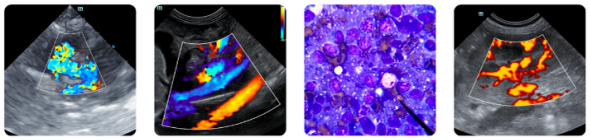


PATIENT

Scout Vuch

SPECIES

Canine

BREED

Standard Poodle

SEX

Female Spayed

AGE

10 years 8 months

WEIGHT

16.4 kgs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jill Rankin

HOSPITAL NAME

VCA Canada Coach Hill AH

REFERRING VET

Dr. Jessica

INVOICE

12789

DATE

11/12/25

PRESENTING CLINICAL SIGNS

History: Scout, a female spayed dog, is presenting for an abdominal ultrasound due to concerns about potential splenomegaly identified during a workup for a recent dental procedure. The primary clinical concern is the size and appearance of the spleen. During a pre-anesthetic evaluation, the veterinarian noted the spleen appeared "a bit big" on a quick scan. Due to these findings a formal diagnostic ultrasound was scheduled to further investigate. Scout recently underwent a dental cleaning with extractions. Pre-anesthetic bloodwork performed prior to the dental procedure was largely unremarkable. The CBC showed mildly low platelets, which was attributed to clumping. Other laboratory findings included mildly low phosphorus and a urine specific gravity of 1.049.

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 were noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination was 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 5.9 cm in length. The right kidney measured 5.2 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 0.48 cm. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.49 cm.

Spleen

The spleen was mildly enlarged in size exhibiting a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Normal vascular volume and no evidence of mass or nodules present. 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

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 non-organized, congealed, echogenic, nonmineralized biliary sludge primarily caudal lumen to the gallbladder neck and mildly extending into the cystic duct. The cystic duct and common bile ducts were normal without evidence of dilation.

PATIENT

Scout Vuch

SPECIES

Canine

BREED

Standard Poodle

SEX

Female Spayed

AGE

10 years 8 months

WEIGHT

16.4 kgs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jill Rankin

HOSPITAL NAME

VCA Canada Coach Hill AH

REFERRING VET

Dr. Jessica

INVOICE

12789

DATE

11/12/25

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 was evident.

Free Abdomen

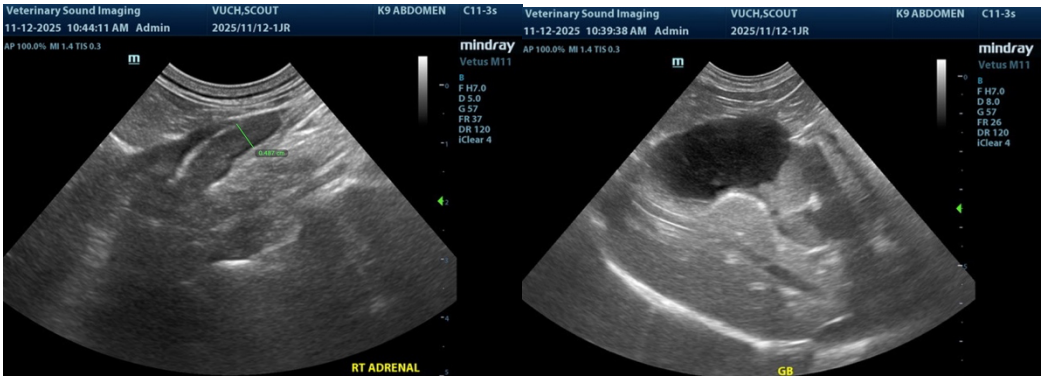
No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

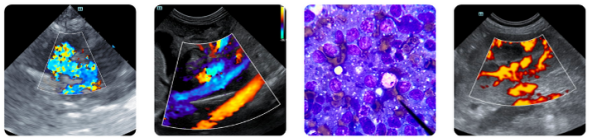
- Mild, nonspecific splenomegaly – subjective benign
- Non-organized gallbladder debris (non-mucocele)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Benign splenomegaly with considerations including incidental hyperplasia, hematopoiesis or potential inflammation suspected. No overt sonographic evidence of splenic neoplastic criteria which is thought less likely. Assuming normal clotting status and using 25-gauge needle, splenic FNA cytology warranted primarily to ensure a suspected benign etiology is present. Radiographic or sonographic monitoring of the spleen would be a more conservative approach. No additional evidence of abdominal visceral pathology noted, Hepato-supportive medications/Ursodiol may be considered if evidence of cholestasis.



