

<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Cookie Wethington	Mass removal from ventral abdomen on 11/1 - Lymph node, ventral abdominal skin: carcinoma, likely metastatic site. Doing fine at home otherwise.
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: Radiographs performed on 11/21/22: -Possible enlargement of a hilar LN -Mild hepatomegaly -Unilateral renal calcification
Canine	
<b>BREED</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Chihuahua Mix	<b>Urinary System</b>
<b>SEX</b>	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.
FS	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 corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint areas of medullary mineral were present in the left kidney. Focal areas of medullary mineral to small renoliths were present in the right kidney. The left kidney measured 3.4 cm in length. The right kidney measured 4.0 cm in length.
<b>AGE</b>	
11yr	
<b>WEIGHT</b>	The area of the aortic trifurcation was free of pathology.
10lb	The area of the iliac trifurcation was free of pathology including no evidence of medial, iliac or sublumbar lymphadenopathy or masses.
<b>INTERPRETED BY</b>	<b>Adrenal Glands</b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 2.0 cm length and 0.46 cm width in the caudal pole. The right adrenal gland measured 1.6 cm length and 0.63 cm width in the caudal pole. No evidence of adrenal neoplastic criteria was present.
<b>IMAGING PERFORMED BY</b>	<b>Spleen</b>
Sarah Pender CVT	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.
<b>HOSPITAL NAME</b>	<b>Liver</b>
SVS Imaging QC	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 with primarily anechoic luminal content. The cystic and common bile ducts were normal.
<b>REFERRING VET</b>	<b>Gastrointestinal</b>
Dr. Hartley	The stomach presented intact mildly prominent wall layering with a mildly prominent gastric mucosa. This is likely a normal patient variant assuming no evidence of gastritis. No evidence of gastric neoplastic
<b>INVOICE</b>	
12234ag	
<b>DATE</b>	
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DVM, DABVP  
(Canine and Feline)

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mural criteria. 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**

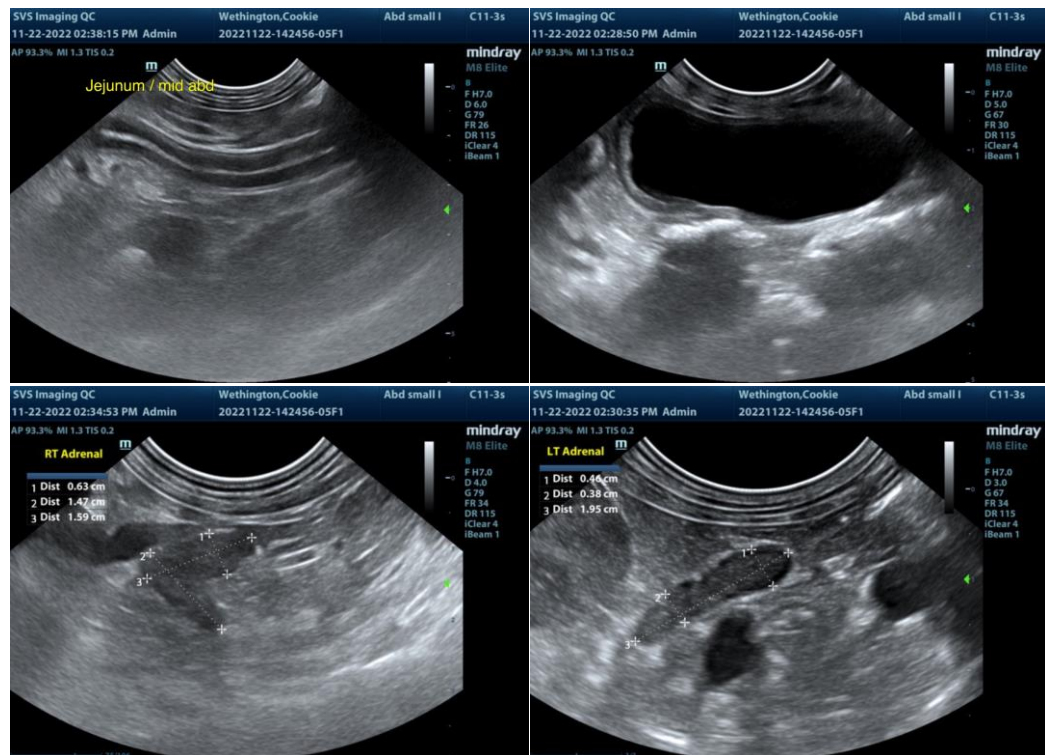
No omental masses, overt lymphadenopathy or peritoneal effusion was present.

