



**PATIENT**

Izzy Wright

**PRESENTING CLINICAL SIGNS**

vomiting, suspect fb

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of – 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.

**BREED**

Bseagle X

The area of the aortic trifurcation was free of pathology.

**SEX**

Spayed Female

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 5.2 cm. The right kidney measured 4.7 cm.

**AGE**

1 Year

**Adrenal Glands**

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.43 cm at the cranial pole and 0.56 cm at the caudal pole and 0.53 cm at the caudal pole.

**WEIGHT**

39.5 Pounds

**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.

**INTERPRETED BY**

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

**Liver**

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. Very minor retained fluid. Gastric body wall measured 0.30 cm. No evidence of retained gastric ingesta or foreign material.

**REFERRING VET**

Dr. Maniar

The visualized small intestine exhibited intact wall layering with maintained 1:3 muscularis/mucosa ratio. No evidence of small intestinal mechanical/metabolic ileus or overt foreign material. Duodenum wall measured 0.33 cm. Jejunum wall measured 0.33 cm.

**INVOICE**

33275

The visualized colon was without overt pathology.

**Pancreas**

Sonographic assessment of the pancreas was limited owing to the intraabdominal mass and regional peripancreatic omental artifact.

**DATE**

12/6/21



**PATIENT**

**Free Abdomen**

Izzy Wright

Large, asymmetrically marginated, non-homogeneous, focally cystic to cavitated mass occupying the majority of the mid abdomen was present. The mass measured approximately 9.0 cm x 6.0 cm. Associated peripheral reactive mesentery noted along with small pockets of scant free fluid.

**SPECIES**

Canine

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

Bseagle X

- Unspecified abdominal mass
- Associated regional reactive mesentery and small pockets of scant peritoneal free fluid
- Overtly normal gastrointestinal tract, no evidence of mechanical/metabolic ileus or obvious foreign material.

**SEX**

Spayed Female

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

1 Year

The etiology or origin of the unspecified intestinal mass was not definitive. Considerations may include neoplasia, granuloma, consolidated abscess, or other. Assuming normal clotting status, ultrasound guided FNA of the unspecified abdominal mass warranted for screening cytology. Abdominal CT would be ideal for further assessment as well as potential surgical planning. Continued as needed gastrointestinal support is recommended. 3-view chest radiographs suggested to assess for concurrent thoracic pathology.

**WEIGHT**

39.5 Pounds

**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:

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

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**HOSPITAL NAME**

Rockaway AH



**REFERRING VET**

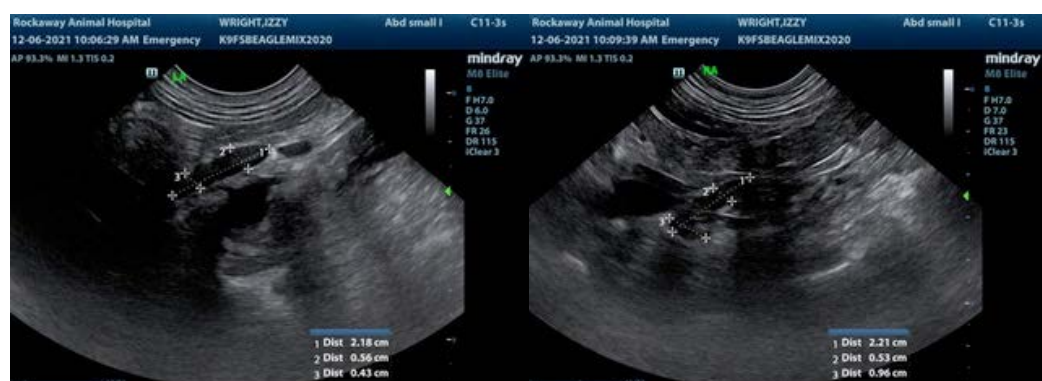
Dr. Maniar

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**PATIENT**

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**SPECIES**

Canine

**BREED**

Bseagle X

**SEX**

Spayed Female

**AGE**

1 Year

**WEIGHT**

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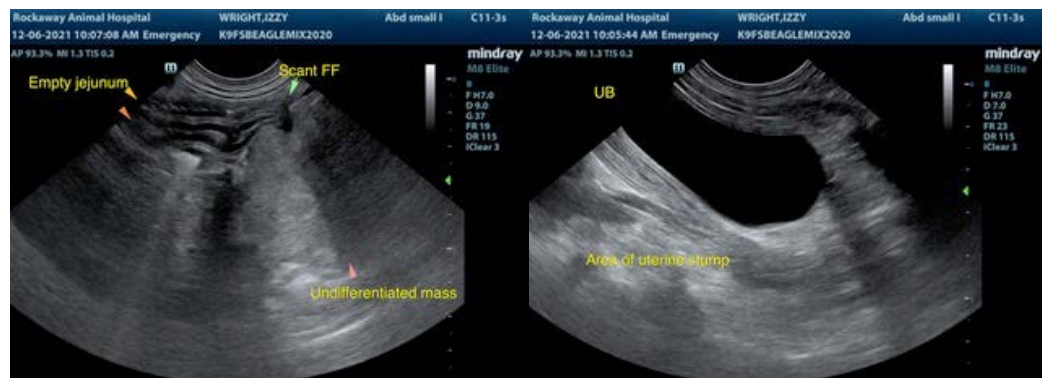
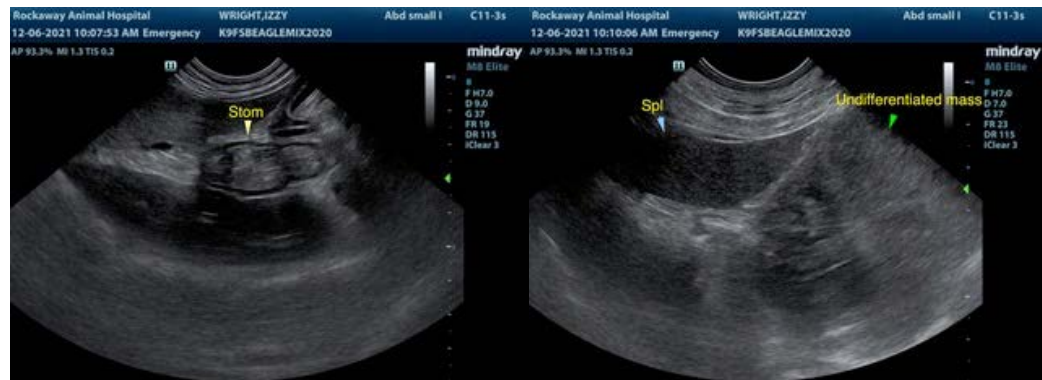
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**PATIENT**

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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.

**SPECIES**

Canine

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.

**BREED**

Bseagle X

**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
info@SonoPath.com

**SEX**

Spayed Female

**AGE**

1 Year

**WEIGHT**

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