



PATIENT	PRESENTING CLINICAL SIGNS
Dolce Rasmussen	Polyuria Polydipsia Bloodwork NSF Urinalysis WNL
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	<i>Urinary System</i>
BREED	The urinary bladder was subnormal in size which prohibited full evaluation of the urinary bladder walls. No evidence of urinary bladder neoplastic criteria was noted. Mild anechoic urine was present in the urinary bladder with no sediment or calculi.
Min Pin	
SEX	The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 1.1 cm in diameter.
MN	
AGE	The area of the aortic trifurcation was free of pathology.
15 years	Normal size and margination were present in the left kidney. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 4.6 cm in length. The right kidney was not definitively visualized.
WEIGHT	
13.2 lbs.	
INTERPRETED BY	<i>Adrenal Glands</i>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	A large, irregular nonhomogeneous mass was present in the area of the left adrenal gland with evidence of likely extensive caudal vena cava invasion extending cranially to the approximate level of the liver. The left adrenal mass measured approximately 5.0 cm x 3.0 cm. The right adrenal gland was overtly normal in size position and shape. The right adrenal gland measured 3.0 cm in length x 0.42 width at the caudal pole.
IMAGING PERFORMED BY	<i>Spleen</i>
Sara Hansen	The spleen exhibited subjective overall normal size with generalized mild parenchyma heterogeneity. A solitary, well-demarcated, mildly expansive hypoechoic splenic nodule was present in the subjective medial spleen measuring 1.3 cm in diameter. Mild distortion of the associated medial splenic capsule was noted without evidence of parenchyma escape.
HOSPITAL NAME	<i>Liver/ Gallbladder</i>
H & H VC	The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma 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 containing primarily anechoic content with mild, hyperechoic, nonorganized gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.
REFERRING VET	
Dr. Henery	
INVOICE	
15455	
DATE	
11/10/22	



PATIENT

Gastrointestinal

Dolce Rasmussen

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.

SPECIES

Canine

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.

BREED

Min Pin

Normal visible colon wall layers were present with apparent formed feces in lumen.

SEX

MN

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.

AGE

15 years

Free Abdomen

No evidence of peritoneal free fluid was present. Potential for mild periadrenal mesenteric lymphadenopathy in the area of the left adrenal gland was noted.

WEIGHT

13.2 lbs.

ULTRASONOGRAPHIC FINDINGS

- Expansive, irregular left adrenal mass with evidence of extensive vascular invasion
- Sonographically unremarkable right adrenal gland
- Mild chronic left kidney changes
- Nonspecific mildly expansive splenic nodule - hyperplasia, hematopoiesis, small hematoma, splenitis, potential for emerging primary vs. metastatic nodular neoplasia
- Mild hepatomegaly - subjectively benign
- Minor gallbladder debris (non-mucocele)

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

H & H VC

The primary finding of the left adrenal mass with evidence of extensive vascular invasion is consistent with neoplastic criteria with primary concern for pheochromocytoma.

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Screening blood pressure is recommended to assess for evidence of hypertension. Surgical options appear to be precluded, given the extensive vascular invasion. However, further assessment may include abdominal CT. Three-view chest radiographs are recommended. Unfortunately, an unfavorable prognosis is indicated.

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HOSPITAL NAME

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REFERRING VET

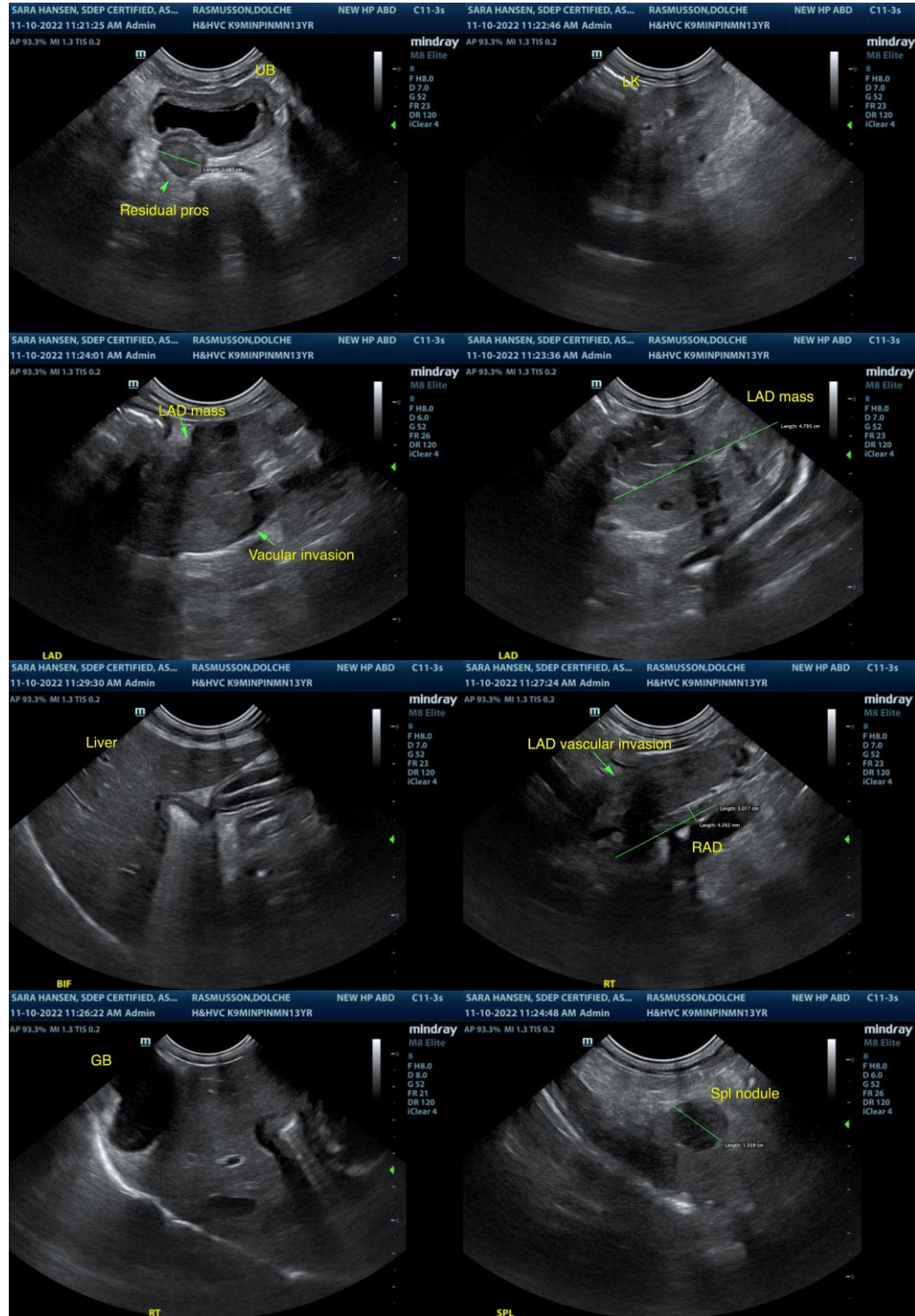
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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