



## PATIENT

Scooby Morton

## SPECIES

Canine

## BREED

Poodle Mix

## SEX

MN

## AGE

8yr

## WEIGHT

42

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Sreenivasa Maddineni

## HOSPITAL NAME

West Babylon Animal  
Hospital

## REFERRING VET

Sreenivasa Maddineni

## INVOICE 23115

DATE  
12/02/2025

## PRESENTING CLINICAL SIGNS

Owner reports seizure activity last night. Painful in hind limbs, Swollen popliteal lymph nodes. Patient presented to office panting heavily and not walking very well. Owner reports that she would have to carry him around the house since last night after noticing patient shaking. 11/29/25 Patient was sent home with a few medications: Baytril 68mg, Carprovet 75mg, Gabapentin 100mg, and Levetiracetam 500mg. O still feels that patient is not doing well.

Abnormal PE/Chem/CBC/UA Results: Recent CBC and Chem profile. Attached. Accuplex is pending.

## 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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.5 cm in length. The right kidney measured 5.6 cm in length.

Several irregular swollen non-homogenous hypoechoic medial iliac lymph nodes were present. One lymph node exhibited centralized lateral cystic component. An example of a lymph node measured 4 cm x 2.8 cm.

The residual prostate appeared normal and free of pathology.

### Adrenal Glands

The bilateral adrenal glands were mildly enlarged in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.77 cm width in the caudal pole. The right adrenal gland measured 0.70 cm width in the caudal pole.

### Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. 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, neoplastic, or benign parenchyma changes were not noted.

### Liver/Gallbladder

Generalized hepatomegaly with areas of mild asymmetrical caudal hepatic capsule contour were present. Non-homogenous mildly hypoechoic hepatic parenchyma was present. Indistinct portal vascular borders. No visualized intraparenchymal masses were visualized. Normal vascular volume. The gallbladder was non-distended in size with thin walls and mild non-organized debris. The cystic and common bile ducts were normal.



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## *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. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material.

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

## *Pancreas*

The right pancreatic limb was mildly prominent in size with heterogeneous hypoechoic to regional hyperechoic parenchyma.

## *Free Abdomen*

No visualized overt mid abdominal lymphadenopathy or peritoneal effusion was present.

## ULTRASONOGRAPHIC FINDINGS

### Primary

- Non-homogenous hypoechoic swollen cystic medial iliac lymphadenopathy
- Enlarged non-homogenous mildly hypoechoic liver
- Mild gallbladder debris
- Age-related renal changes
- Non-specific mild bilateral adrenomegaly- subjective benign
- Mildly prominent non-homogenous hyperechoic right pancreas-possible chronic / chronic active pancreatitis /fibrosis
- Normal gastrointestinal tract

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The medial iliac lymphadenopathy meets neoplastic criteria until proven otherwise with potential for multicentric lymphatic and hepatic neoplasia of concern. Assuming normal clotting status, FNA cytology of accessible lymph node as well as screening hepatic cytology is recommended for further clarification and potential for oncology consultation. Correlation with pending diagnostics is recommended.



