



**PATIENT**

Sunny Ramirez

**PRESENTING CLINICAL SIGNS**

History: Decreased appetite for 2 weeks, labored breathing, hemimandibulectomy for SCC 2012  
Medication: Galliprant, Adequan

**SPECIES**

Canine

CBC 11/6/21: HCT 38.1, WBC 8.9 with normal differential, Previous Chemistry Panel: unremarkable

**BREED**

Golden Retriever

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN AND CHEST**

**Urinary System**

**SEX**

Male

The urinary bladder, trigone, and cystourethral junction 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 was noted.

**AGE**

13 years

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechogenic without parenchymal mineralization. The prostate measured approximately 5.0 cm x 3.5 cm.

**WEIGHT**

68 Pounds

Anechoic, thinly walled parenchyma cysts were present.

The area of the aortic trifurcation was free of pathology, without evidence of medial iliac or sublumbar lymphadenopathy.

**INTERPRETED BY**

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

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 6.8 cm in length. The right kidney measured 6.4 cm in length.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 3.2 cm length x 0.66 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 3.2 cm length x 0.65 cm width at the caudal pole.

**HOSPITAL NAME**

Maple Hills VH

**REFERRING VET**

Dr. Banzhof

**Spleen**

The spleen presented cranial and caudal masses. The caudal mass was more prominent in size with asymmetrical contour and with potential hypoechoic nodular component, measuring approximately 6.0 cm in diameter. A smaller, mildly expansive, nonhomogeneous cranial mass, measuring 3.0 cm in diameter, was present. The mid-splenic parenchyma exhibited generalized heterogeneity with Intermittent, non-expansive, hypoechoic nodules.

**INVOICE**

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**DATE**

11.8.2021



**PATIENT**

***Liver/ Gallbladder***

Sunny Ramirez

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion.

**SPECIES**

Canine

The gallbladder was non-distended in size with mild gallbladder debris. The cystic and common bile ducts were normal.

**BREED**

Golden Retriever

***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.

**SEX**

Male

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.

**AGE**

13 years

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

***Pancreas***

**WEIGHT**

68 Pounds

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 were evident.

***Free Abdomen***

**INTERPRETED BY**

No overt lymphadenopathy, peritoneal effusion, or hemoabdomen was present.

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Both testicles were subjectively normal in size and contained nonspecific parenchymal cysts to nodules. An example of a cyst or nodule in the right testicle measured 1.5 cm in diameter.

**IMAGING PERFORMED BY**

Rapid view of the heart (SDEP 3 position) revealed subjectively normal function without pathology in the right auricle or pericardium.

Rebekah Jakum, CVT  
ARDMS/RVT

**ULTRASONOGRAPHIC FINDINGS**

**HOSPITAL NAME**

***Primary Findings***

Maple Hills VH

- Nonspecific testicular cysts / nodules
- Benign prostatic hyperplasia with parenchymal cysts, minor potential for prostatitis
- Cranial and caudal splenic masses
- Mild hepatic parenchymal remodeling - subjectively benign

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***Secondary Findings***

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- Bilateral chronic renal changes
- Mild gallbladder debris (non-mucocele)

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**SEX**

Male

**AGE**

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**WEIGHT**

68 Pounds

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**HOSPITAL NAME**

Maple Hills VH

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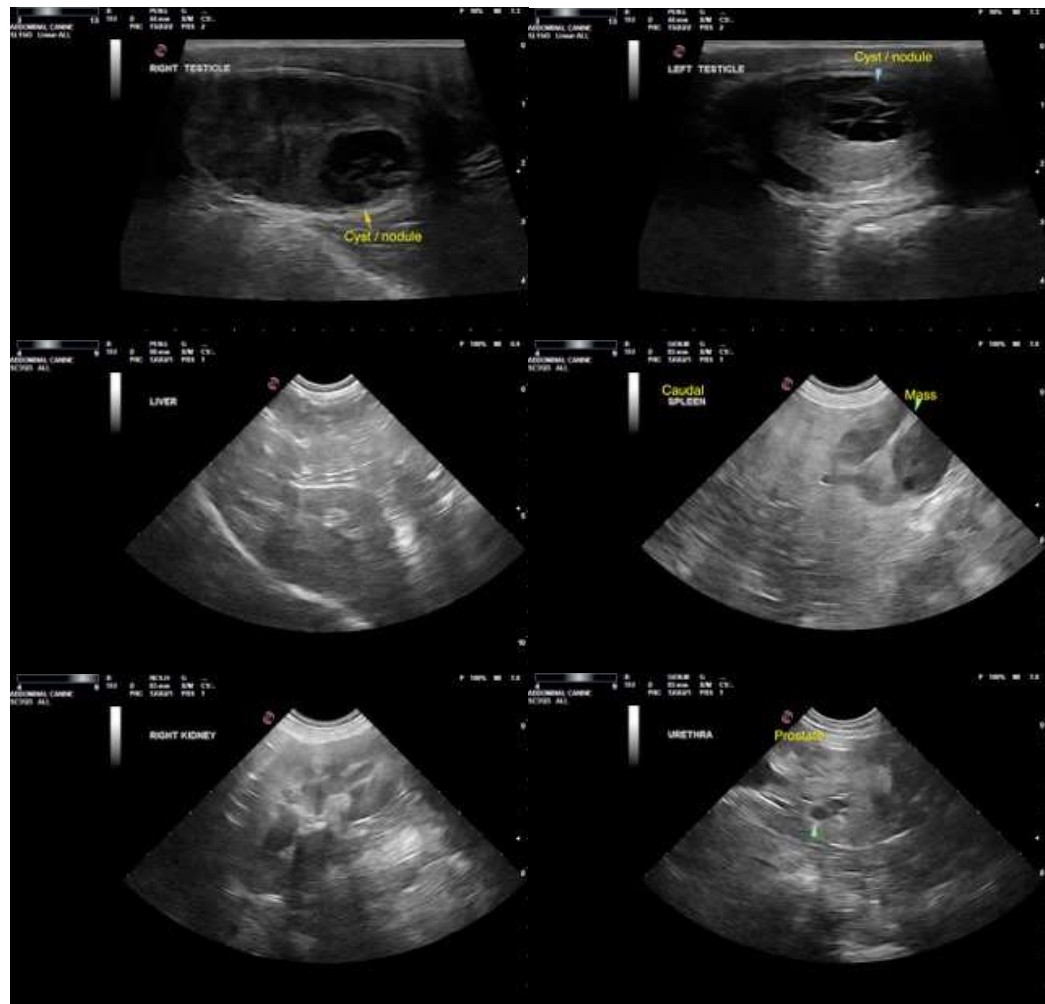
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The splenic masses were nonspecific with potential considerations including hyperplasia, hematopoiesis, granulomas, splenitis, or neoplasia (sarcoma, round cell neoplasia, metastatic neoplasia, or other). No overt evidence of intraabdominal metastasis was noted, although potential for non-sonographically evident or micrometastasis cannot be definitively excluded.

