



PATIENT	PRESENTING CLINICAL SIGNS
Sadie Acosta	During an exam at the family veterinarian, pendulous abdomen was noticed, x-rays revealed possible hepatic mass (see invoice 35703).
SPECIES	Abnormal PE/Chem/CBC/UA Results: High AST 105 (15-66) High ALT 627 (12-118) High Alk Phosphatase 520 (5-131) Normal GGTP 12 and Total Bilirubin 0.2 Leukocytosis (17), with neutrophilia (13,000) and monocytosis (1,190). Low hemoglobin 11.4 (12.1-20.3 g/dL), with normal RBC 5.1 (4.8-9.3 106/mL) and HCT 37 (36-60 %)
Canine	
BREED	
Shar Pei	
SEX	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
FS	Urinary System
AGE	The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.
12 years	
WEIGHT	No evidence of pathology in the area of the aortic trifurcation.
58 lbs.	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 5.6 cm in length. The right kidney measured 6.1 cm in length.
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was overtly normal in size, position and shape. The left adrenal gland measured 0.64 cm width at the caudal pole. The right adrenal gland was indistinctly visualized without overt pathology subjectively measuring 0.62 cm width at the caudal pole.
IMAGING PERFORMED BY	Spleen
Dr. Suci	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.
HOSPITAL NAME	Liver/ Gallbladder
Animal Clinic of Queens	The liver presented generalized marked hepatomegaly exhibiting significant nonhomogeneous to remodeled parenchyma and indistinct portal vascular borders. A large, caudally expanding, mixed echogenic to cystic / cavitated hepatic mass was present and measured at least 12.0 cm in diameter,
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10437	
DATE	
12/7/25	



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but likely larger as the entire mass would not fit into a single viewing window. A separate, hepatic intraparenchymal cyst was noted dorsal to the gallbladder and measured 3.7 cm diameter. The gallbladder was non-distended in size containing primarily anechoic content with mild, congealed, hyperechoic gallbladder debris in the area of the gallbladder neck. The common bile duct was not definitively visualized.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of retained ingesta, fluid, or foreign material.

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.

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 were evident.

Free Abdomen

Increased perihepatic omental echogenicity and mild volume, primarily perihepatic, effusion were present. A solitary, irregular, hypoechoic suspected perihepatic lymph node was present, measuring ~2.5 cm in diameter. Potential for omental or pancreatic lesion not excluded.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Marked hepatomegaly exhibiting significant nonhomogeneous parenchyma, caudally expanding liver mass, and separate intraparenchymal cyst
- Nonorganized mild gallbladder debris (non mucocele)
- Perihepatic hyperechoic omentum and suspect irregular enlarged hypoechoic perihepatic mesenteric lymph node
- Mild volume perihepatic effusion
- Sonographically normal spleen

