



PATIENT	PRESENTING CLINICAL SIGNS
Mason Rogers	re check , d/c from hosp and went home and vomited dinner now won't eat prev u/s showed diffuse nodular hepatic changes pronounced nodular hyperplasia
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.
Mastiff Mix	
SEX	Normal size and margination were 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. A small cortical cyst was present in the left kidney. The left kidney measured 6.5 cm in length. The right kidney measured 6.8 cm in length.
MN	
AGE	The area of the aortic trifurcation was free of pathology.
9	The area of the residual prostate appeared normal and free of pathology.
WEIGHT	Adrenal Glands
98.5	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.54 cm width at the caudal pole and 2.5 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.83 cm width at the caudal pole and 3.1 cm length.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The spleen exhibited normal size and contour with subtle parenchyma heterogeneity. Focal to intermittent non disruptive discrete hypoechoic nodules were present, an example measuring 0.8 cm in diameter. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.
IMAGING PERFORMED BY	Liver
Jenn	The liver was subjectively normal in size with areas of subtle capsule asymmetry. Diffuse variably sized small variably hypoechoic hepatic intra parenchymal nodules with concurrent mild mixed parenchyma echogenicity was present. Some of the nodules exhibited potential for central echogenicity with hypoechoic periphery which may indicate target nodules. The hepatic and portal vasculature were normal in appearance without signs of congestion.
HOSPITAL NAME	The gallbladder was mildly distended in size with thin walls and primarily anechoic luminal content with moderate non-dependent non-organized hyperechoic luminal debris and concurrent peripheral hypoechoic luminal mucus. The cystic and common bile ducts were normal.
Rockaway Animal Hospital	
REFERRING VET	Gastrointestinal
Dr. Maniar	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.
INVOICE	
12279ag	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.
DATE	
11/28/2022	



PATIENT

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

Mason Rogers

Pancreas

SPECIES

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.

Canine

Free Abdomen

BREED

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

Mastiff Mix

ULTRASONOGRAPHIC FINDINGS

SEX

- Previously noted diffuse nodular liver
- Moderate gallbladder debris-possible very early non-inflamed mucocele
- Non-disruptive discrete hypoechoic splenic nodules
- Sonographically unremarkable GI tract

MN

AGE

Secondary findings

9

- Mild age-related kidney changes with small left kidney cortical cyst

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

A full CBC/Chem panel and UA is recommended if not recently done.

98.5

Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology is warranted for further assessment.

INTERPRETED BY

Considerations may include nodular to regenerative hyperplasia, hematopoiesis, non-specific hepatitis with concern for neoplasia warranted although not definitive.

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

The splenic nodules are non-specific with considerations including areas of hyperplasia, hematopoiesis, small hematomas, focal splenitis or similar. If neoplastic process confirmed in the liver, potential for early splenic involvement could be possible.

IMAGING PERFORMED BY

Three view chest radiographs are recommended if not done to assess for occult thoracic pathology.

