



**PATIENT PRESENTING CLINICAL SIGNS**

Penny Jones Large infiltrative mass on hind leg - Owner considering removal. Recommended staging prior to removal (previous FNA revealed only fat, but suspect liposarcoma). Recently diagnosed with small MCT on ventral chest as well. BUN 34 (9-31), Creatinine 1.5 (0.5-1.5), otherwise WNL done 5/22. Chest radiographs pending.

**SPECIES**

Canine Abnormal PE/Chem/CBC/UA Results:

**BREED**

Labrador Retriever

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**SEX**

FS

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 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.

**AGE**

9yr

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 7.4 cm in length. The right kidney measured 8.5 cm in length

**WEIGHT**

120lb

The area of the aortic trifurcation was free of pathology.

A focal solitary medial iliac lymph node was present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5) and is not consistent with inflammatory or neoplastic criteria. An example of a lymph node measured 2.3 cm x 0.48 cm.

**INTERPRETED BY**

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

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.77 cm width at the caudal pole and 0.73 cm width at the cranial pole. The right adrenal gland was not definitively visualized given patient size and confirmation.

**IMAGING PERFORMED BY**

Pamela Harrigan, RDCS

**Spleen**

The spleen exhibited overall normal size with discrete hyperechoic parenchyma consistent with previous splenic infarct. Regional mid to cranial asymmetric capsule contour was present. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

**HOSPITAL NAME**

Barnstable Animal Hospital

**Liver**

**REFERRING VET**

Dr. McCartney

The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content and mild echogenic non-organized debris. No evidence of gallbladder or peripheral gallbladder inflammation was present. The cystic and common bile ducts were normal.

**INVOICE**

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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.



**PATIENT**

Penny Jones

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.

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

**SPECIES**

Canine

**Pancreas**

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 was evident.

**BREED**

Labrador Retriever

**Free Abdomen**

No omental masses or peritoneal effusion was present.

**SEX**

FS

**ULTRASONOGRAPHIC FINDINGS**

- Mild age-related renal changes
- Probable previous splenic infarct-benign
- Minor gallbladder debris-incident

**AGE**

9yr

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Overall, no overt evidence of significant abdominal visceral pathology with largely mild age-related changes present. No evidence of intra-abdominal primary or metastatic neoplastic criteria was noted.