Without overt evidence of cardiac or thoracic metastasis, splenectomy with gross inspection of the liver and perisplenic omentum may be considered.





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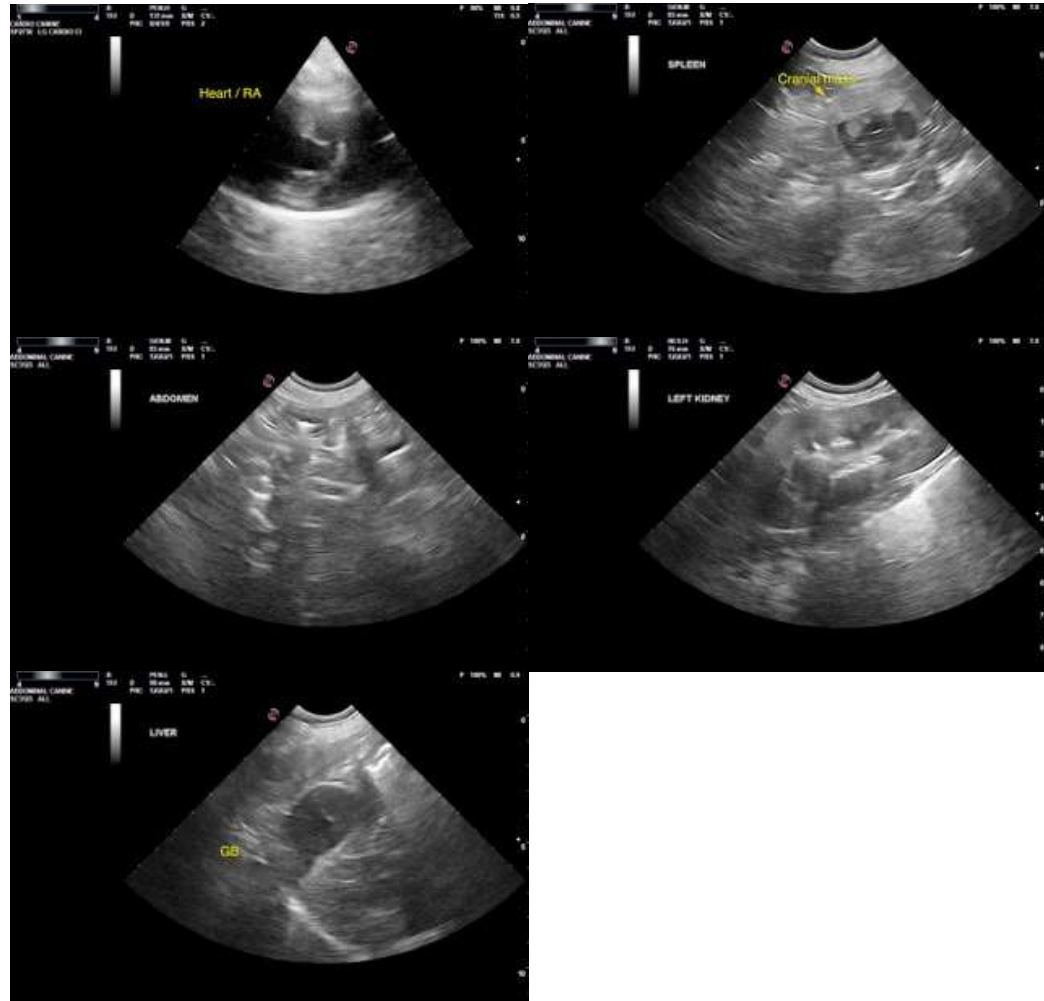
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)**  
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