



PATIENT

Eli Leone

PRESENTING CLINICAL SIGNS

History: Potential Right renal / Lymphoma
Abnormal PE/Chem/CBC/UA Results: ALP 11, Lymphocytes 0.96, Reticulocytes 139.0

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Pitbull Mix

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone. Mild non-uniform thickening of the urinary bladder wall was present. The ventral, apical urinary bladder wall measured 0.67 cm. Minor particulate sediment was ne.

SEX

Neutered male

The residual prostate measured 1.2 cm.

AGE

11 years

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The right kidney measured 7.1 cm in length. The right kidney revealed a solitary, mildly sized cyst was noted. The cyst was thinly wall and contained anechoic fluid. The cyst measured 2.0 cm in diameter. The left kidney measured 6.9 cm in length.

WEIGHT

50.2 lbs

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.9 x 0.61 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.9 x 0.69 cm width at the caudal pole.

IMAGING PERFORMED BY

Jessica Miller, RDMS

Spleen

HOSPITAL NAME

Westwood Regional
VH

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.

REFERRING VET

Dr. Cattiny

Liver

INVOICE

94726

The liver images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

DATE

12/20/21



PATIENT

Eli Leone

Gastrointestinal

SPECIES

Canine

The stomach was intact yet potential, mildly prominent wall layering. The stomach was primarily empty with mild luminal gas and without evidence of retained ingesta, fluid or foreign material. The ventral gastric body wall measured up to 0.7 cm.

BREED

Pitbull Mix

The small intestine exhibited segmental mild to moderate hypoechoic mural hypertrophy in the midabdominal segments with associated metabolic to paralytic ileus. The intestinal wall width in this area measured 0.7-1.0 cm in width. There was loss of discernable wall layer detail was present in the areas of thickened intestine. Additional segments of small intestine appeared to be sonographically normal with maintained 1:3 muscularis to mucosa ratio. One segment of intestine measured 4-5 cm in length. By comparison normal appearing small intestine measured 0.36 cm. Subtle evidence of reactive peri-intestinal mesentery along with intermittent, mildly prominent to hypoechoic jejunal lymph nodes were noted. An example of lymph nodes measured 5.0 x 0.84 cm. Small pockets of scant periintestinal free fluid was noted.

SEX

Neutered male

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

AGE

11 years

Pancreas

WEIGHT

50.2 lbs

The left limb, right limb, and base of the pancreas presented hypoechoic to heterogeneous echogenicity compared to adjacent omental fat. Mild asymmetrical capsule margination was present with mild variable parenchymal swelling and mild peripancreatic inflammation. No overt evidence of neoplasia.

INTERPRETED BY

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

Free Abdomen

A mildly prominent medial iliac lymph node was noted and measured 0.97 cm. This is not consistent with inflammatory or neoplastic criteria.

IMAGING PERFORMED BY

Jessica Miller, RDMS

ULTRASONOGRAPHIC FINDINGS

HOSPITAL NAME

Westwood Regional
VH

PRIMARY FINDINGS:

Bilateral, mild chronic renal changes with right renal cyst-no evidence of renal neoplastic criteria.

REFERRING VET

Dr. Cattiny

Segmentally thickened small intestine exhibiting hypoechoic, mural hypertrophy and metabolic to paralytic ileus-consistent with emerging small intestinal mural mass to masses (likely jejunal in location, potential for two separate masses possible).

Associated peri-intestinal reactive mesentery and jejunal lymphadenopathy/lymphatic hyperplasia, reactive lymphadenitis or early neoplastic/metastatic lymphadenopathy.

INVOICE

94726

SECONDARY FINDINGS:

Mild cystitis.

