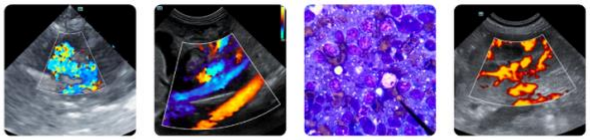


PATIENT

Mickey Mouse Thomas

SPECIES

Canine

BREED

Tibetan Terrier

SEX

Neutered Male

AGE

9 Years

WEIGHT

12.80

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Dr. Kari Wilson DVM

HOSPITAL NAME

Animal Emergency Hospital Deland

REFERRING VET

Dr. Kari Wilson DVM

INVOICE

12382

DATE

11/21/25

PRESENTING CLINICAL SIGNS

Presented for not acting himself. It was recommended he come here by his pDVM but was not seen by them in person today. P has not eaten much for the last 3 days. P did eat some cheese sticks today and small snacks yesterday. O took p to pDVM yesterday who did bloodwork and ultrasound. The bloodwork showed low WBCs, low RBCs, and low platelets. O unsure of exact ultrasound result but did not think pDVM found anything abnormal. P was sent home with oral antibiotics but O unable to give today. It was recommended he come here for continued care. 4DX: negative, CPL: negative.

Abnormal PE/Chem/CBC/UA Results: CBC: WBC 2.01, NEU# 0.46, LYM# 0.61, PLT 95 EPOC: pO2 82.2, O2SAT 97.2, pCO2 22.3, mTCO2 15.7, pH 7.483, BE(ecf) -6.8, Na+ 139, K+ 3.2, lactate 4.54 ALT: 61 ALP: 121

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 change were noted.

No obvious visualized pathology in the area of the residual prostate.

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 5.6 cm in length. The right kidney measured 5.6 cm in length.

Adrenal Glands

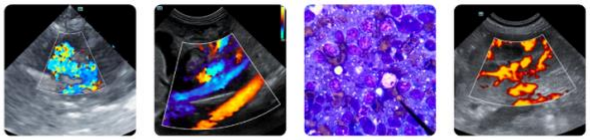
The adrenal glands were overtly normal in size, position and shape. The left adrenal gland measured 0.60 cm width at the caudal pole. The right adrenal gland was indistinctly visualized, subjectively measured 0.44 cm width.

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

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 thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.



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Gastrointestinal

The stomach presented with normal intact visible wall. The stomach was nondistended with lumen gas.

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 semi formed to segmental soft fecal matter 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

A solitary mildly enlarged visualized mid abdomen mesenteric lymph node was present. The lymph node was homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Mild surrounding perilymphatic hyperechoic omentum. The lymph node measured 2.7 cm x 0.60 cm. No evidence of omental masses, abscesses or peritoneal effusion.

ULTRASONOGRAPHIC FINDINGS

- Sonographically unremarkable gastrointestinal tract/colon with mild gastric gas and semi formed to possible soft fecal matter.
- Normal area of pancreas.
- Mild mid abdomen mesenteric lymphadenopathy- suggestive of lymphadenitis criteria, hyperplasia emerging neoplastic lymphadenopathy thought less likely yet not definitively excluded.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Aside from the nonspecific mild mesenteric lymphadenopathy, no evidence of significant visceral pathology as a definitive cause of the CBC abnormalities and clinical signs. The mesenteric lymph node was noted at approximately 2.0 cm in depth which likely precludes diagnostic FNA cytology in conjunction with current lymph node size. Supportive care and sonographic monitoring of the lymph node for evidence of progressive enlargement is recommended. Thoracic radiographs are recommended if not recently done.

