



PATIENT PRESENTING CLINICAL SIGNS

Rylie Cruz
History: Poor appetite and diarrhea.
Abnormal PE/Chem/CBC/UA Results: Thin but otherwise unremarkable. BW and UA= Perfect.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine
Urinary System

BREED
Mix
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 were noted. Aortic trifurcation was normal.

SEX
Spayed Female
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. The left kidney measured 5.8 cm in length. The right kidney measured 6.1 cm in length.

AGE
12 Years
Adrenal Glands

WEIGHT
48 Pounds
The bilateral adrenal glands exhibited uniform parenchyma with maintained symmetrical capsule contour. The left adrenal gland exhibited borderline prominent size, measuring 0.67 cm width at the caudal pole and 0.75 cm width at the cranial pole. The right adrenal gland exhibited mild enlargement, measuring 0.96 cm width at the caudal pole and 1.1 cm width at the cranial pole.

INTERPRETED BY
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)
Spleen
The spleen exhibited subjective mild enlargement with 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.

IMAGING PERFORMED BY
Christensen
Liver
HOSPITAL NAME
Tranquility VC
The liver exhibited generalized enlargement with areas of capsule asymmetry. Nonuniform to mixed echogenic parenchyma was noted exhibiting moderate coarse echotexture, along with multifocal variably size to expansive, primarily hypoechoic intraparenchymal nodules. An example of liver nodule measured 2.5 cm in diameter.

REFERRING VET
Christensen
The gallbladder was non-distended in size with gallbladder wall edema. Primarily anechoic content was present with moderate variably echogenic nonorganized luminal debris. The cystic duct and common bile ducts were normal without evidence of dilation.

INVOICE Gastrointestinal

18877
The stomach presented intact mildly prominent wall layering. The lumen of the stomach was empty without evidence of gastric distention secondary to retained ingesta, fluid or foreign material.

DATE
11/29/22
The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no evidence of mechanical/metabolic small intestinal ileus.



PATIENT The colon was overtly normal.

Rylie Cruz **Pancreas**

SPECIES The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Canine **Free Abdomen**

No overt lymphadenopathy or peritoneal free fluid was present.

BREED **ULTRASONOGRAPHIC FINDINGS**

Mix

- Hepatomegaly, exhibiting nonuniform/nodular parenchyma

SEX

- Mild splenomegaly

Spayed Female

- Gastroenterocolitis pattern

AGE

- Mild chronic renal changes

12 Years

- Bilateral borderline prominent to mildly enlarged adrenal glands- nonspecific

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

Although sampling is required for further assessment, primary concern for infiltrative hepatic neoplasia is warranted. Potential for multicentric neoplasia, involving the liver, spleen +/- gastrointestinal tract, given the patients decreased body condition and gastrointestinal signs, is possible.

48 Pounds

INTERPRETED BY

Further assessment may include hepatosplenic FNA cytology, using a 25-gauge needle and assuming normal clotting status, +/- a GI panel to include PLI/TLI/Cobalamin/Folate.

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

The borderline to mildly enlarged adrenal glands may indicate patient variant, benign hyperplasia, stress hypertrophy without overt evidence of neoplastic criteria.

IMAGING PERFORMED BY

Screening blood pressure and three view chest radiographs to assess for evidence of concurrent occult thoracic pathology is recommended.

Christensen

Guarded prognosis pending hepatosplenic cytology.

HOSPITAL NAME

As needed GI support is recommended.

