

**PATIENT**

Montezuma Alexander

SPECIES

Canine

BREED

Lab X

SEX

NM

AGE

12 years

WEIGHT

37 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Sarah Pender, CVT

HOSPITAL NAME

SVS Imaging QC

REFERRING VET

Dr. Hartmann

INVOICE

15447

DATE

11/10/22

PRESENTING CLINICAL SIGNS

Reverse sneezing for since 1 am 11/10/22. Normal appetite and activity today. Has history of non-specific gastroenteritis

Abnormal PE/Chem/CBC/UA Results: Rads - metastatic tumors suspected ALKP 342 Oct 29

ULTRASONOGRAPHIC EXAMINATION OF THE THORAX & 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 was noted.

The area of the prostate was free of pathology.

Several to multiple medial iliac lymph nodes were present. The lymph nodes were hypoechoic to swollen with abnormal width: length ratio (>0.5). Mild asymmetrical margination was noted with hypoechoic to nonhomogeneous parenchyma. The enlarged lymph nodes were bordered by echogenic to reactive mesentery. An example of a medial iliac lymph node measured 2.6 cm x 1.6 cm.

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 corticomdullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Intermittent small cortical cysts were present in both kidneys. The left kidney measured 5.7 cm in length. The right kidney measured 5.6 cm in length.

Adrenal Glands

The bilateral adrenal glands were mildly prominent in size based on caudal pole width measurement in light of body weight. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 2.3 cm length x 0.84 cm width at the caudal pole. The right adrenal gland measured 2.2 cm length x 0.71 cm width at the caudal pole. No evidence of adrenal tumors was noted.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. 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. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver/ Gallbladder

The liver exhibited borderline enlargement 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 hepatic masses or nodules were noted. The gallbladder

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was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal**SPECIES**

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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.

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

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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.

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Free Abdomen

No evidence of additional intraabdominal lymphadenopathy, omental masses, or peritoneal free fluid.

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Thorax

Examination of the thorax revealed intermittent peripheral hypoechoic to mildly nonhomogeneous pulmonary nodules which appeared to be surrounded by aerated lung. An example of a peripheral pulmonary nodule measured 4.0-5.0 cm in diameter. No evidence of concurrent pleural effusion.

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Heart

Brief subjective cardiac assessment revealed overtly normal cardiac structure and function without evidence of pericardial effusion or overt cardiac tumors.

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ULTRASONOGRAPHIC FINDINGS

- Hepatopathy exhibiting mild parenchymal remodeling - sonographically suggestive of vacuolar hepatopathy pattern
- Mildly prominent bilateral adrenal glands - nonspecific
- Hypoechoic to swollen medial iliac lymph nodes - hyperplasia, lymphadenitis, neoplastic / metastatic lymphadenopathy possible
- Mild chronic renal changes with intermittent small cortical cysts
- Peripheral pulmonary nodules - consolidation, infection / inflammation, granulomas, neoplasia
- Sonographically unremarkable gastrointestinal tract

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Assuming normal clotting status and using a 25-gauge needle, FNA cytology of a peripheral pulmonary nodule, and accessible medial iliac lymph node, as well as screening hepatic cytology is warranted for further clarification.

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No overt evidence of hepatic neoplastic criteria, although this potential cannot be definitively excluded. Nonspecific potential multicentric neoplasia is favored, although not definitive.