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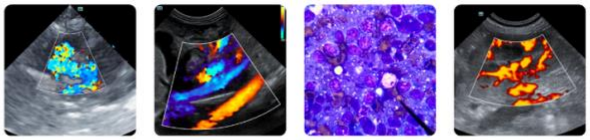

Clinical Sonography & Telecytology
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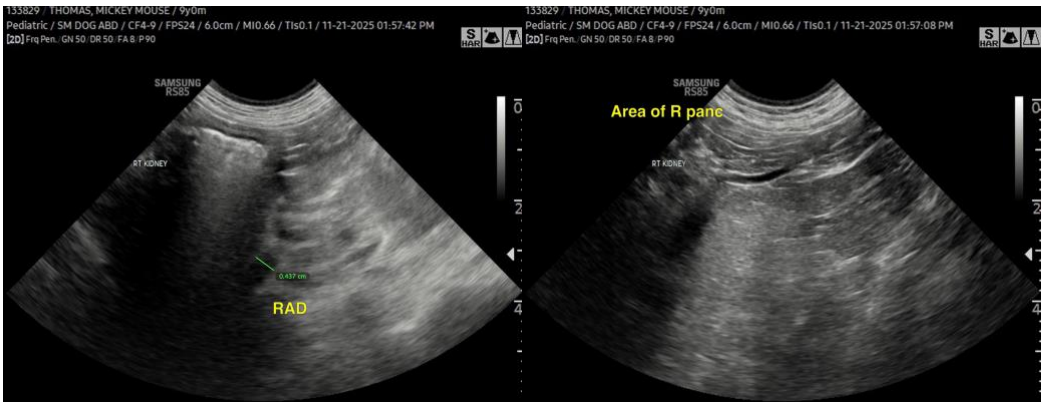

