



PATIENT

Sadie Dierlam

SPECIES

Canine

BREED

German Shepherd

SEX

FS

AGE

9 years 2 months

WEIGHT

73 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

VCA Blairstown AH

REFERRING VET

Dr. Zeliff

INVOICE

12863

DATE

12/21/21

PRESENTING CLINICAL SIGNS

Possible mass in abdomen-free fluid on rads. No current meds.

Abnormal PE/Chem/CBC/UA Results: RBC 4.20, HCT 28.4, Hgb 10.1, Retic hgb 24.3, PLT 120, Na 141, Cl 103, ALT 314, AST 61, ALP 163

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 5.0 cm 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 was noted.

The area of the aortic trifurcation was free of pathology.

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 6.9 cm in length. The right kidney measured 6.6 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 2.4 cm length x 0.53 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 2.1 cm length x 0.47 cm width at the caudal pole.

Spleen

The spleen exhibited potential for mild generalized enlargement. Ill-defined hypoechoic to nonhomogeneous mildly expansive mass associated with the subjective caudal medial spleen, measuring 5.3 cm x 3.0 cm, was present. Evidence of regional perisplenic reactive mesentery around the ill-defined mass was noted. The remainder of the spleen exhibited primarily finely textured homogeneous parenchyma with a solitary, mildly expansive, nonhomogeneous nodule noted in the subjective cranio-lateral spleen. The nodule measured approximately 1.7 cm in diameter.

Liver/ Gallbladder

The liver exhibited subjective mild generalized enlargement with overall mild increased hepatic parenchyma echogenicity and nonuniform to subtly nodular parenchyma with moderate coarse echotexture. No overt evidence of hepatic masses was noted. The gallbladder was non-distended in size with mild, nondependent, nonorganized, hyperechoic gallbladder debris. The cystic and common bile ducts were normal.

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.