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

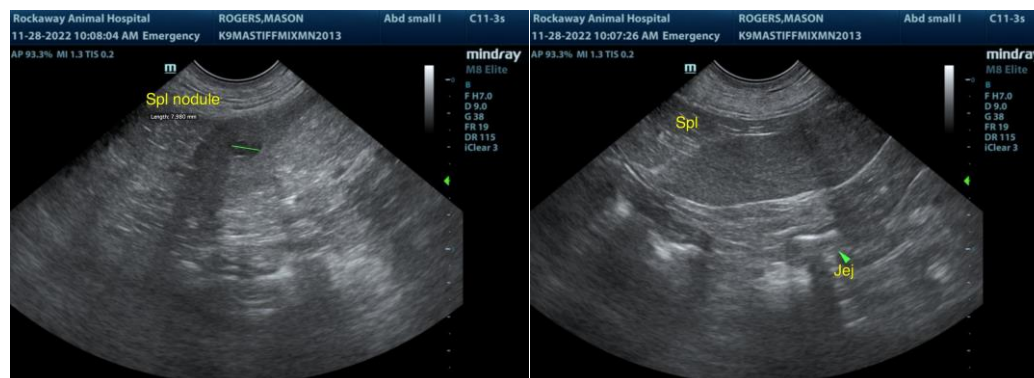
Dr. Maniar

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PATIENT

Mason Rogers

SPECIES

Canine

BREED

Mastiff Mix

SEX

MN

AGE

9

WEIGHT

98.5

INTERPRETED BY

R. McKenzie Daniel,
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IMAGING PERFORMED BY

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HOSPITAL NAME

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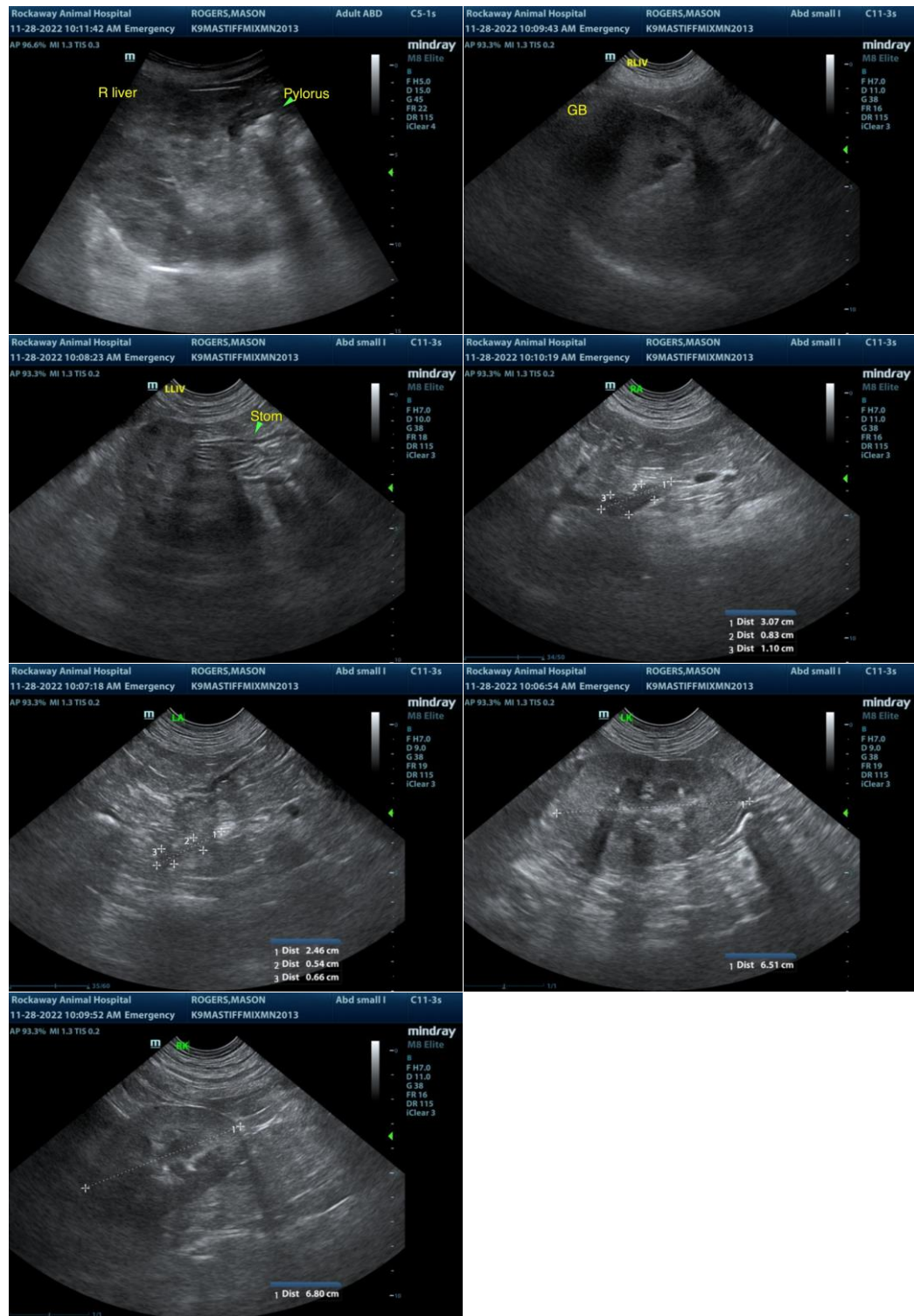
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



PATIENT

Mason Rogers

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.

SPECIES

Canine

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
mac.daniel@sonopath.com

BREED

Mastiff Mix

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MN

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