DATE

12/20/21



PATIENT

Eli Leone

SPECIES

Canine

BREED

Pitbull Mix

SEX

Neutered male

AGE

11 years

WEIGHT

50.2 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller, RDMS

HOSPITAL NAME

Westwood Regional
VH

REFERRING VET

Dr. Cattiny

INVOICE

94726

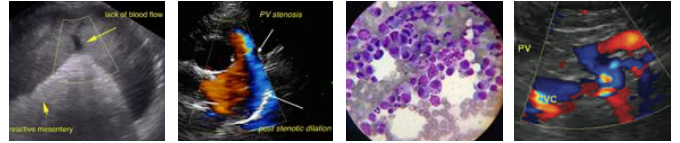
DATE

12/20/21

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Inflammatory or neoplastic etiologies are possible for the abnormal intestine although potential neoplasia i.e. lymphoma or other round cell neoplasia is favored. There is a possibility of more diffuse intestinal involvement cannot be definitively excluded. Exploratory laparotomy for gross inspection, potential resection and anastomosis of abnormal intestine and intestinal biopsies could be considered assuming no evidence of pathology on three view chest radiographs. Lymphatic biopsies are also recommended if surgery is elected.





PATIENT

Eli Leone

SPECIES

Canine

BREED

Pitbull Mix

SEX

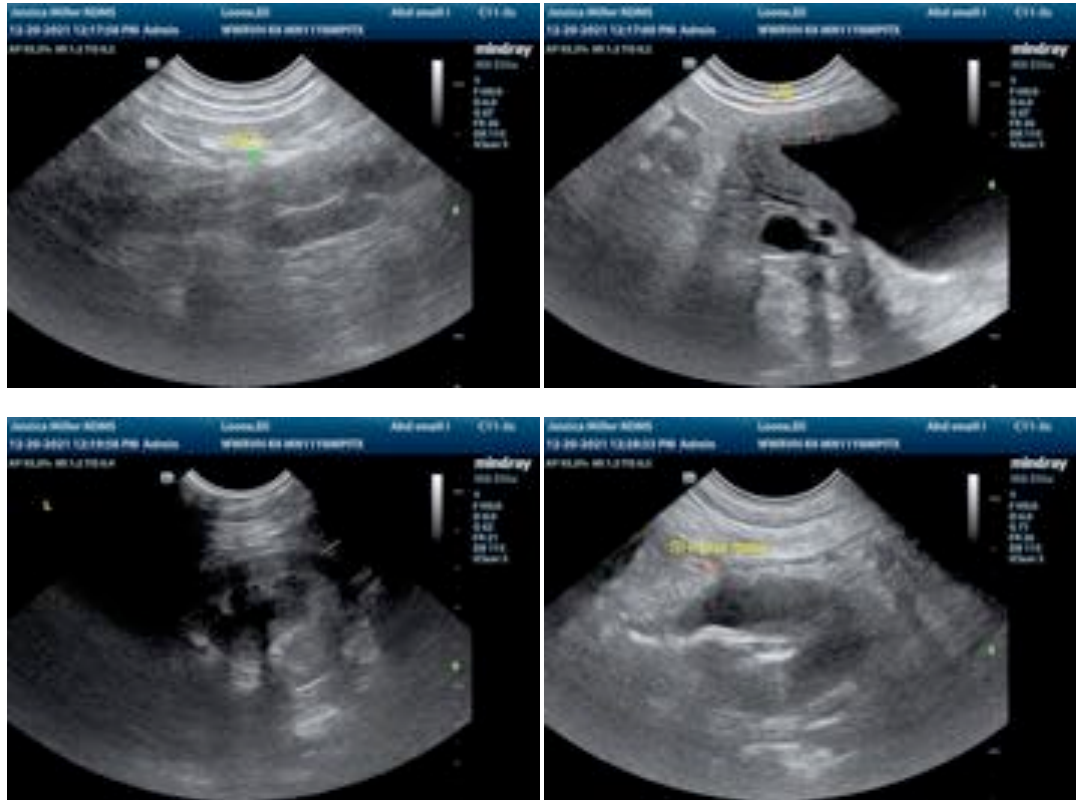
Neutered male

AGE

11 years

WEIGHT

50.2 lbs



INTERPRETED BY

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

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

IMAGING PERFORMED BY

Jessica Miller, RDMS

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)

HOSPITAL NAME

Westwood Regional
VH

info@SonoPath.com

REFERRING VET

Dr. Cattiny

INVOICE

94726

DATE

12/20/21