Secondary Findings

- Age-related renal changes



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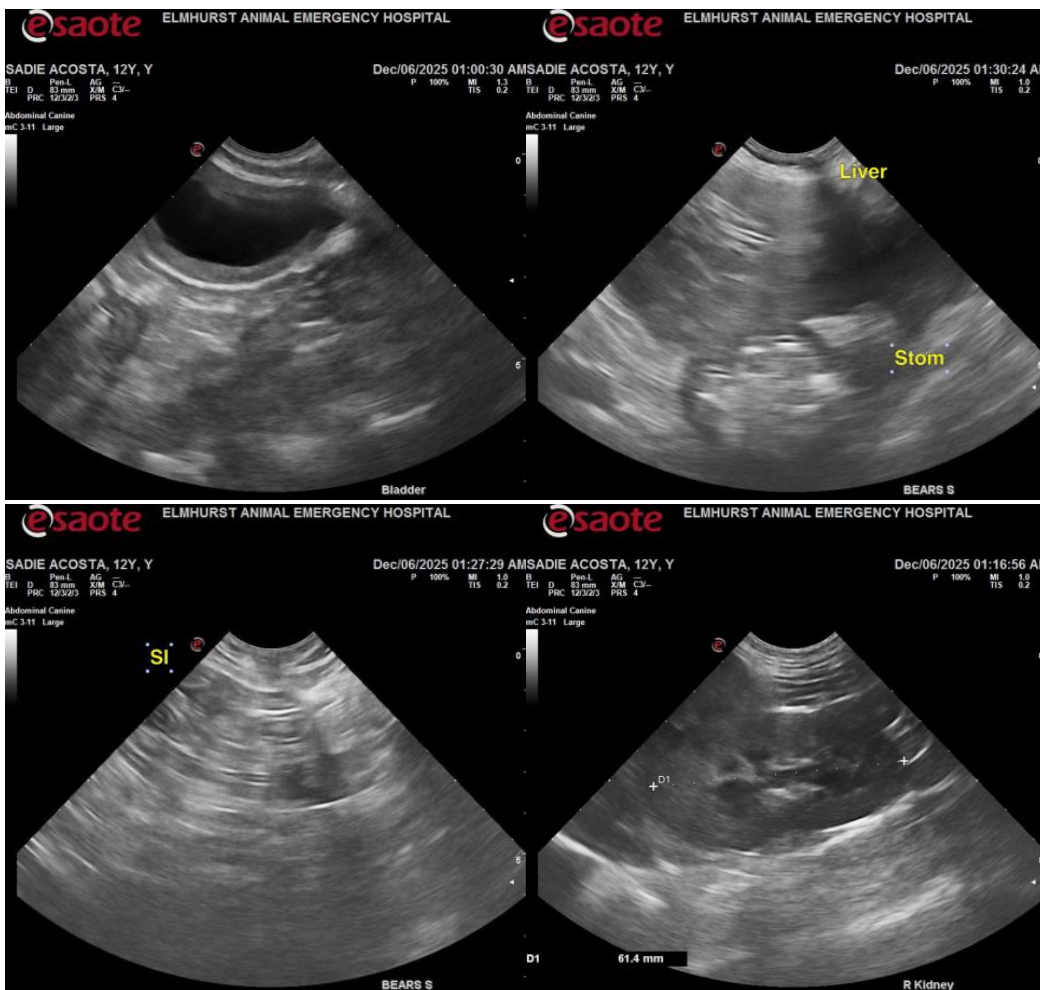
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although sampling is required for further clarification, the hepatic mass is consistent with neoplastic criteria with high suspicion for potential diffuse hepatic neoplasia and regional lymphatic metastasis vs. potential perihepatic omental seeding.





