



PATIENT	PRESENTING CLINICAL SIGNS
Reese Shafer	Hypoglycemic despite IV supplementation w/IVF, collapsing episode at home. Current meds: Cerenia, dextrose.
SPECIES	Abnormal PE/Chem/CBC/UA Results: Mono 0.08, HCT 62.6, Glucose 57, ALT 1164 @ 1:10 dilution, GGT 19
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Mix	Urinary System
SEX	The urinary bladder, trigone, and cystourethral junction 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.
MN	
AGE	The area of the aortic trifurcation was free of pathology.
10 years	
WEIGHT	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 6.4 cm in length. The right kidney measured 5.7 cm in length.
53 lbs.	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.80 cm width in the cranial pole and 0.94 cm width in the caudal pole. The right adrenal gland measured 0.71 cm width in the caudal pole. No evidence of adrenal neoplastic criteria was noted.
IMAGING PERFORMED BY	Spleen
Shari Reffi, CVT	The spleen was overall normal in size and contour with generalized subtle splenic parenchymal heterogeneity with intermittent, subtly hypoechoic, non-expansive parenchymal nodules. An example measured 0.90 cm in diameter.
HOSPITAL NAME	Liver/ Gallbladder
Newton Vet	The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. A solitary to potentially multiple lobulated-appearing nonhomogeneous intraparenchymal hepatic mass to possible masses was present. An example measured 3.6 cm diameter. The masses were noted in the mid and right liver although a solitary mass is possible.
REFERRING VET	
Dr. Kim	
INVOICE	
12696	
DATE	The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
12/3/21	



PATIENT

Gastrointestinal

Reese Shafer

The stomach presented intact wall layering with a normal wall layer ratio. Minor retained echogenic nonshadowing ingesta/chyme was present.

SPECIES

Canine

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.

BREED

Mix

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

SEX

MN

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. Potential left pancreatic limb nodule vs. peripancreatic lymphadenopathy in the left abdomen is possible. The potential pancreatic nodule measured 1.9 cm in diameter.

AGE

10 years

Free Abdomen

No effusion was present.

WEIGHT

53 lbs.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Liver mass to possible masses
- Heterogeneous pancreas with possible left limb nodule vs. focal peripancreatic mesenteric lymph node
- Sonographically unremarkable gastrointestinal tract with mild retained gastric ingesta / chyme
- Mild age-related renal changes
- Nonspecific subtly hypoechoic splenic nodules

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Newton Vet

The subtly hypoechoic splenic nodules may indicate benign changes such as indistinct lymphoid hyperplasia, hematopoiesis, focal splenitis, or similar. The potential for early neoplastic splenic nodules cannot be definitively excluded.

REFERRING VET

Dr. Kim

Although not definitive, there is a strong concern for primary vs. metastatic hepatic neoplasia exhibited by the intraparenchymal mass to masses. The possibility of an insulinoma involving the left pancreatic limb is of concern, although not definitive. Assuming normal clotting status, ultrasound-guided FNA of the liver mass +/- screening splenic FNA using a 25-gauged needle is warranted. Insulin: glucose ratio on same serum sample if blood glucose levels are <60 is recommended. Ultimately, abdominal CT is likely ideal for further assessment.

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SonoPath CT Services are offered at the [Blairstown Animal Hospital](#). Blairstown animal hospital is just a 30-minute drive west on route 80 from the route 80/287 interchange/Parsippany, New Jersey. More information can be found at:



PATIENT

<https://sonopath.com/resources/sonopaths-teleconsultation-services-and-sdep-certification/sonopath-ct-services>

Reese Shafer

SPECIES

Canine

BREED

Mix

SEX

MN

AGE

10 years

WEIGHT

53 lbs.

