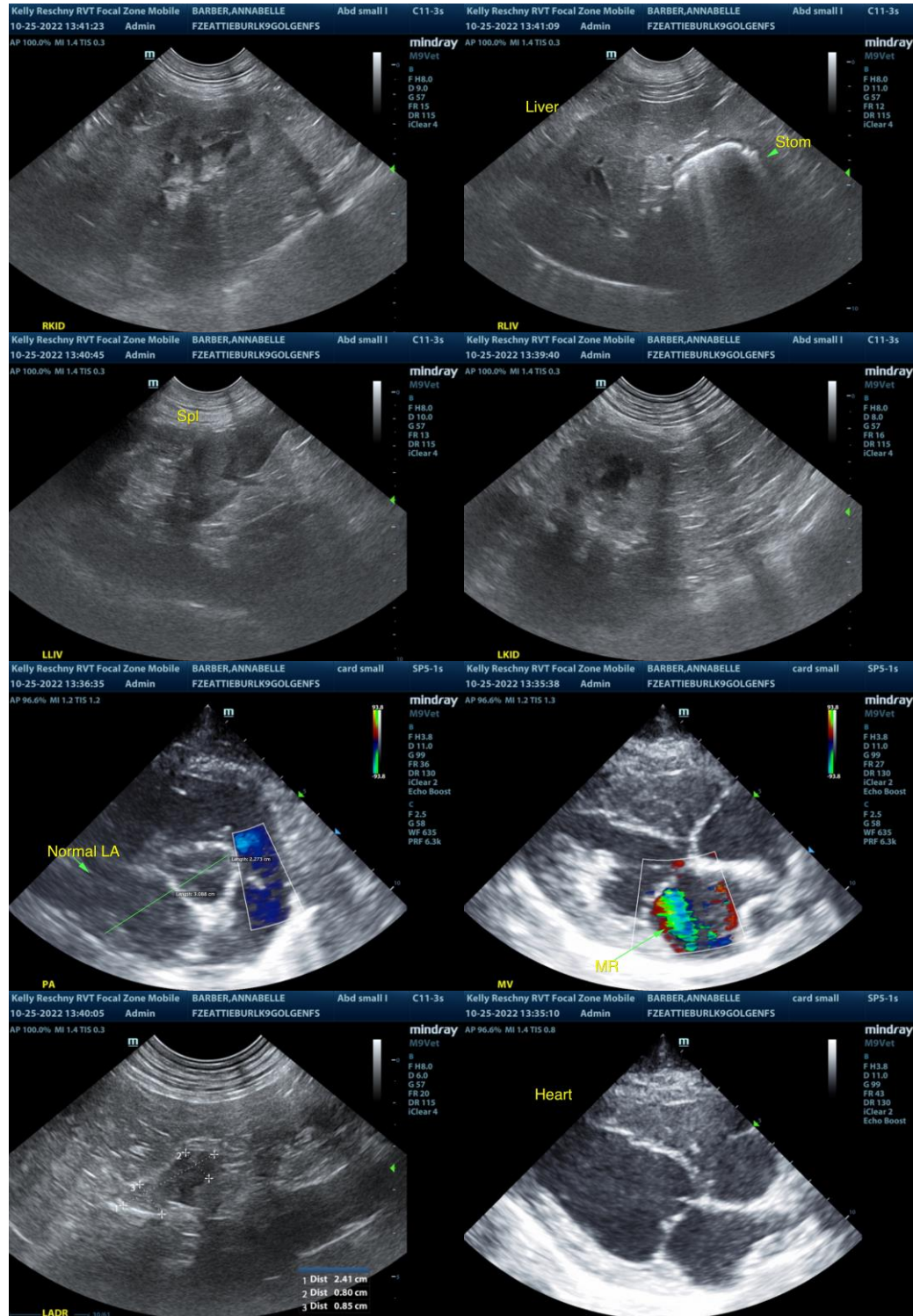
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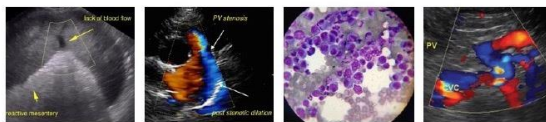
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
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