



PATIENT

Kane Fox

SPECIES

Canine

BREED

Miniature Pinscher

SEX

MN

AGE

6yr

WEIGHT

30.5lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Mack E

HOSPITAL NAME

Northside Veterinary
Clinic

REFERRING VET

Dr. Mack

INVOICE

12111ag

DATE

11/07/2022

PRESENTING CLINICAL SIGNS

History of limping and discomfort when mass on right thigh is palpated.

Abnormal PE/Chem/CBC/UA Results: Approx. 2-3cm non-raised to slightly raised dermal mass with mild erythema on the right caudal thigh Cytology results showed mast cell. CHEM 10 (10/22/22): ALKP 232, WNL otherwise Xray (10/22/22): Unremarkable 4Dx (10/27/22): Negative

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

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. The left kidney measured 5.3 cm in length. The right kidney measured 5.5 cm in length.

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate appeared normal and free of pathology.

Adrenal Glands

The Bilateral adrenal glands were mildly prominent in size based on caudal pole width and body weight. The left adrenal gland measured 0.70 cm width at the caudal pole and 0.47 cm width at the cranial pole. The right adrenal gland measured 0.80 cm width at the caudal pole and 0.69 cm width at the cranial pole.

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 presented borderline to mildly 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.

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.



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

Kane Fox

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.

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Free Abdomen

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

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ULTRASONOGRAPHIC FINDINGS

SEX

- Mild benign hepatopathy-suggestive of mild benign vacuolar hepatopathy pattern
- Mildly prominent bilateral adrenal glands-nonspecific
- Sonographically unremarkable spleen

MN

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

6yr

Largely an unremarkable abdomen without evidence of significant visceral pathology. No evidence of primary or metastatic intra-abdominal neoplastic criteria was observed. The mildly prominent bilateral adrenal glands were nonspecific and likely incidental or patient variant. Assuming normal clotting status and using a 25g needle, a hepatosplenic FNA for screening cytology could be considered for further assessment. Monitoring of ALP levels as well as sonographic monitoring of the abdomen based on oncology recommendations would be reasonable.