PATIENT	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.
Sadie Dierlam	
SPECIES	Normal visible colon wall layers were present with apparent formed feces in lumen.
Pancreas	
Canine	
BREED	The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.
German Shepherd	
SEX	Free Abdomen
FS	Moderate cellular peritoneal free fluid was present.
AGE	Rapid view of the heart revealed no overt evidence of pericardial effusion or evidence of pericardial metastasis in the visible window.
9 years 2 months	
WEIGHT	ULTRASONOGRAPHIC FINDINGS
73 lbs.	Primary Findings
	<ul style="list-style-type: none"> • Ill-defined hypoechoic to nonhomogeneous mass in area of the caudomedial spleen, concurrent nonhomogeneous, mildly expansive nodule in cranialateral spleen • Mild hepatomegaly exhibiting nonhomogeneous subtly nodular parenchyma • Cellular peritoneal free fluid - consistent with hemoabdomen
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The splenic mass, as well as the splenic nodule were nonspecific with considerations including hyperplasia, hematopoiesis, hematoma if evidence of trauma, granuloma, splenitis, with neoplasia such as sarcoma, round cell neoplasia, other favored. Assuming no trauma and given a lack of additional masses, the hemoabdomen is most likely secondary to the splenic mass.
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Shari Reffi, CVT	
HOSPITAL NAME	The liver was nonspecific with considerations including vacuolar hepatopathy, chronic active hepatitis, cholangiohepatitis, early fibrosis, cirrhosis, or other hepatopathy while the potential for hepatic metastasis cannot be definitively excluded. Assuming no evidence of thoracic metastasis on three view chest radiographs, laparotomy with expectation towards splenectomy, gross inspection of the liver, and hepatic biopsies is warranted. Coagulation panel is recommended prior to surgical considerations to rule out underlying coagulopathy.
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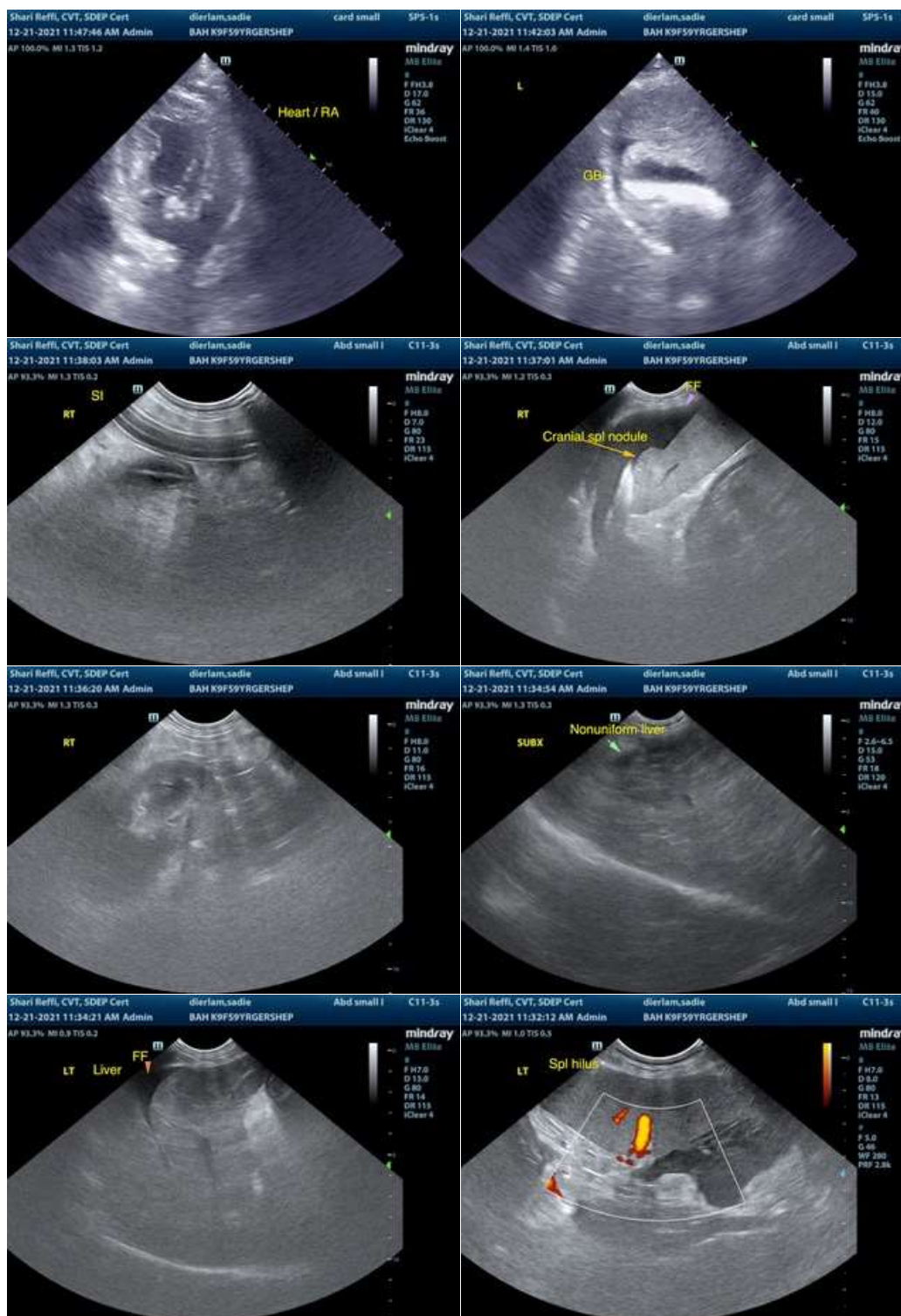
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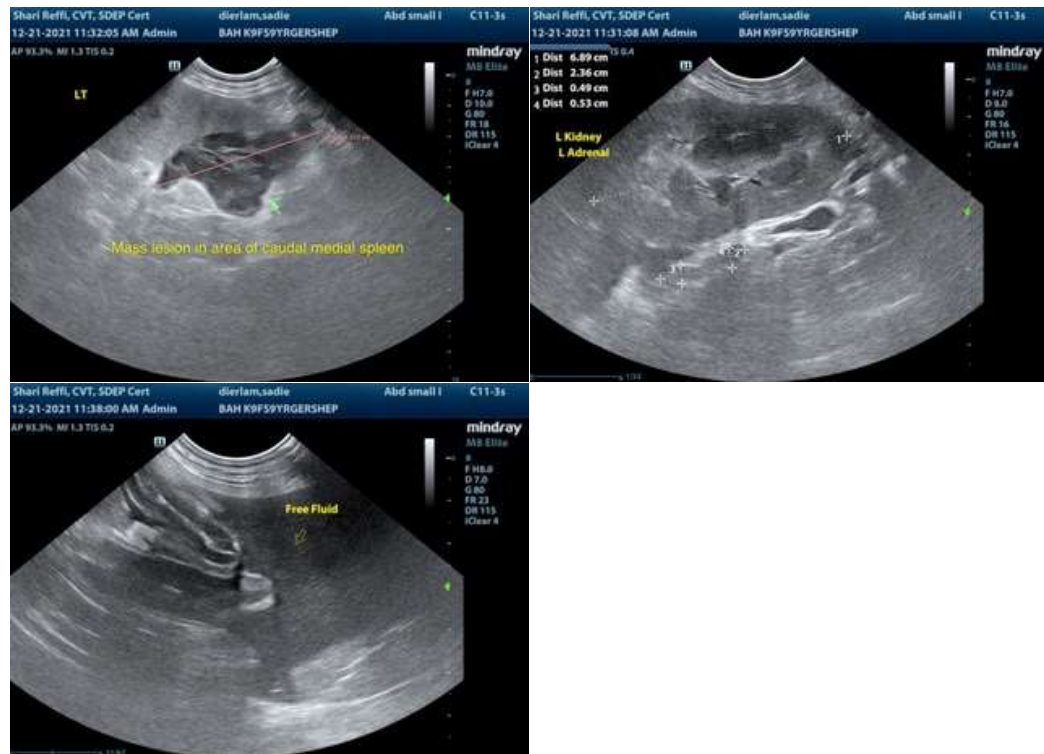
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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