



PATIENT

Snow Vargas

SPECIES

Canine

BREED

Pitbull

SEX

MN

AGE

13yr

WEIGHT

81.5

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Celia Galanti, DVM

HOSPITAL NAME

Craig Road Animal
Hospital

REFERRING VET

Dr. Emanuel DeJesus,
DVM

INVOICE

22905

DATE

11/08/2025

PRESENTING CLINICAL SIGNS

Spindle cell tumor appreciated on prepuce 2021, not removed or followed up on. Recently ulcerated and bleeding at home. O reports P has been weak in hind limbs.

Abnormal PE/Chem/CBC/UA Results: AST 73 (15-66) SDMA 21 Calcium 8.4 (8.9-11.4) Magnesium 2.7 (1.5-2.5) Potassium 5.9 (3.6-5.5) Na/K 24 (27-38) WBC 16 (4-15.5) HCT 14 (36-60) Neutrophils 13920 (2060-10600) Bands 480 (0-300) Lymphocytes 640 (690-4500) USG 1.013 (1.015-1.050) pH 8 (5.5-7) 4x4cm ulcerated mass on prepuce, mass effect intra-abdominally

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 evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

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. Bilateral areas of medullary mineral and pyelectasia were present. The left kidney measured 7.3 cm in length. The right kidney measured 7.0 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

Both adrenal glands were asymmetrically enlarged with mild non-homogenous hypoechoic non-mineralized parenchyma and evidence of mild parenchymal expansion in the area of the left phrenicoabdominal vein. The left adrenal gland measured 1.1 cm width at the caudal pole and 3.7 cm length. The right adrenal gland measured 1.3 cm width at the caudal pole and 3.7 cm length.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.

Liver/Gallbladder

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

Gastrointestinal



PATIENT

Snow Vargas

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach moderate progressively shadowing ingesta with no signs of obstruction or foreign material.

The visualized small intestine exhibited intact, normal wall layer ratio. Mild segmental non-shadowing ingesta was present without obstructive pattern to the level of the colon.

SPECIES

Canine

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

Pancreas

BREED

Pitbull

The area of the pancreas was sonographically normal.

Free Abdomen

An unspecified mixed echogenic abdominal mass was present measuring ~ 11 cm in diameter.

SEX

MN

Intermittent, primarily mild asymmetrical non-homogenous mesenteric lymph nodes were present, an example measured 2.2 cm x 1.2 cm.

No evidence of peritoneal effusion.

AGE

13yr

ULTRASONOGRAPHIC FINDINGS

Primary

- Unspecified mixed echogenic abdominal mass
- Bilateral adrenomegaly with possible early left adrenal vascular invasion
- Chronic renal changes exhibiting minor medullary mineral and pyelectasia
- Hepatic parenchymal remodeling, mild gallbladder debris
- Normal visualized gastrointestinal tract with gastrointestinal ingesta

WEIGHT

81.5

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assuming normal clotting status and using a 25g needle, an abdominal mass FNA for screening cytology may be considered for further assessment. An adrenal workup if clinical signs consistent with adrenal disease as well as serial monitoring of systemic BP for evidence of hypertension which may allude to pheochromocytoma is recommended.

IMAGING PERFORMED BY

Dr. Celia Galanti, DVM

Correlation with most recent meal ingestion is recommended. The gastrointestinal ingesta is suggestive of postprandial presentation / food echogenicity.

HOSPITAL NAME

Craig Road Animal
Hospital

Assuming no pathology on three view chest radiographs, abdominal CT would be ideal for further assessment of the abdominal mass and bilateral adrenal glands.

