



**PATIENT**

Jet Wright

**SPECIES**

Canine

**BREED**

Beagle

**SEX**

MN

**AGE**

12 years

**WEIGHT**

32.9 lbs.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jessica Miller

**HOSPITAL NAME**

Whippany VH

**REFERRING VET**

Dr. Van Beveren

**INVOICE**

15414

**DATE**

11/8/22

**PRESENTING CLINICAL SIGNS**

Recheck previous splenic and liver masses from 12/21. Cushing's Dz - on trilostane. Recent epistaxis. Current meds: Trilostane

Abnormal PE/Chem/CBC/UA Results: Elevated ALT, ALP, and GGT

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 was noted.

The residual prostate was free of pathology.

The area of the aortic trifurcation was free of pathology.

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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.6 cm in length. The right kidney measured 6.7 cm in length.

**Adrenal Glands**

Bilateral symmetrical adrenal gland enlargement with uniformly hypoechoic parenchyma was present. The left adrenal gland measured 2.5 cm length x 0.79 cm width at the caudal pole. The right adrenal gland measured 2.6 cm length x 0.84 cm width at the caudal pole.

**Spleen**

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, nondisruptive, variably hyperechoic nodules were present primarily in the medial parenchyma adjacent to the hilus. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas. No evidence of splenic masses or neoplastic criteria was noted.

**Liver/ Gallbladder**

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. A large, mildly irregular, primarily homogeneous to isoechoic mass adjacent to the hepatic parenchyma, subjectively deriving from the focal aspect or potential stalk in the area of the caudal mid to right liver measuring approximately 12.0-13.0 cm in diameter was present extending into the area of the mid-abdomen. 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.