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IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Newton Vet

REFERRING VET

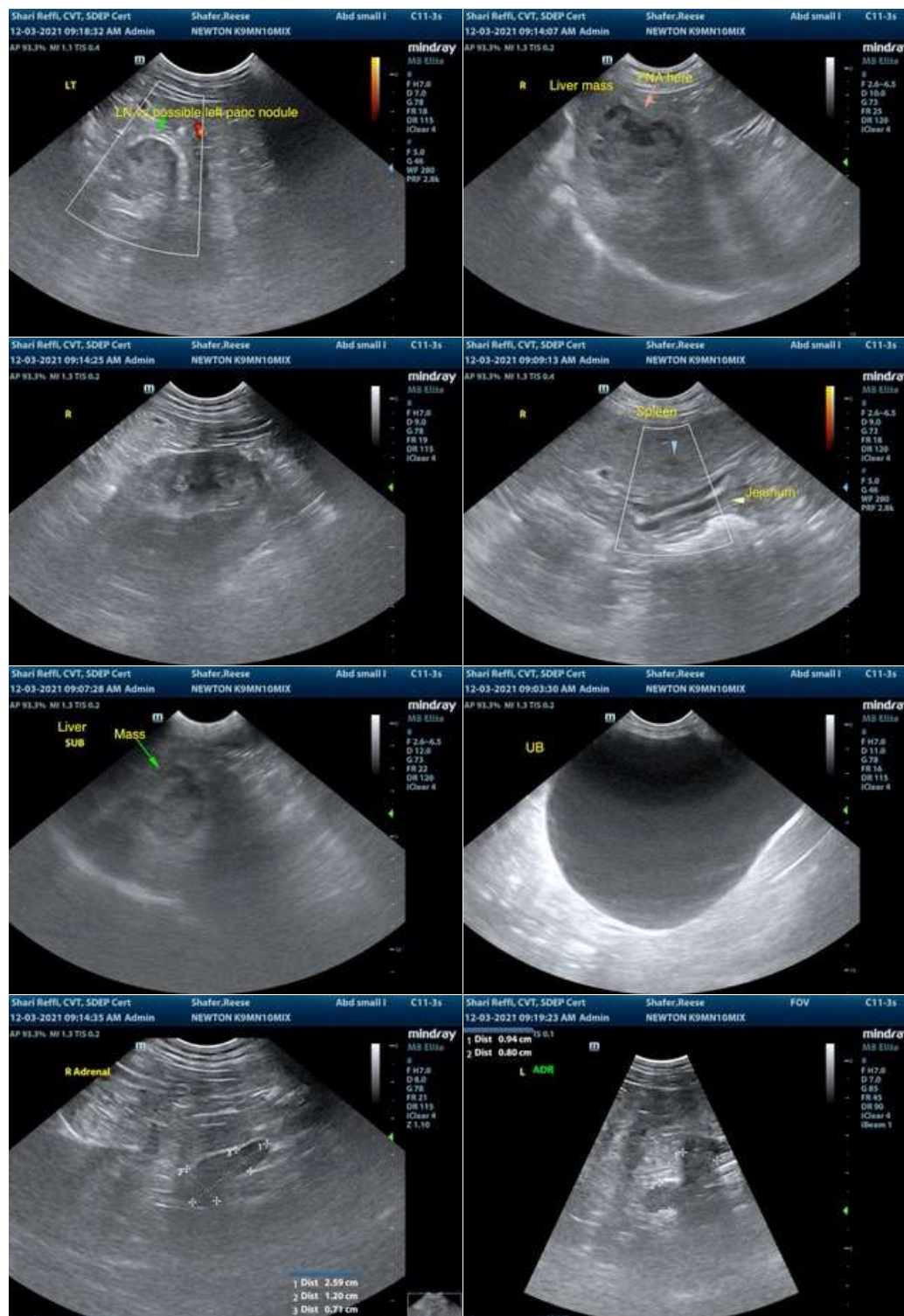
Dr. Kim

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PATIENT

Reese Shafer

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Canine

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**IMAGING
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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