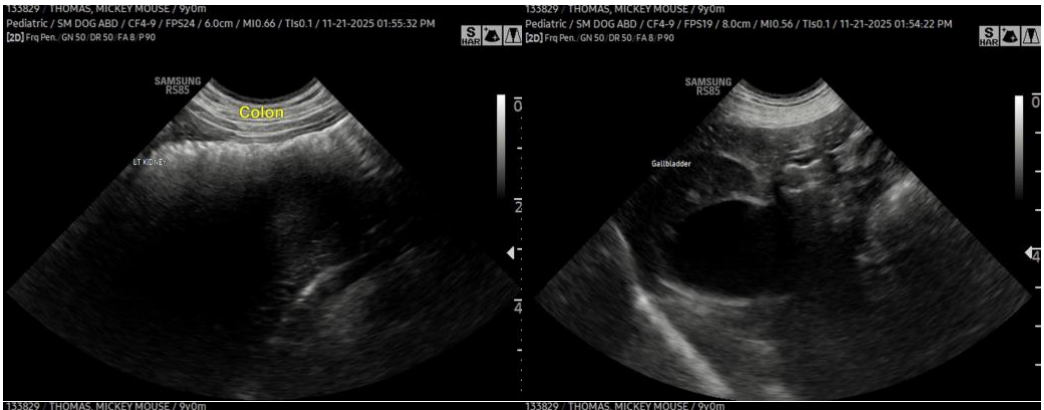

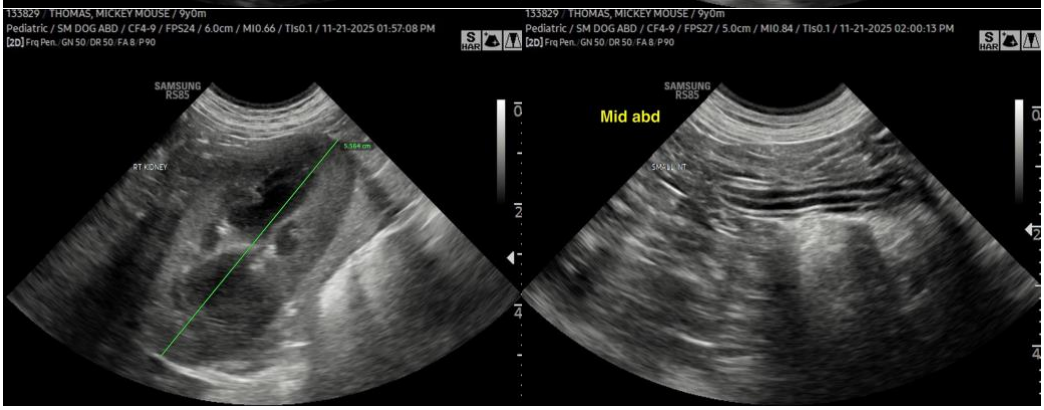

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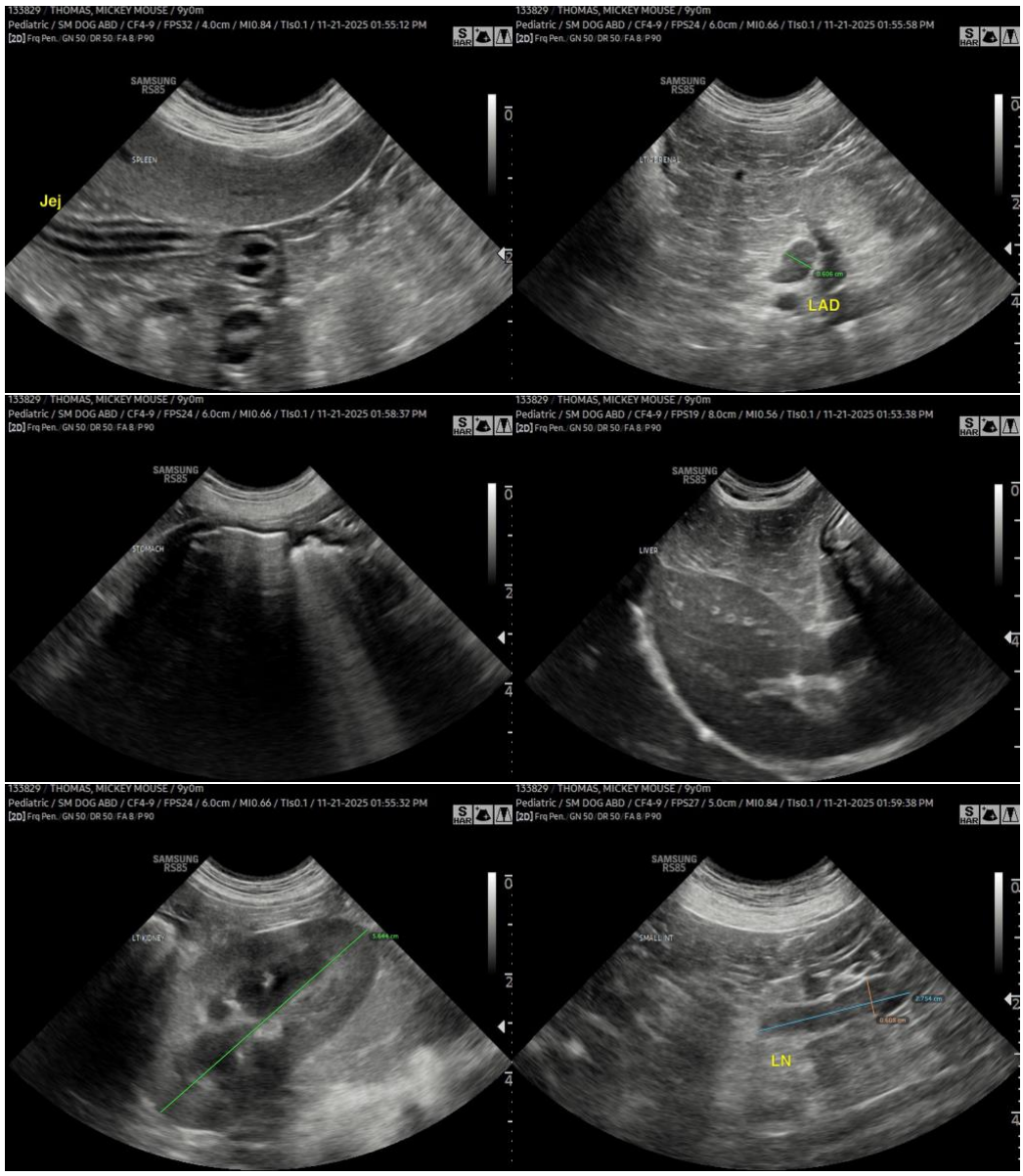

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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