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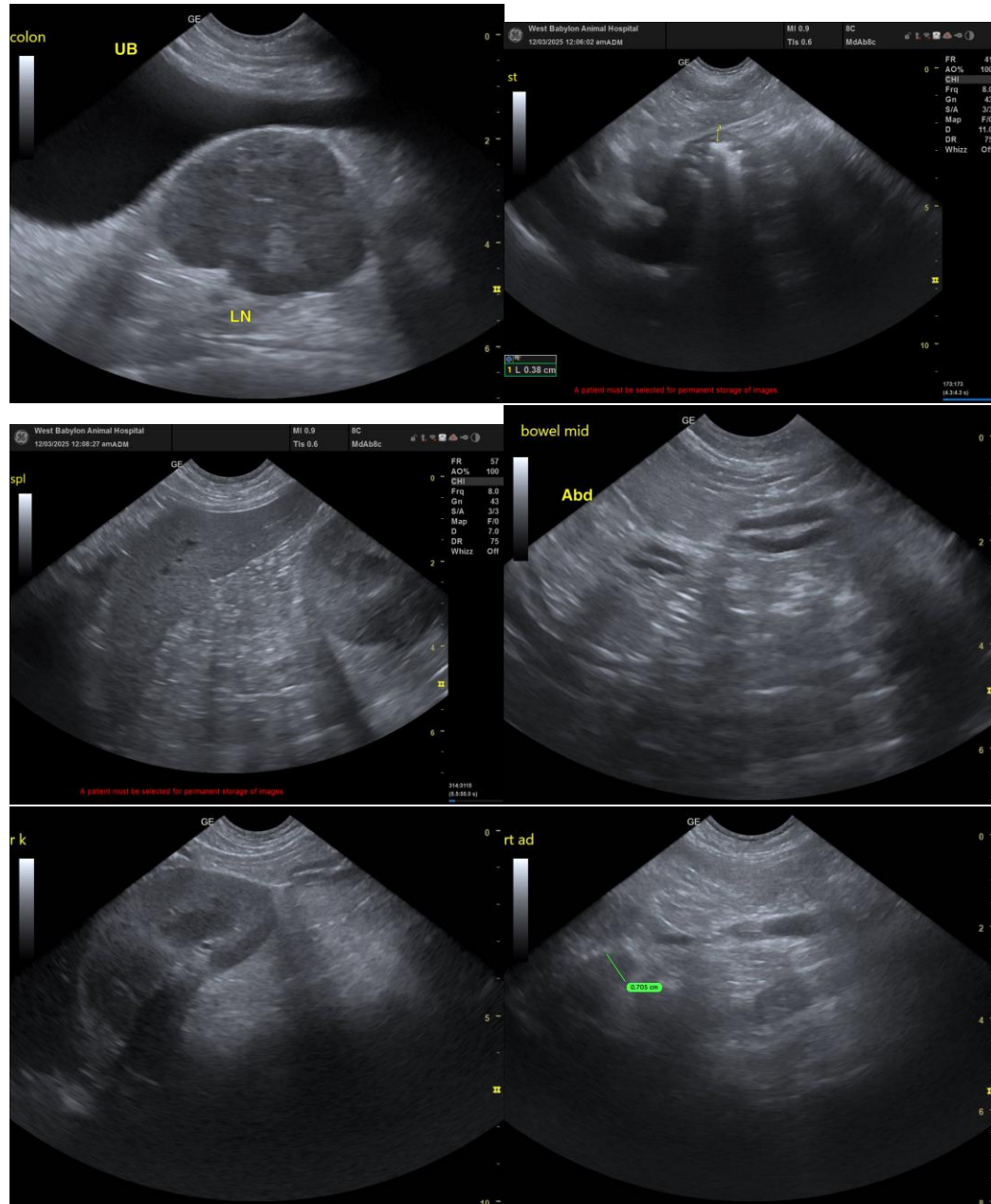
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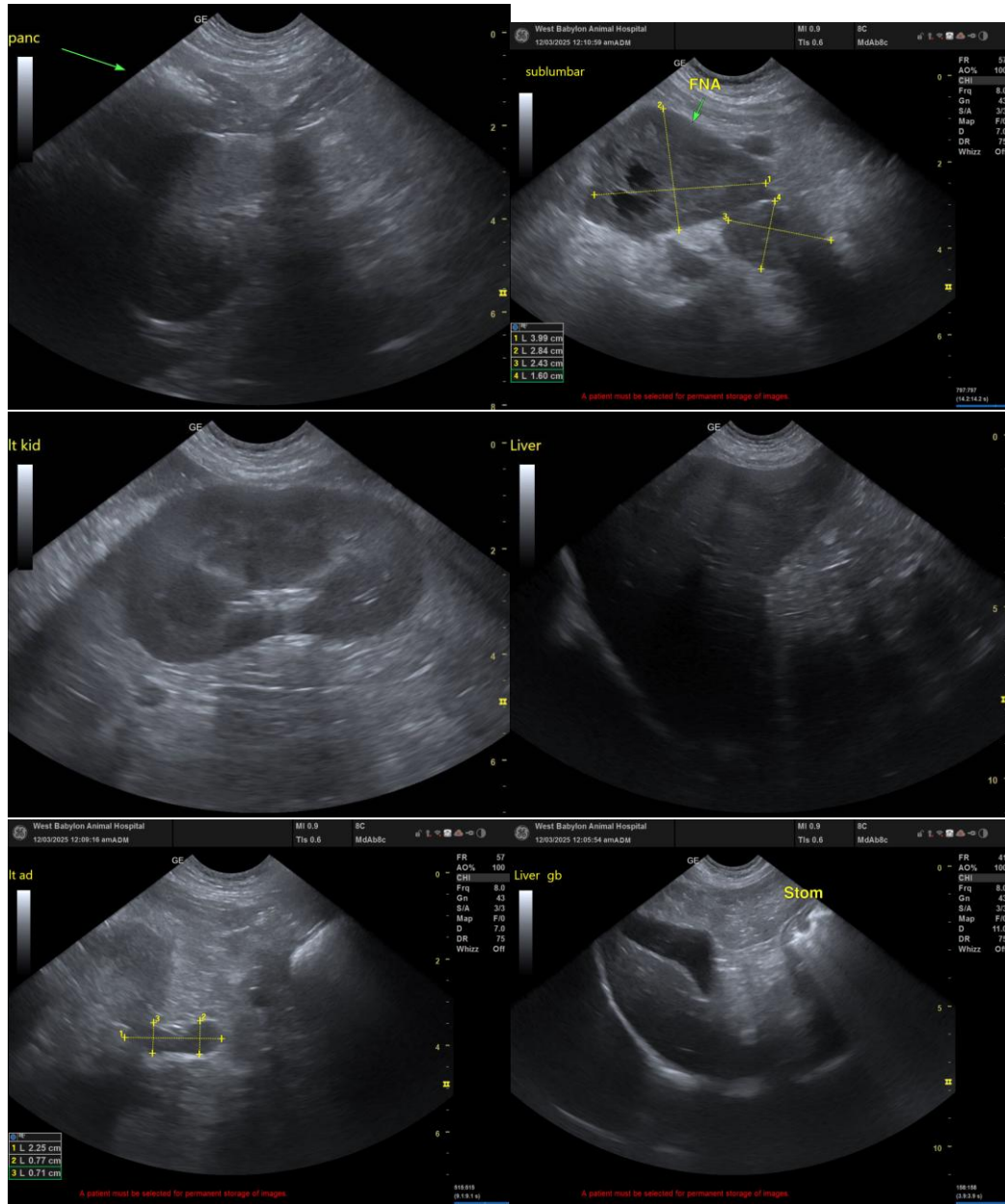
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)



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