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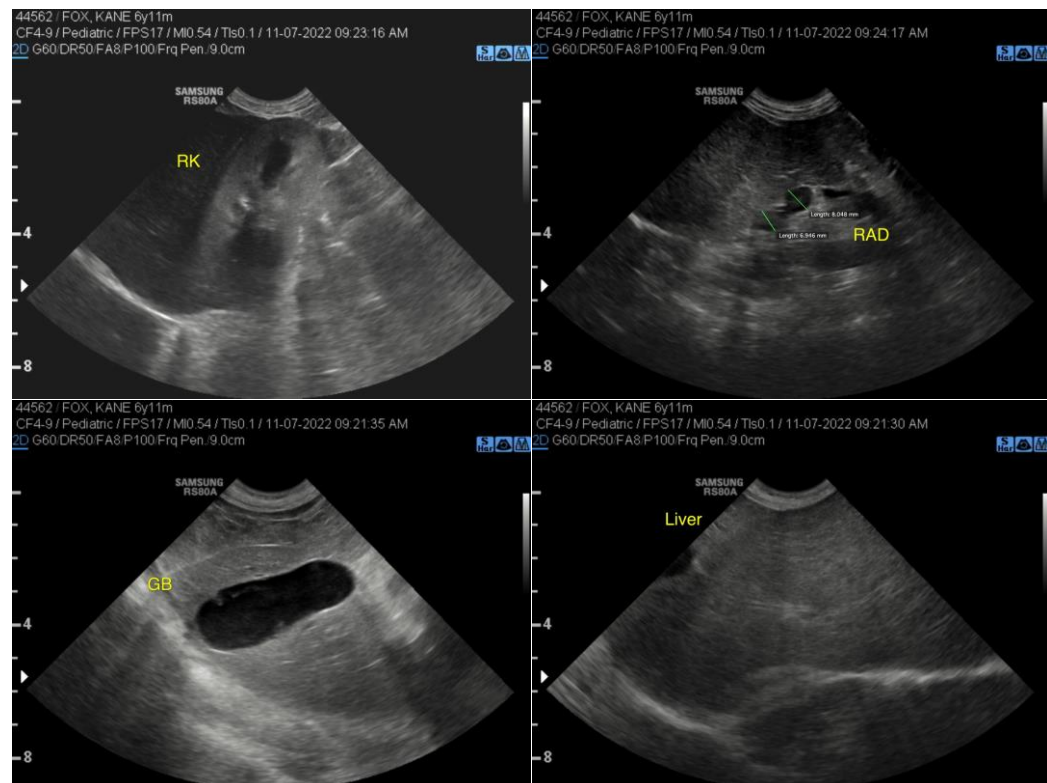
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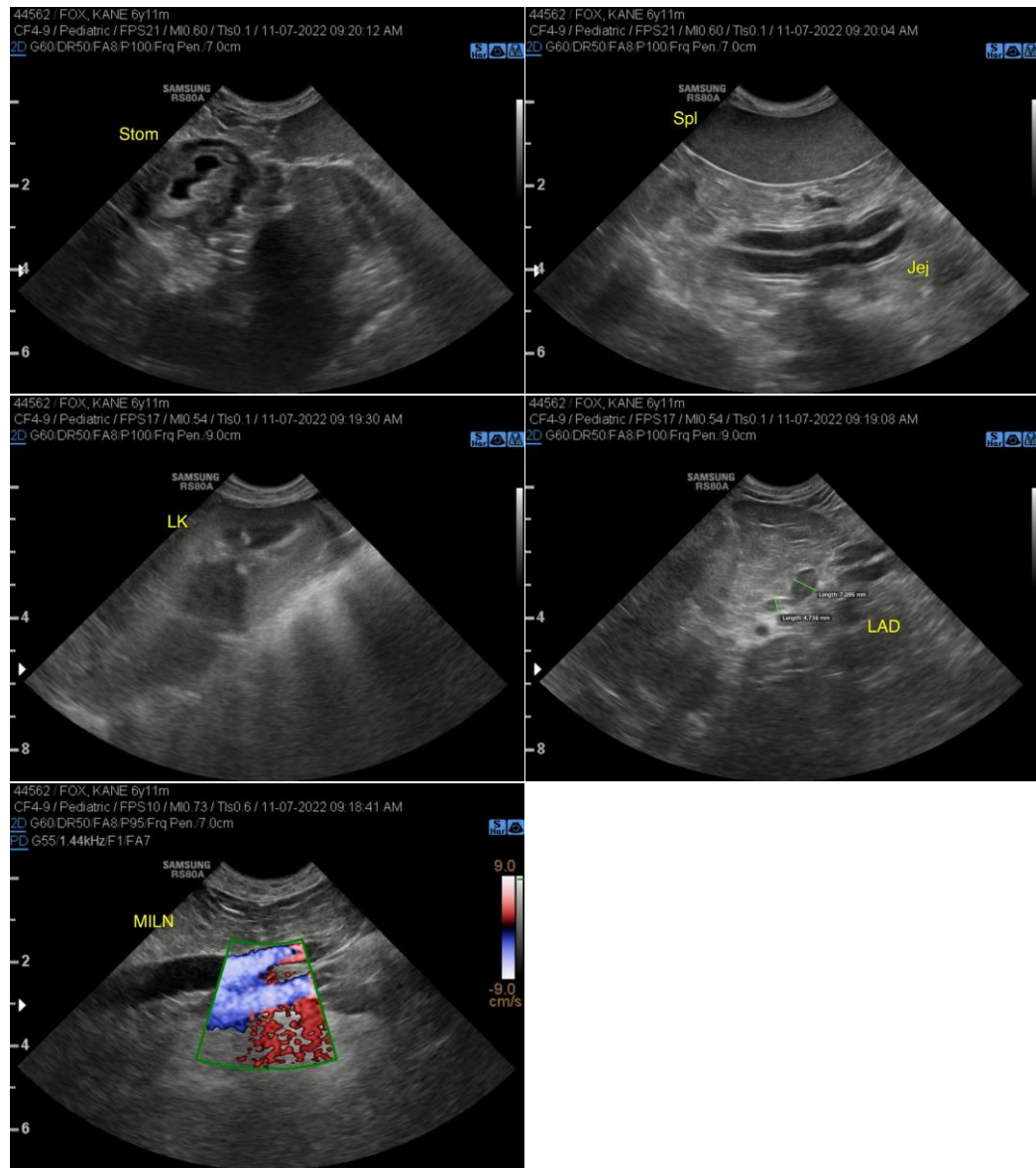
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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