<b>PATIENT</b>	The gallbladder was non-distended in size containing mild, hyperechoic, nonorganized gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.
Jet Wright	
<b>SPECIES</b>	<b><i>Gastrointestinal</i></b>
Canine	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.
<b>BREED</b>	
Beagle	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.
<b>SEX</b>	Normal visible colon wall layers were present with apparent formed feces in lumen.
MN	<b><i>Pancreas</i></b>
<b>AGE</b>	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
12 years	
<b>WEIGHT</b>	<b><i>Free Abdomen</i></b>
32.9 lbs.	No overt lymphadenopathy or peritoneal effusion was present.
<b>INTERPRETED BY</b>	<b>ULTRASONOGRAPHIC FINDINGS</b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<ul style="list-style-type: none"> <li>• Hepatopathy with large primarily homogeneous hepatoma-like mass</li> <li>• Minor gallbladder debris (non-mucocele)</li> <li>• Benign splenic changes with probable myelolipomas</li> <li>• Bilateral chronic renal changes</li> <li>• Bilateral adrenomegaly - consistent with pituitary-dependent hyperadrenocorticism based on history, no adrenal tumors</li> <li>• Mild remodeled pancreas</li> </ul>
<b>IMAGING PERFORMED BY</b>	<b>INTERPRETATION OF THE FINDINGS &amp; FURTHER RECOMMENDATIONS</b>
Jessica Miller	The liver mass was nonspecific with considerations including hepatoma, hyperplasia, hematopoiesis, granuloma, potential for malignant neoplastic criteria possible.
<b>HOSPITAL NAME</b>	Correlation with pending FNA cytology is suggested. Subjectively, the hepatic mass appears to be amendable to surgical resection based on subjective focal connection to the caudal aspect of the liver.
Whippany VH	
<b>REFERRING VET</b>	Three-view chest radiographs and clotting status, given the recent epistaxis, could be considered if not done.
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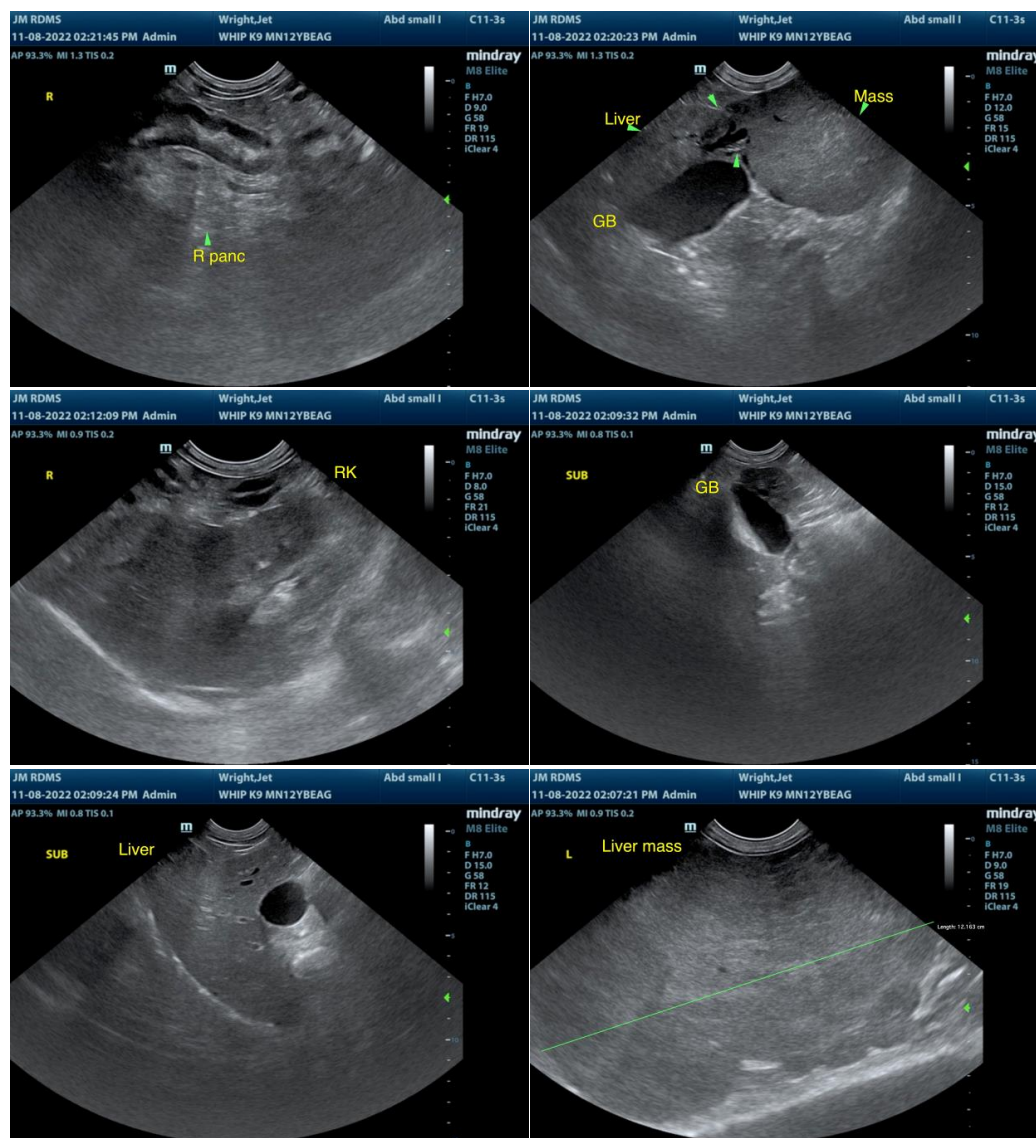
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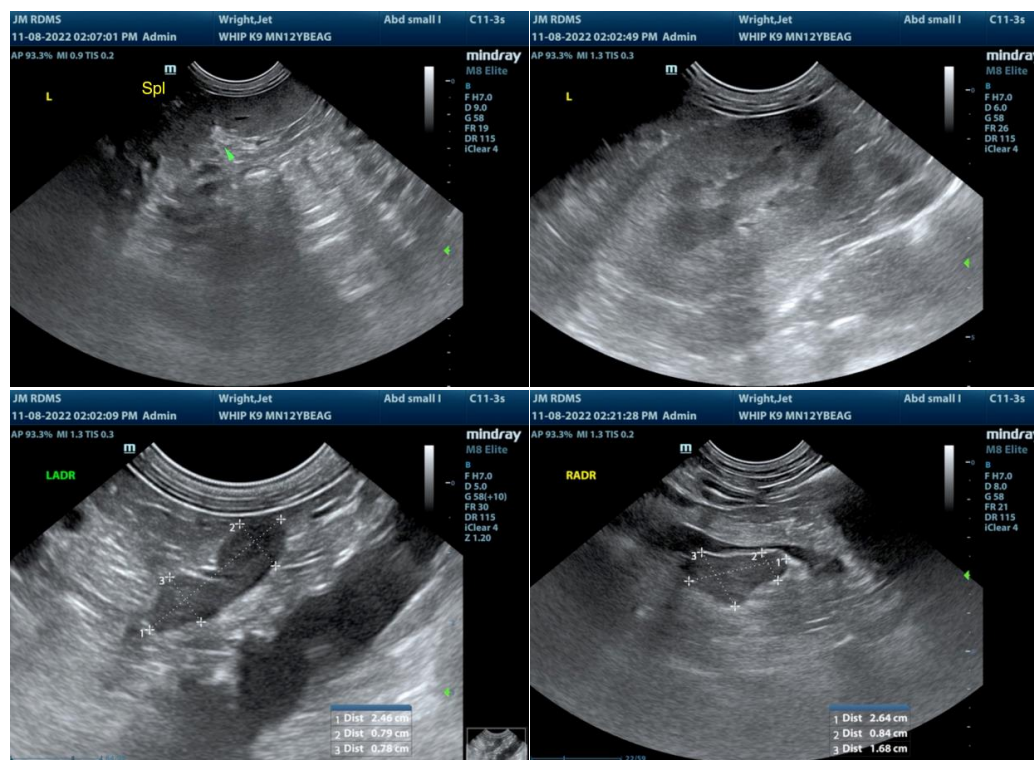
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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