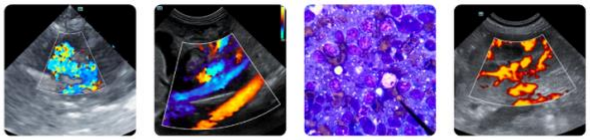


PATIENT

Trinity Coleman

SPECIES

Canine

BREED

Schnauzer Mix

SEX

Spayed Female

AGE

16 Years

WEIGHT

9.1 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Dr. Kari Wilson

HOSPITAL NAME

Animal Emergency Hospital Deland

REFERRING VET

Dr. Kari Wilson

INVOICE

12677

DATE

12/15/25

PRESENTING CLINICAL SIGNS

Trinity is a 16 YO FS Schnauzer mix who was presented for possible abdominal mass and pancreatitis. P was seen at pDVM 3 weeks ago for vomiting. She was diagnosed with pancreatitis. Today p has been doing well and had recheck this morning. Bloodwork showed elevated liver values and PSL. It was recommended she come here for ultrasound to rule out abdominal mass. BW: Crea 1.9, ALT 266, ALP 431, PSL 832

Abnormal PE/Chem/CBC/UA Results: BW: Crea 1.9, ALT 266, ALP 431, PSL 832

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Mild asymmetrical luminal surface to micropolypoid changes were present likely associated with age related mural changes. 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 was 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 moderate to marked loss of corticomedullary border demarcation expected for the age of the patient. Areas of medullar mineral and variably sized cortical to renal cysts were visualized in the right kidney with an example measuring 1.2 cm in diameter. Generally small multiple cortical cysts were visualized in the left kidney. The left kidney measured 4.8 cm in length. The right kidney measured 4.8 cm in length.

Adrenal Glands

The left adrenal gland was mildly enlarged in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The right adrenal gland measured 0.85 cm width in the caudal pole.

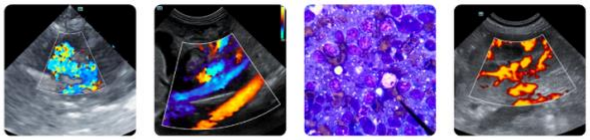
The right adrenal gland was indistinctly visualized yet with mild parenchyma heterogeneity and mild capsule asymmetry without suspicion for overt neoplasia. The right adrenal gland subjectively measured 0.56 cm width at the caudal pole.

Spleen

The spleen presented normal in size with mild medial capsule asymmetry and mild heterogeneous splenic parenchyma. A solitary mildly expansive yet noncapsule deforming essentially echogenic to mild peripherally nonhomogenous splenic nodule was visualized measuring 0.98 cm in diameter. Concurrent small well demarcated hyperechoic splenic nodules were present most consistent with small myelolipomas.

Liver

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



PATIENT

Trinity Coleman

SPECIES

Canine

BREED

Schnauzer Mix

SEX

Spayed Female

AGE

16 Years

WEIGHT

9.1 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Dr. Kari Wilson

HOSPITAL NAME

Animal Emergency Hospital Deland

REFERRING VET

Dr. Kari Wilson

INVOICE

12677

DATE

12/15/25

The gallbladder was non distended in size with moderate irregularly congealed hyperechoic nonorganized biliary sludge. No evidence of peripheral inflammation. The common bile duct was not visualized.

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. Segmental mild hyperechoic intestinal mucosal speckling was present.

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

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Hepatopathy exhibiting parenchymal remodeling.
- Early immature gallbladder mucocele.
- Mildly expansive mixed echogenic splenic nodule with probable concurrent small splenic myelolipomas.
- Heterogeneous remodeled pancreas.
- Chronic renal changes exhibiting medullary mineral and variably sized cysts.
- Mildly enlarged caudal left adrenal gland.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The pancreas is most consistent with chronic pancreatitis without sonographic evidence of active inflammation or neoplastic criteria. Likewise, chronic benign hepatopathy is suspected. The splenic nodule may indicate hyperplasia, hematopoiesis, granuloma, atypical myelolipoma or an emerging tumor. Further assessment may include (assuming normal clotting status and using a 25-gauge needle) hepatic parenchyma and splenic nodule FNA cytology. No evidence of intra-abdominal mass. Hepatic support with empirical therapy for chronic pancreatitis if clinical signs of hepatic disease or gastrointestinal signs, is recommended. Mild left adrenomegaly is of unclear clinical significance given the current clinical signs. Adrenal screening could be considered if clinical signs consistent with adrenal disease arise. Urinary work up is recommended if not done.

