



PATIENT

Otto Scarpelli

SPECIES

Canine

BREED

German Shepherd Dog

SEX

Intact Male

AGE

10 Years

WEIGHT

60.7 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Cottage Grove
Veterinary Clinic

REFERRING VET

Dr. Damewood

INVOICE

72582

DATE

12/15/25

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: Not eating, lethargic. Gums very pale, BCS 3/9. Abdomen distended with palpable fluid wave. **ABNORMAL** Labwork Values None done yet. Current Medications None
Radiographic Findings Not done yet. Notes to Specialist (if any) We are trying to determine if this is malignant or not before attempting surgery.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder 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.

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 heteroechoic without parenchymal mineralization. The prostate measured 3.8 cm in diameter. Anechoic, thinly walled parenchyma cysts were present.

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 7.1 cm in length. The right kidney measured 7.2 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.72 cm at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.70 cm at the caudal pole.

Spleen

The spleen exhibited a solitary visualized to possible multiple mildly expansive non-homogeneous mass(es). Associated splenic capsule distortion noted. Example of splenic mass measured 4.3 cm in diameter.

Liver

The liver revealed a moderately sized to large, non-homogeneous to mixed echogenic caudal liver mass measuring approximately 10 cm in diameter. The remainder of the liver exhibited mild heterogeneous remodeled parenchyma. The gallbladder was non distended in size with mild, non-organized debris. The cystic duct and common bile ducts were normal without evidence of dilation.

Gastrointestinal

The stomach was indistinctly visualized without evidence of gastric distention. The stomach exhibited intact, possibly mildly thickened wall layering with mild luminal gas.

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.



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

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SPECIES *Pancreas*

Canine The pancreas was not definitively visualized owing to increased omental artifact.

BREED *Free Abdomen*

German Shepherd Dog Moderate to significant volume mildly echogenic peritoneal effusion with generalized mildly non-homogeneous hyperechoic omentum.

SEX No obvious visualized significant omental lymphadenopathy.

Intact Male Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

AGE **ULTRASONOGRAPHIC FINDINGS**

10 Years

- Hepatosplenic masses.
- Moderate to significant volume peritoneal effusion.
- Normal overall empty visible gastrointestinal tract.

WEIGHT **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

60.7 lbs

Unfortunately, the hepatosplenic masses are consistent with multicentric hepatosplenic neoplasia with multicentric sarcoma suspected. Curative surgical options appeared to be precluded. An unfavorable prognosis is indicated.