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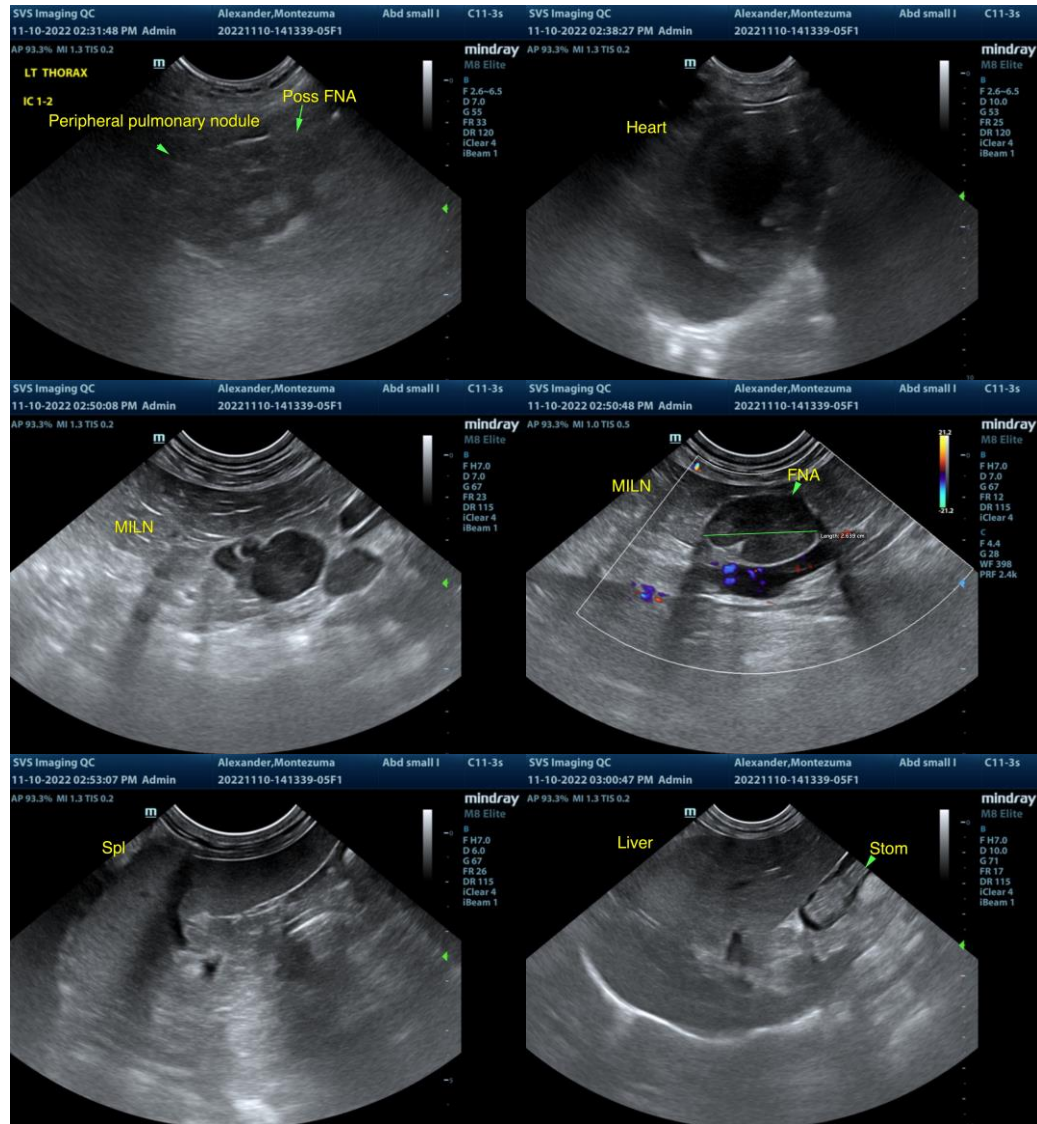
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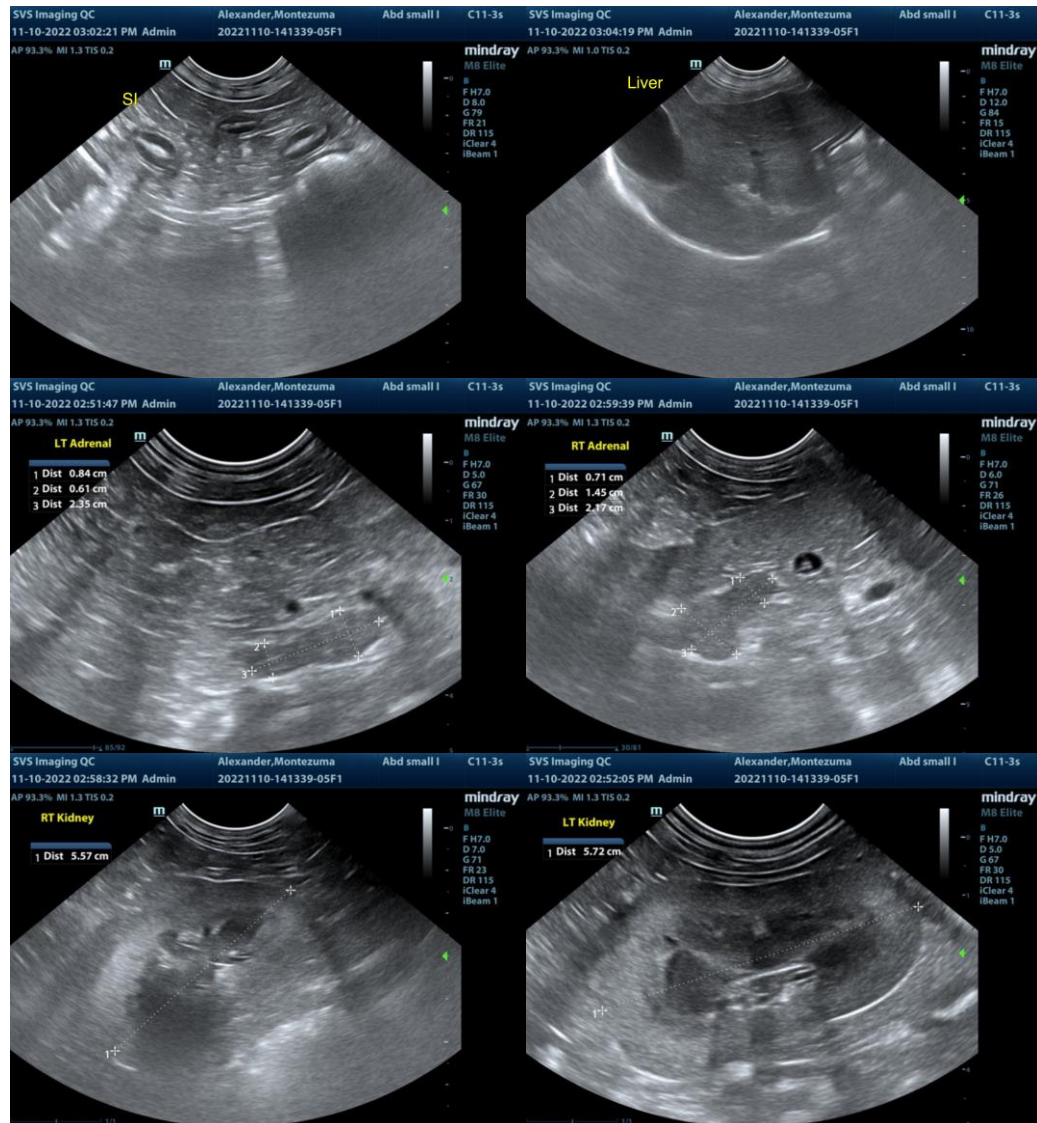
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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