PATIENT

Trinity Coleman

SPECIES

Canine

BREED

Schnauzer Mix

SEX

Spayed Female

AGE

16 Years

WEIGHT

9.1 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Dr. Kari Wilson

HOSPITAL NAME

Animal Emergency Hospital Deland

REFERRING VET

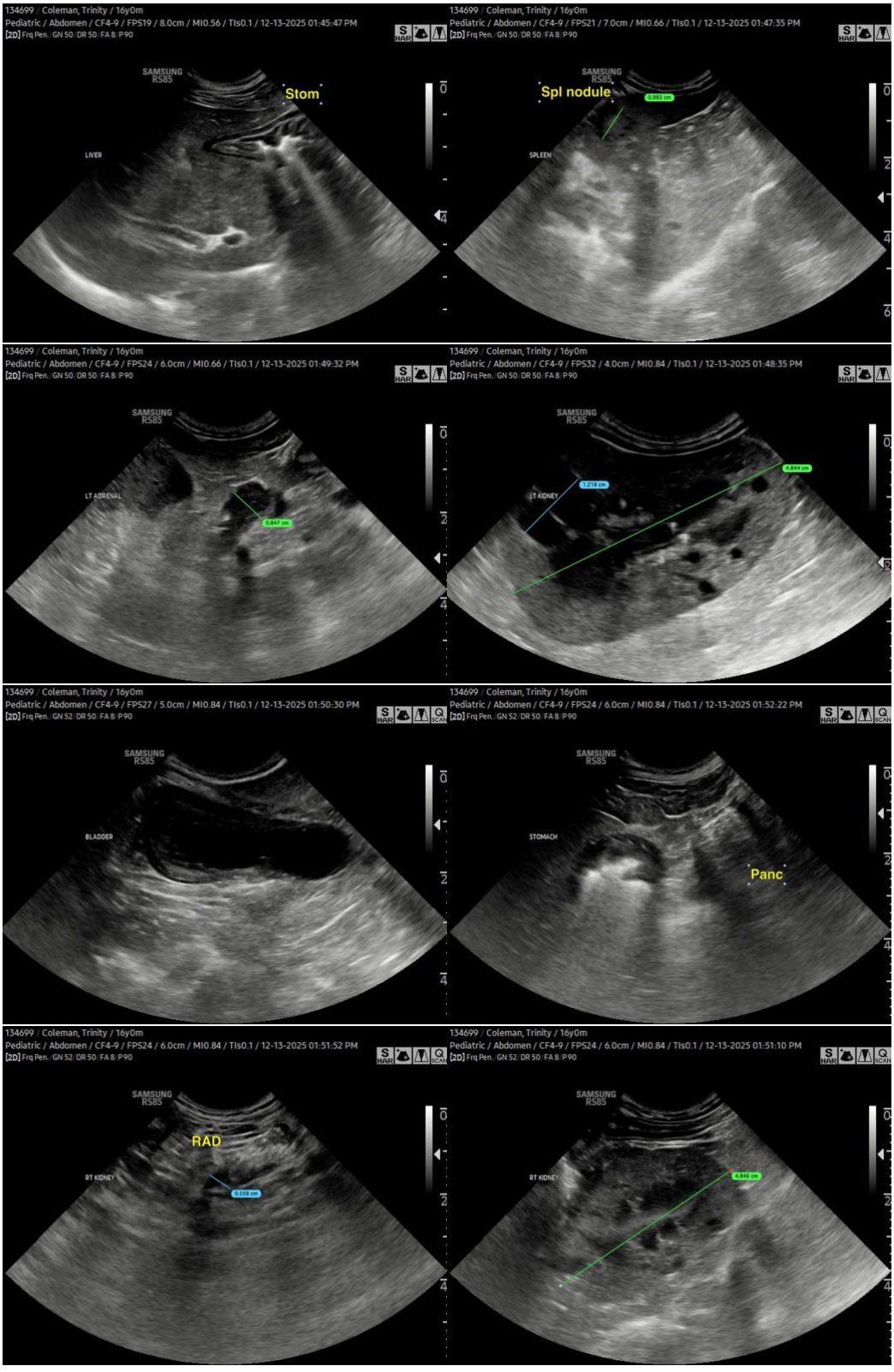
Dr. Kari Wilson

INVOICE

12677

DATE

12/15/25



PATIENT

Trinity Coleman

SPECIES

Canine

BREED

Schnauzer Mix

SEX

Spayed Female

AGE

16 Years

WEIGHT

9.1 kg

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP

IMAGING PERFORMED BY

Dr. Kari Wilson

HOSPITAL NAME

Animal Emergency Hospital Deland

REFERRING VET

Dr. Kari Wilson

INVOICE

12677

DATE

12/15/25

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