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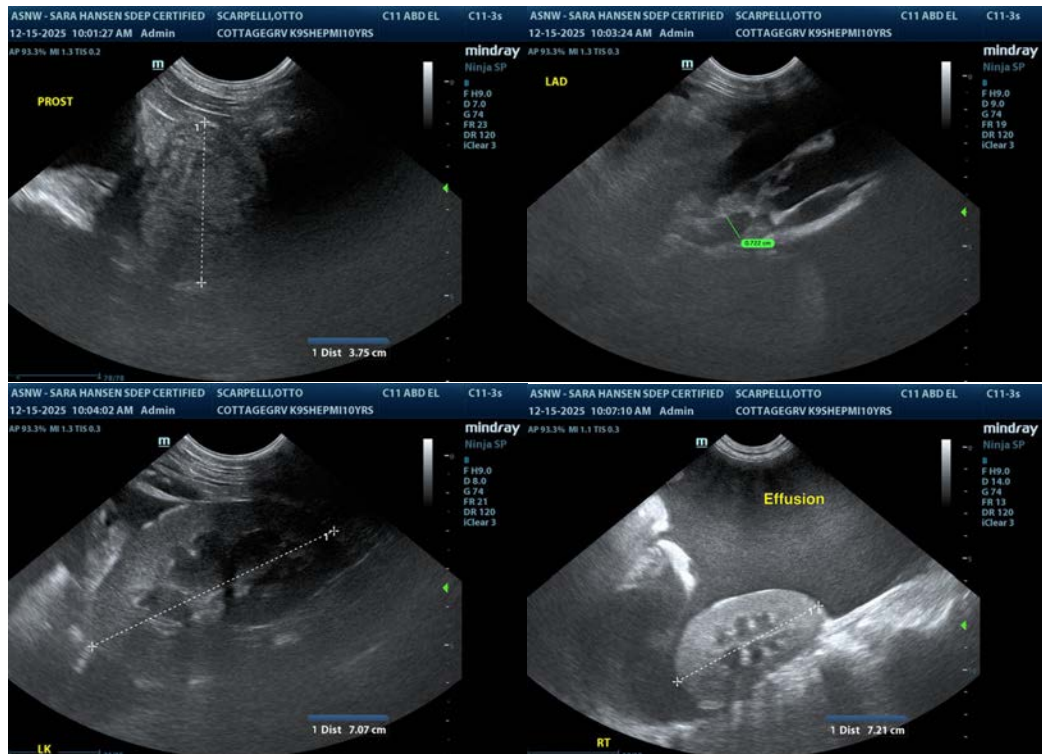
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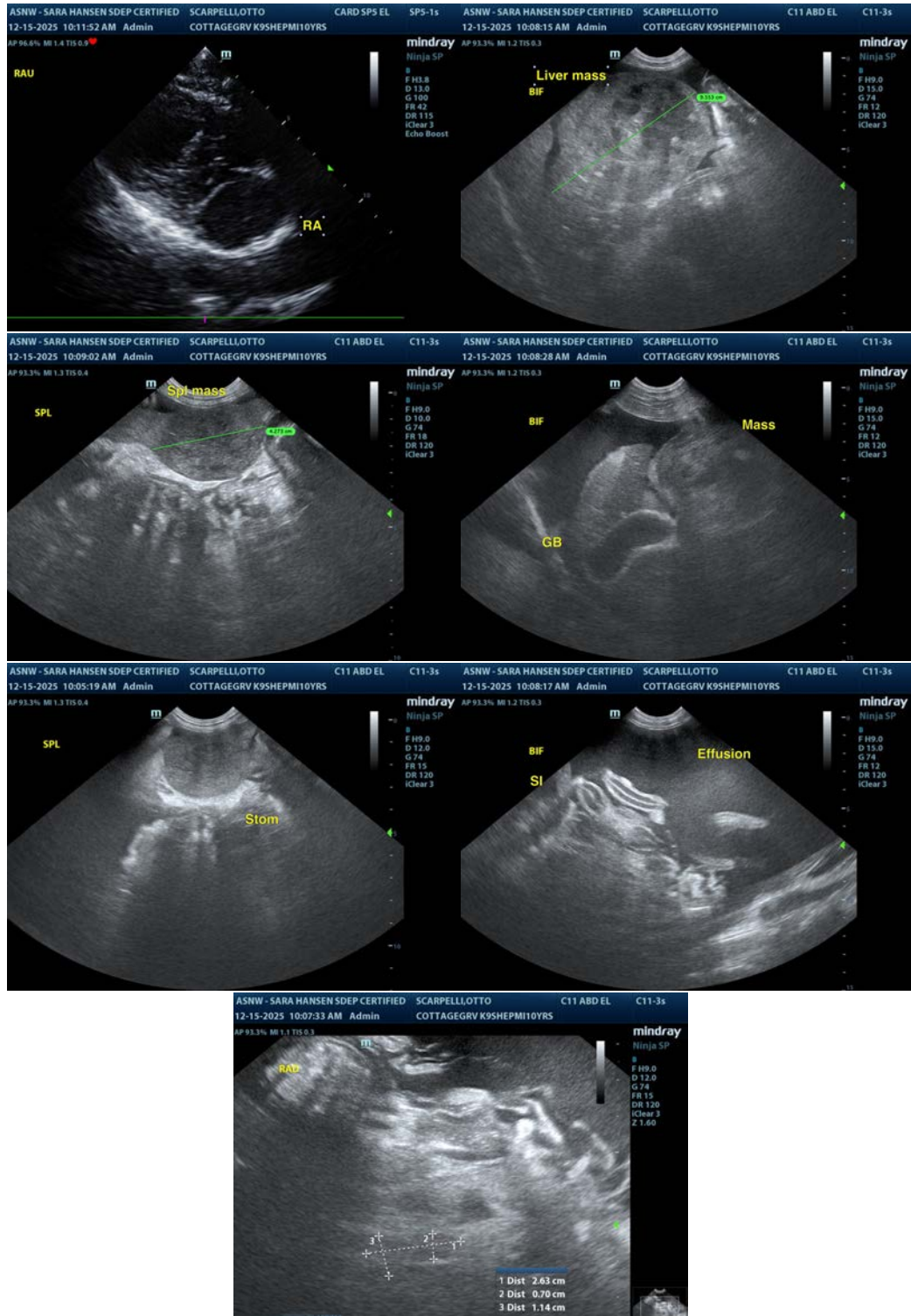
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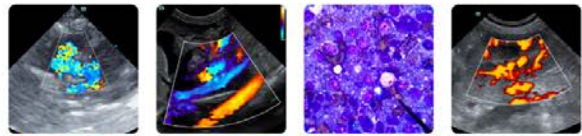
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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