Tranquility VC

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PATIENT

Rylie Cruz

SPECIES

Canine

BREED

Mix

SEX

Spayed Female

AGE

12 Years

WEIGHT

48 Pounds

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HOSPITAL NAME

Tranquility VC

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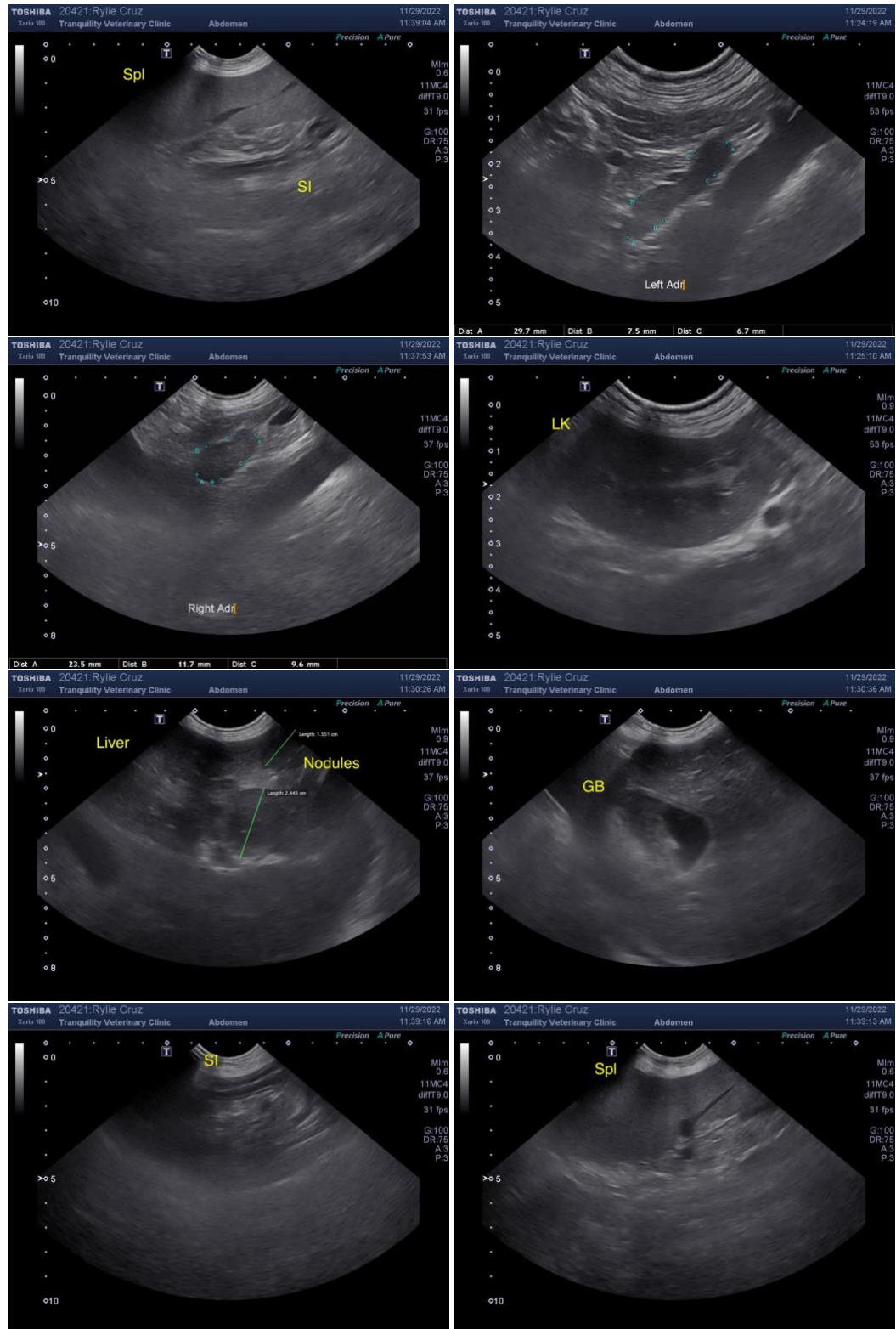
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PATIENT

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SPECIES

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Spayed Female

AGE

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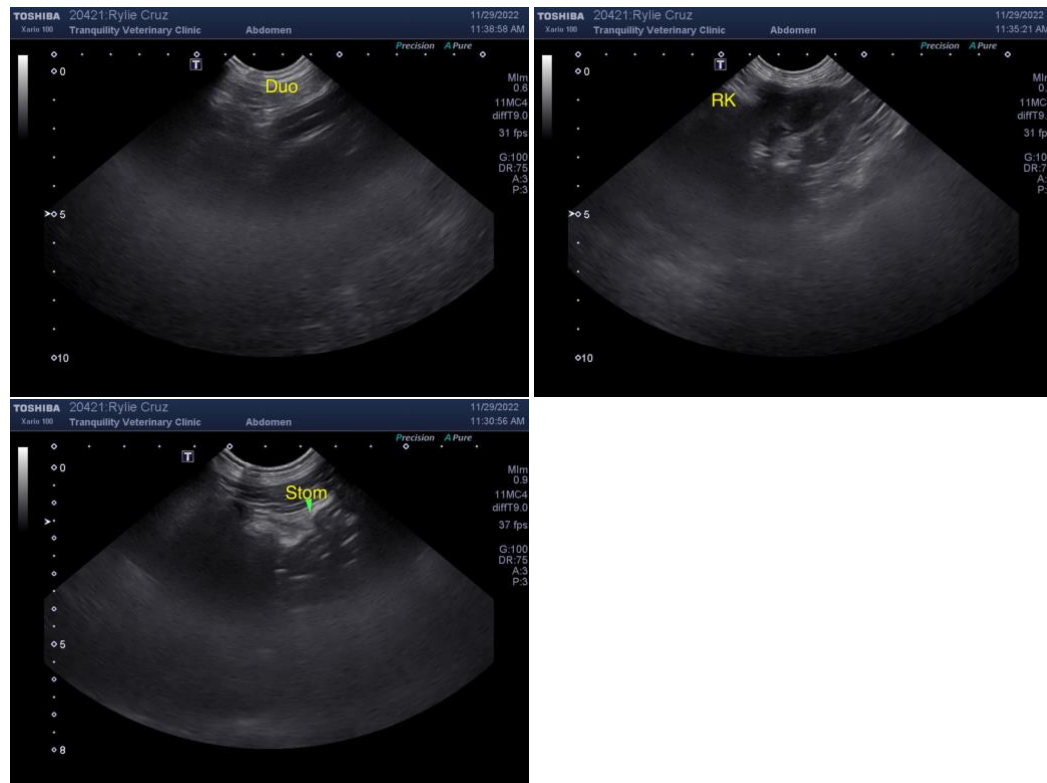
Christensen

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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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