**WEIGHT**

120lb

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Pamela Harrigan, RDCS

**HOSPITAL NAME**

Barnstable Animal  
 Hospital

**REFERRING VET**

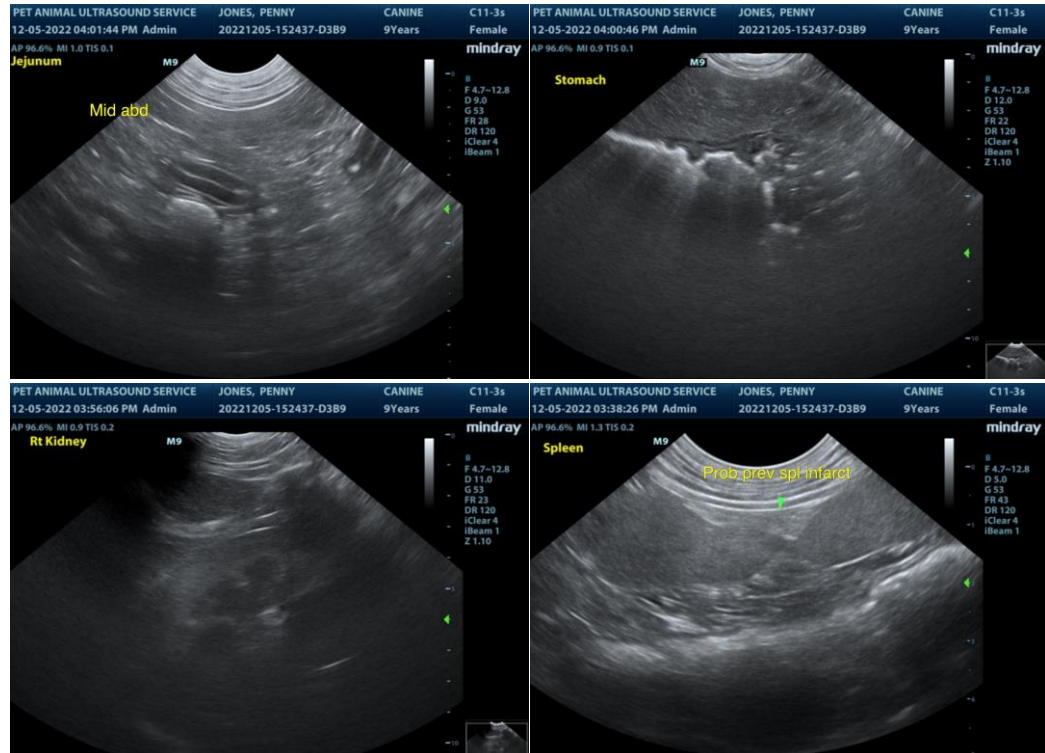
Dr. McCartney

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**PATIENT**

Penny Jones

**SPECIES**

Canine

**BREED**

Labrador Retriever

**SEX**

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**AGE**

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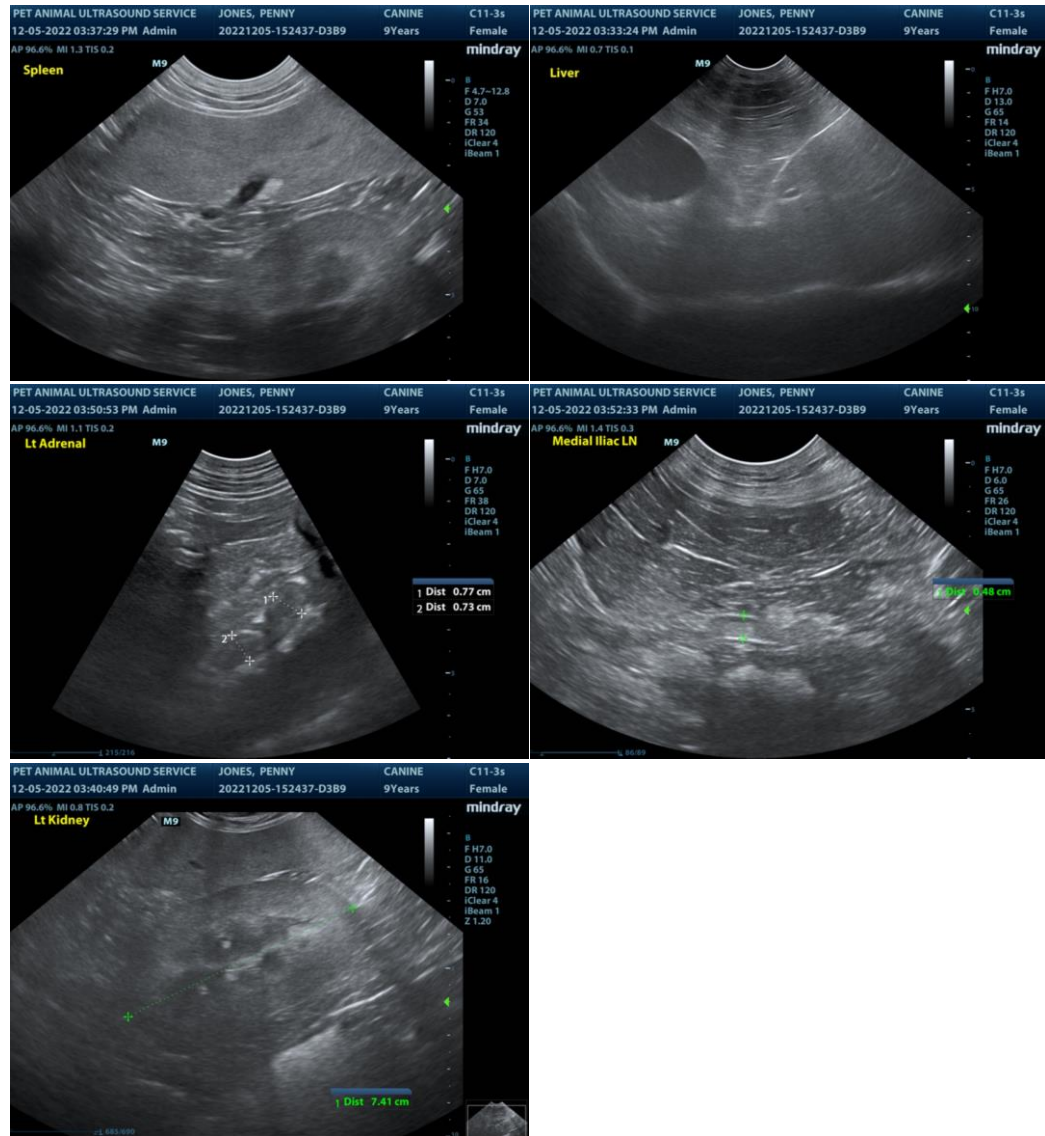
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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 info@SonoPath.com