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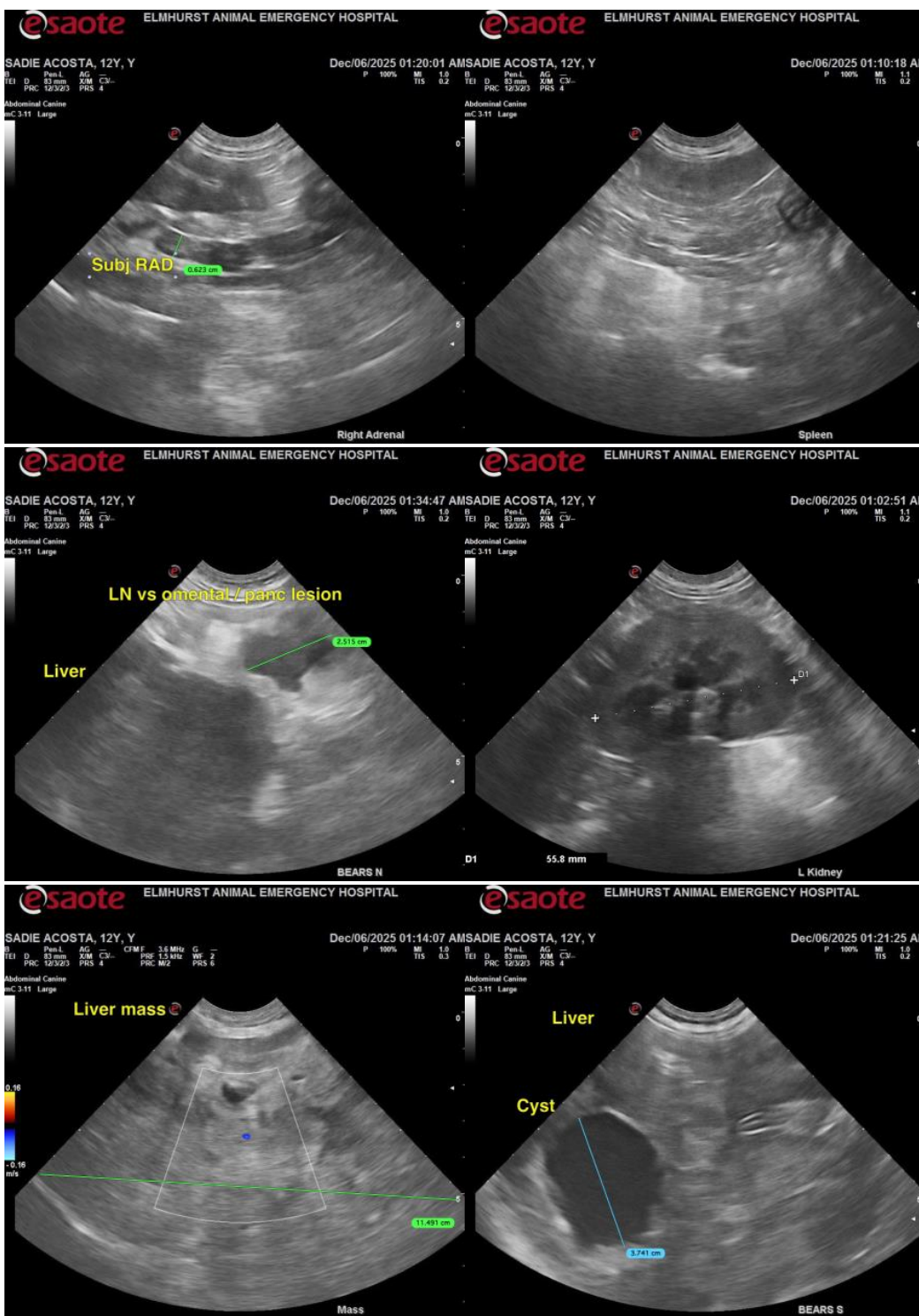
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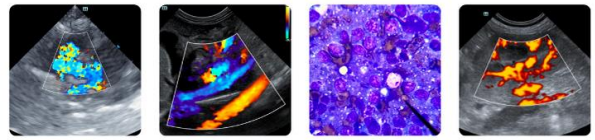
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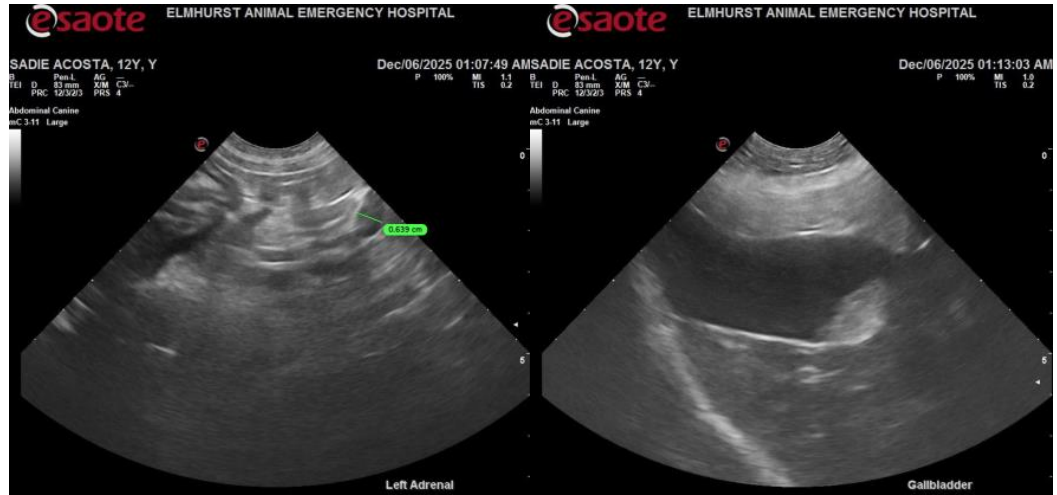
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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