REFERRING VET

Dr. Emanuel DeJesus,
DVM

INVOICE

22905

DATE

11/08/2025



PATIENT

Snow Vargas

SPECIES

Canine

BREED

Pitbull

SEX

MN

AGE

13yr

WEIGHT

81.5

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Celia Galanti, DVM

HOSPITAL NAME

Craig Road Animal
Hospital

REFERRING VET

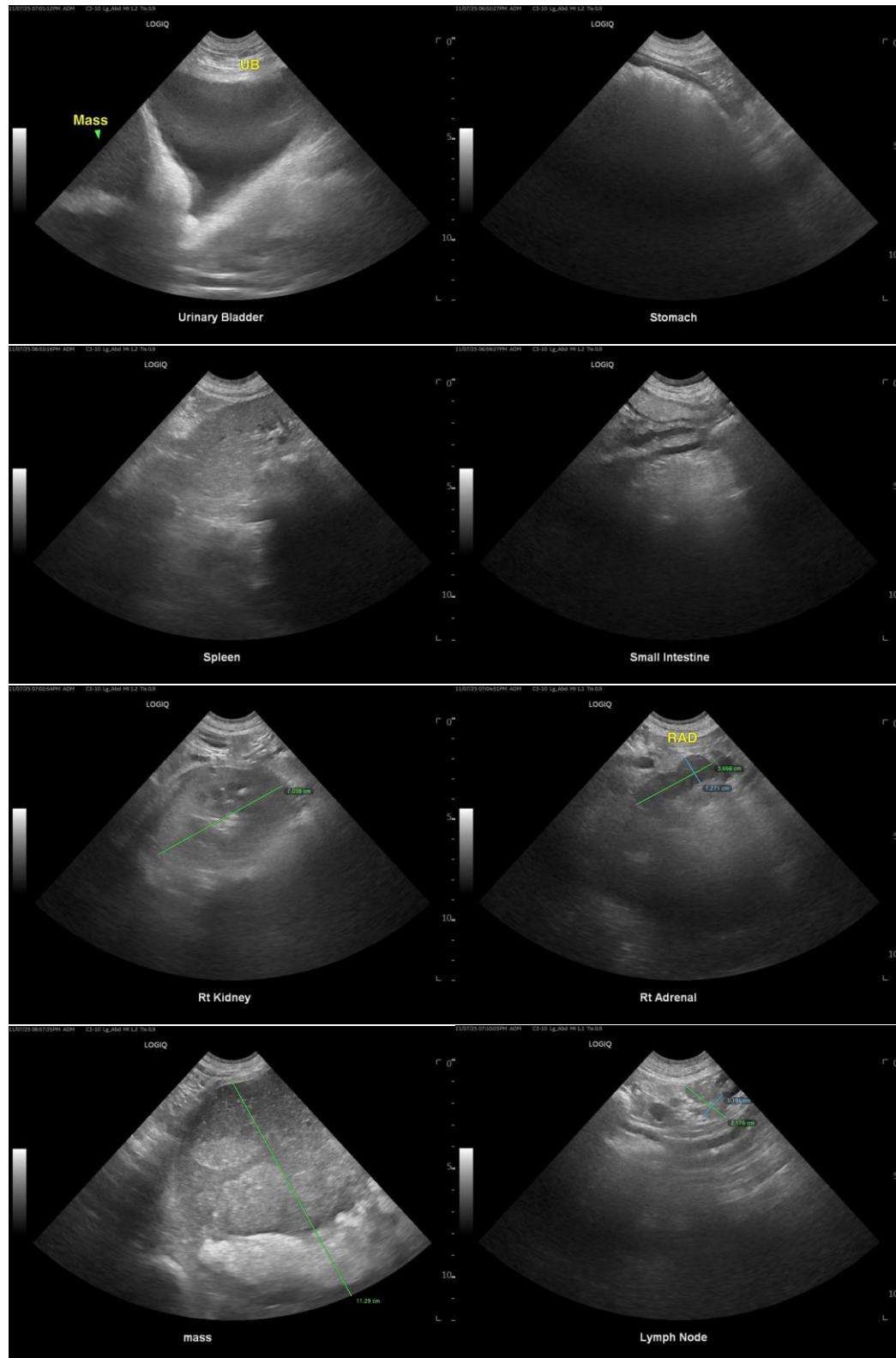
Dr. Emanuel DeJesus,
DVM

INVOICE

22905

DATE

11/08/2025





PATIENT

Snow Vargas

SPECIES

Canine

BREED

Pitbull

SEX

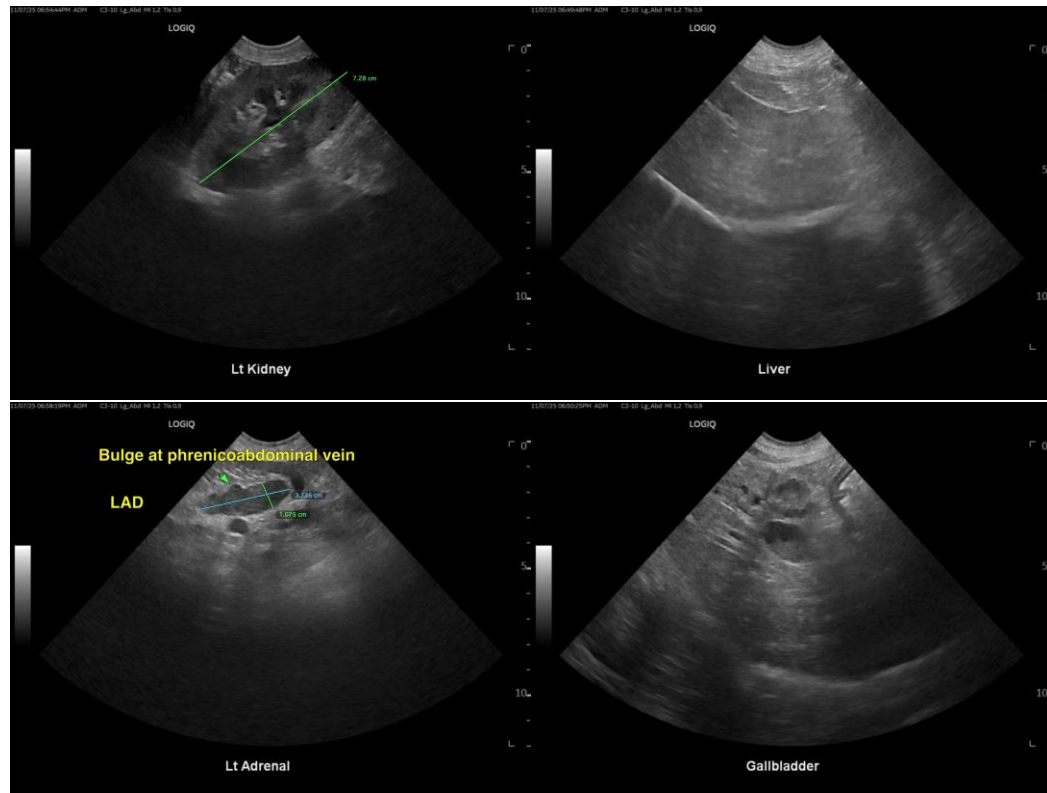
MN

AGE

13yr

WEIGHT

81.5



INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Celia Galanti, DVM

HOSPITAL NAME

Craig Road Animal
Hospital

REFERRING VET

Dr. Emanuel DeJesus,
DVM

INVOICE 22905

DATE
11/08/2025

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