



PATIENT PRESENTING CLINICAL SIGNS

Luna Landman decreased appetite, decreased energy, not herself, return of cutaneous histiocytosis to face, trembling occasionally, possible abd pain and concern re systemic histiocytosis
Abnormal PE/Chem/CBC/UA Results: BW-NAF

SPECIES

Canine

BREED

Cane Corso

SEX

Spayed Female

AGE

7 Years

WEIGHT

45 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Preston AC

REFERRING VET

Dr. Coghlan

INVOICE

26150

DATE

10/7/21

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 were noted.

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 7.4 cm. The right kidney measured 8.2 cm.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.9 cm length x 0.34 cm at the caudal pole. The right adrenal gland measured 2.5 cm length x 0.47 cm at the caudal pole.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. 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.

Liver

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 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.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild echogenic ingesta with subtle progressive distal acoustic shadowing, most consistent with post prandial presentation without 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.



PATIENT *Pancreas*

Luna Landman 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.

SPECIES *Free Abdomen*

Canine No peritoneal masses, lymphadenopathy or effusion.

BREED **ULTRASONOGRAPHIC FINDINGS**

- Cane Corso
- Sonographically unremarkable abdomen
 - Mild retained echogenic gastric ingesta

SEX **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Spayed Female No evidence of abdominal visceral pathology, specifically no evidence of hepatosplenomegaly, hepatosplenic masses, or intraabdominal histiocytosis. The presence of mild retained gastric ingesta is non-specific and may correlate with recent meal ingestion. However, potential for mild gastric stasis may be considered if documented NPO.

AGE

7 Years

Screening hepatosplenic FNA (assuming normal clotting status) may be considered. Continued gastrointestinal support is indicated. Sonographic monitoring of the abdomen based on oncology recommendations would be a more conservative approach. If not done, 3-view chest radiographs recommended.

