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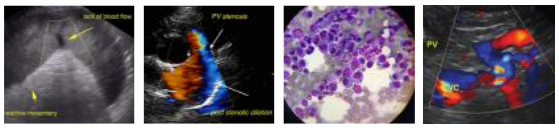


ANIMAL SOUNDS NW
MOBILE VETERINARY ULTRASOUND
IMAGING PERFORMED BY
AnimalSoundsNW.com 541-357-9423

PATIENT

Chloe Groves

SPECIES

Canine

BREED

Staffordshire X

SEX

FS

AGE

8 yrs

WEIGHT

58 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

SantA Clara AH

REFERRING VET

Dr. Brasted-Maki

INVOICE

15305

DATE

10/27/22

PRESENTING CLINICAL SIGNS

Patient has an approximately 4 week history of decreased appetite and mild lethargy. Exam is unremarkable except for slightly pale gums.

Abnormal PE/Chem/CBC/UA Results: BBM: 10-25-22: CBC: Regenerative anemia (RBC 4.32, Hct 34.2, Hgb 11.0, MCV 79, MCHC 32.2, 294,000); Mild thrombocytopenia (134,000) Chem: SDMA is mildly elevated at 16, while creatinine (0.8) and BUN (12) are both normal. Total protein slightly low at 5.1; albumin is slightly low at 2.5. Cholesterol low at 76. CK is elevated at 3.91 Urinalysis: SG 1.015; inactive sediment T4: 1.5 4 Dx: Negative Current Medications Simparica Trio Radiographic Findings Abdominal radiographs (right lateral and VD): Spondylytic change in lumbar spine; mild DJD in both coxofemoral joints

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 6.7 cm in length. The right kidney measured 7.3 cm in length.

Adrenal Glands

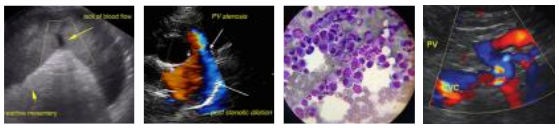
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.63 cm width at the caudal pole and 0.67 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.7 cm width at the caudal pole.

Spleen

The spleen exhibited subjective generalized enlargement with medial folding of the cranial spleen. Primarily maintained symmetrical capsule contour was noted. Subtle generalized splenic parenchyma heterogeneity exhibiting normal splenic parenchyma echogenicity was noted. Normal splenic vascularity was noted. No masses no nodules were noted.

Liver/ Gallbladder

The liver presented subjective mild to moderately enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma



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was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

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 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.

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 were evident.

Free Abdomen

No evidence of omental masses was present. Focal pocket of scant free fluid was noted between the cranial spleen and caudal left liver. Focal, mildly prominent, hypoechoic splenic lymph node was present, measuring 0.73 cm in diameter.

ULTRASONOGRAPHIC FINDINGS

- Splenomegaly exhibiting mild parenchyma heterogeneity and cranial folding
- Hepatomegaly exhibiting uniform parenchyma
- Sonographically unremarkable gastrointestinal tract
- Small pocket of scant perisplenic / perihepatic free fluid
- Focal, minor splenic lymphadenopathy

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The hepatosplenomegaly in this patient is nonspecific with benign or potential neoplastic etiologies possible. Assuming normal clotting status and using a 25-gauge needle, hepatosplenic FNA cytology is warranted for further assessment, primarily to assess for benign etiologies vs. potential emerging hepatosplenic round cell neoplasia.

Other than the hepatosplenomegaly, no overt evidence of additional visceral pathology as an obvious cause or contributing factor to the patient's clinical signs. A GI panel to include PLI/TLI/Cobalamin/Folate, a resting cortisol level three view chest radiographs if not done, to assess for or rule out occult disease as a contributing factor may be considered.

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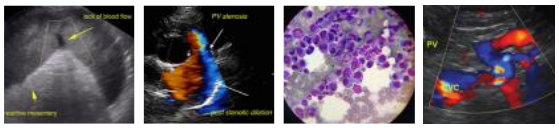