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Scout Vuch

SPECIES

Canine

BREED

Standard Poodle

SEX

Female Spayed

AGE

10 years 8 months

WEIGHT

16.4 kgs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jill Rankin

HOSPITAL NAME

VCA Canada Coach Hill AH

REFERRING VET

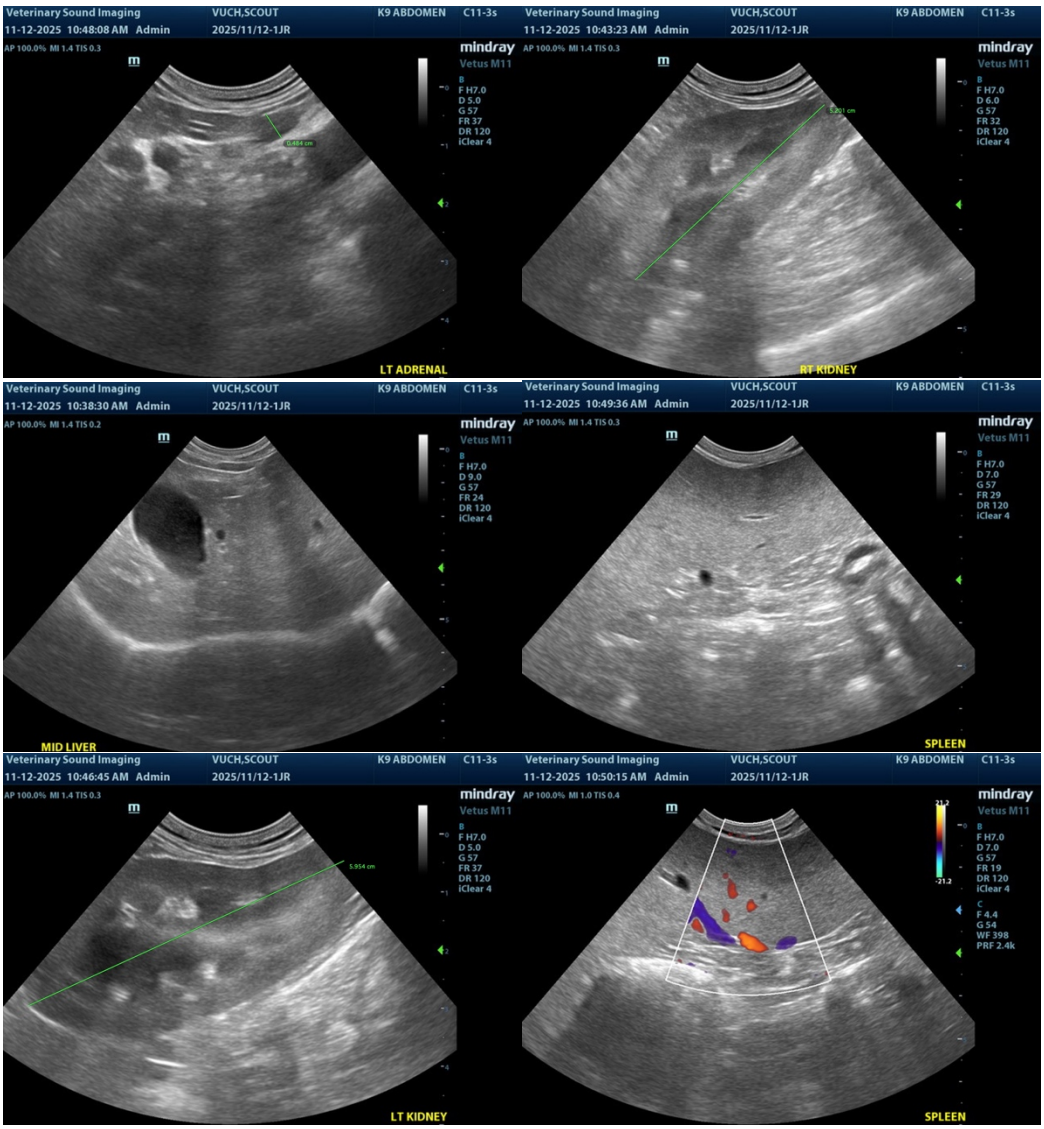
Dr. Jessica

INVOICE

12789

DATE

11/12/25



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