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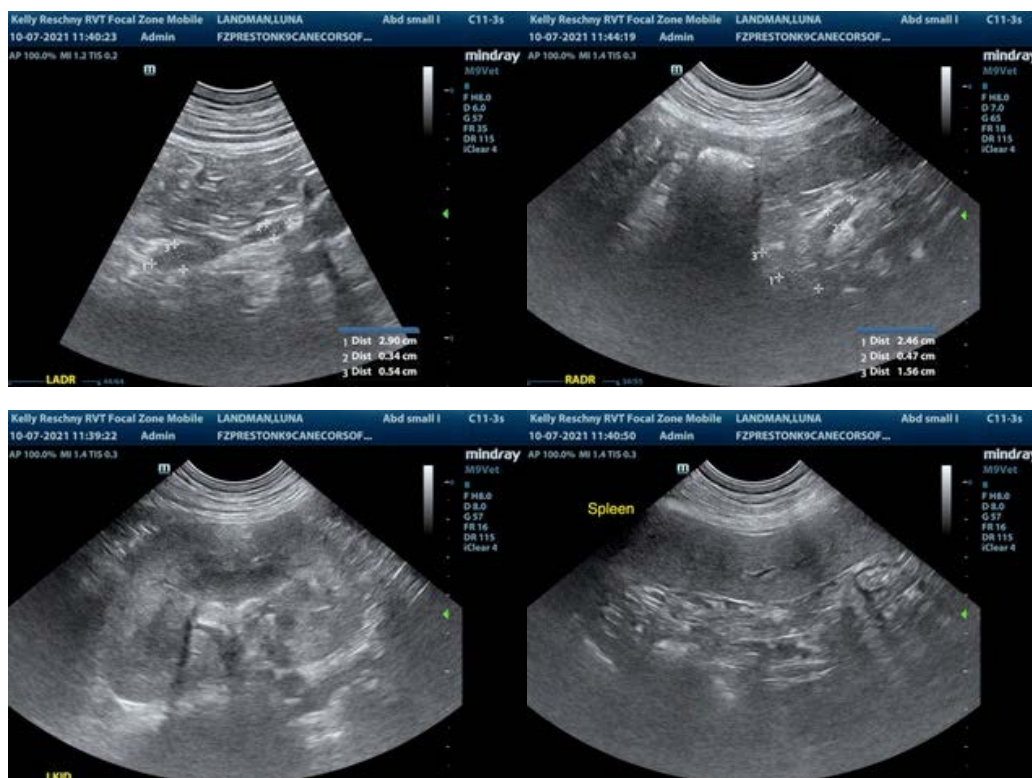
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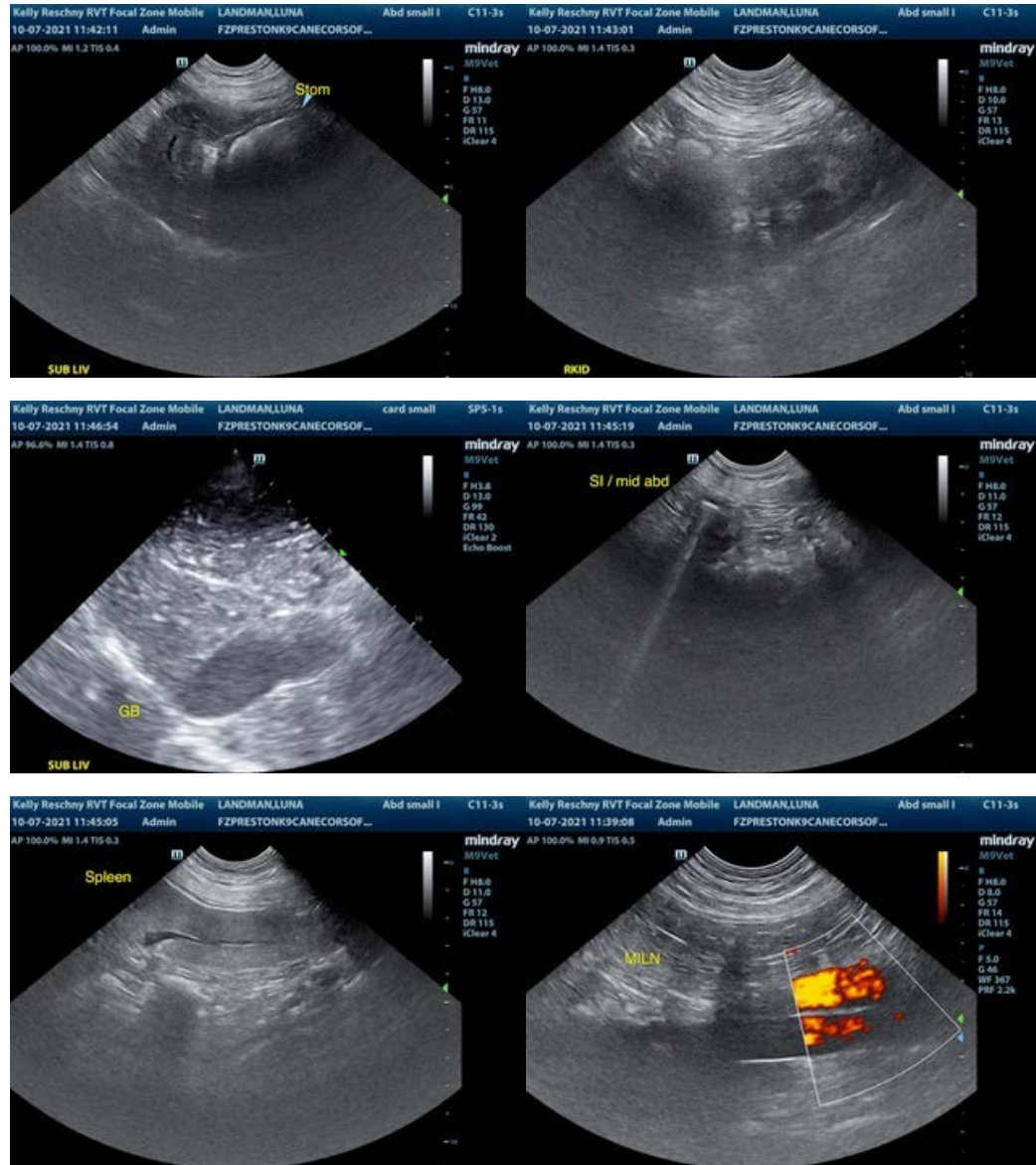
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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