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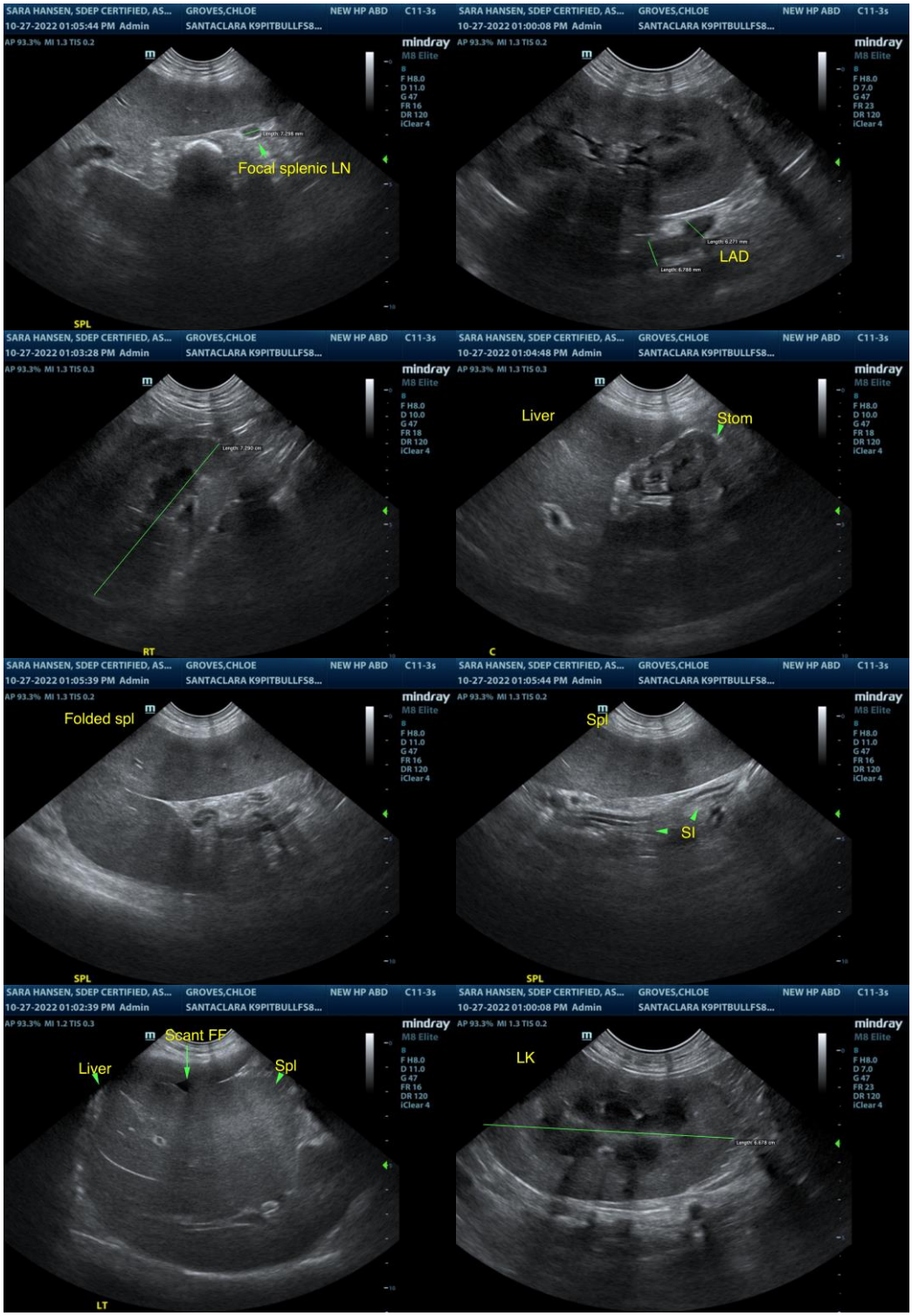

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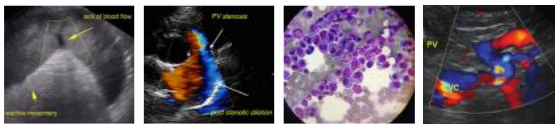

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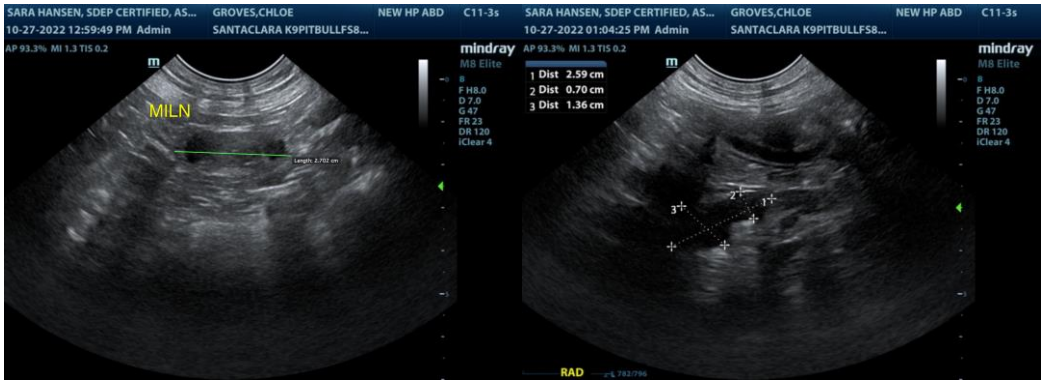

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
info@SonoPath.com