**ULTRASONOGRAPHIC FINDINGS**

- Mild vacuolar hepatopathy pattern-benign
- Intact mildly prominent gastric walls-likely patient variant
- Mild chronic renal changes with focal left kidney medullary mineral and right kidney mild renolithiasis

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Largely a geriatric abdomen without evidence of significant abdominal visceral pathology or neoplastic criteria. Assessment of hepatic enzymes if not recently done is suggested. Hepatosupportive medications such as Denamarin or Vitamin E may prove beneficial if clinically indicated. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.





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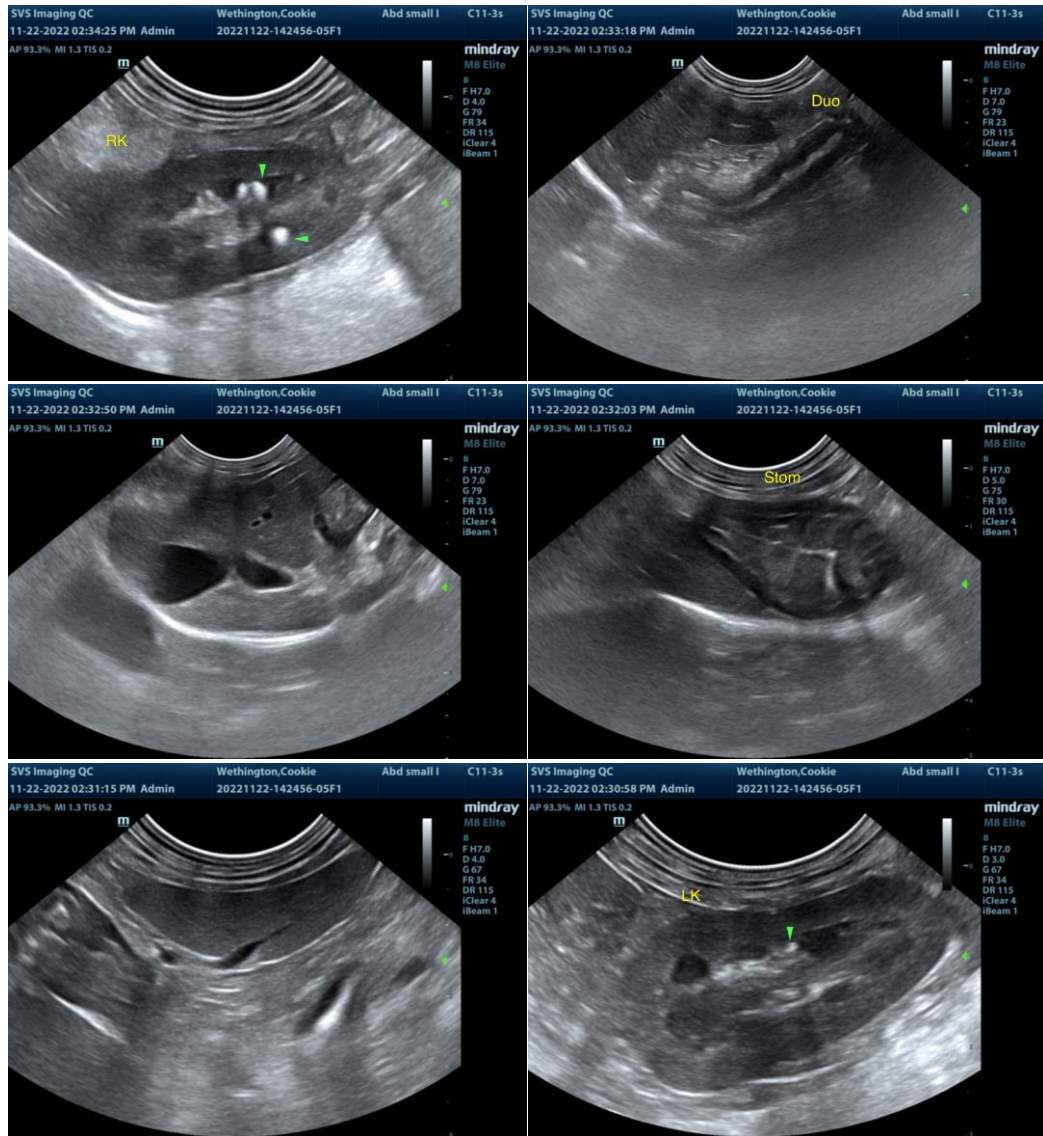
Dr. Hartley

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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