



PATIENT PRESENTING CLINICAL SIGNS

Lola Lewis Elevated liver values, icteric, not eating.
 Medication: Carprofen, Gabapentin

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Lab Mix

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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.

SEX

FS

The area of the aortic trifurcation was free of pathology.

AGE

2009

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 6.1 cm in length. The right kidney measured 6.8 cm in length.

WEIGHT

64

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.3 cm length x 0.91 cm width at the caudal pole. The right adrenal gland was not definitively visualized owing to regional periadrenal artifact.

INTERPRETED BY

R. McKenzie Daniel,
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 (Canine and Feline)

Spleen

The spleen was mildly enlarged with areas of capsule asymmetry and generalized mild nonhomogeneous parenchyma exhibiting discrete nondisruptive hypoechoic nodular changes. Normal splenic vascularity was noted.

IMAGING PERFORMED BY
 Rebekah Jakum, CVT
 ARDMS/RVT

Liver/ Gallbladder

HOSPITAL NAME

Mill Pond VC

The liver was moderate to markedly enlarged exhibiting asymmetrical hepatic contour and hypoechoic to nodular parenchyma with variably expansive lobar swelling to indistinct masses. The gallbladder was non-distended in size containing anechoic content with mild echogenic gallbladder debris. The gallbladder was not consistent with a gallbladder mucocele. The cystic and common bile ducts were normal.

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Gastrointestinal

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The visualized gastric walls were sonographically normal. Moderate retained echogenic nonshadowing fluid / chyme was present with luminal gas.

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2/10/23

The small intestine exhibited segmental intact sonographically normal wall layering along with segmental thickened intestine exhibiting indistinct wall layer detail. The mucosa exhibited mildly decreased echogenicity with occasional mucosal speckling. A segmental to diffuse ileus pattern



PATIENT consisting of mild fluid accumulation in the intestinal lumen was present without obstruction or foreign material.

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

SPECIES *Pancreas*

Canine 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.

BREED

Lab Mix *Free Abdomen*

No overt or significant omental lymphadenopathy was present. Generalized hyperechoic omentum with scant to mild volume peritoneal free fluid was present.

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ULTRASONOGRAPHIC FINDINGS

Primary Findings

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- Irregularly enlarged hypoechoic nodular liver with indistinct lobar swelling to masses
- Mild splenomegaly exhibiting nonhomogeneous discretely nodular parenchyma
- Gastroenteritis pattern with segmentally thickened intestine and gastric hypomotility
- Diffuse hyperechoic omentum and scant to mild volume peritoneal free fluid

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Secondary Findings

- Mild chronic renal changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although sampling is required for further assessment, the liver is most consistent with infiltrative neoplastic criteria with acute nonneoplastic hepatopathy i.e., nonspecific hepatitis, vacuolar hepatopathy, or similar possible yet thought less likely.

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 ARDMS/RVT

Concern for multicentric neoplasia involving the spleen and segmental intestinal tract with the possibility of omental seeding, i.e., carcinomatosis, lymphomatosis, or similar with mild volume peritoneal effusion secondary to portal hypertension or lymphatic obstruction is possible.

HOSPITAL NAME

Mill Pond VC

Further assessment may include hepatic +/- splenic FNA cytology, assuming normal clotting status, with potential for oncology consult and chemotherapeutic intervention. This case appears to be nonsurgical. Extremely guarded to unfavorable prognosis is indicated.

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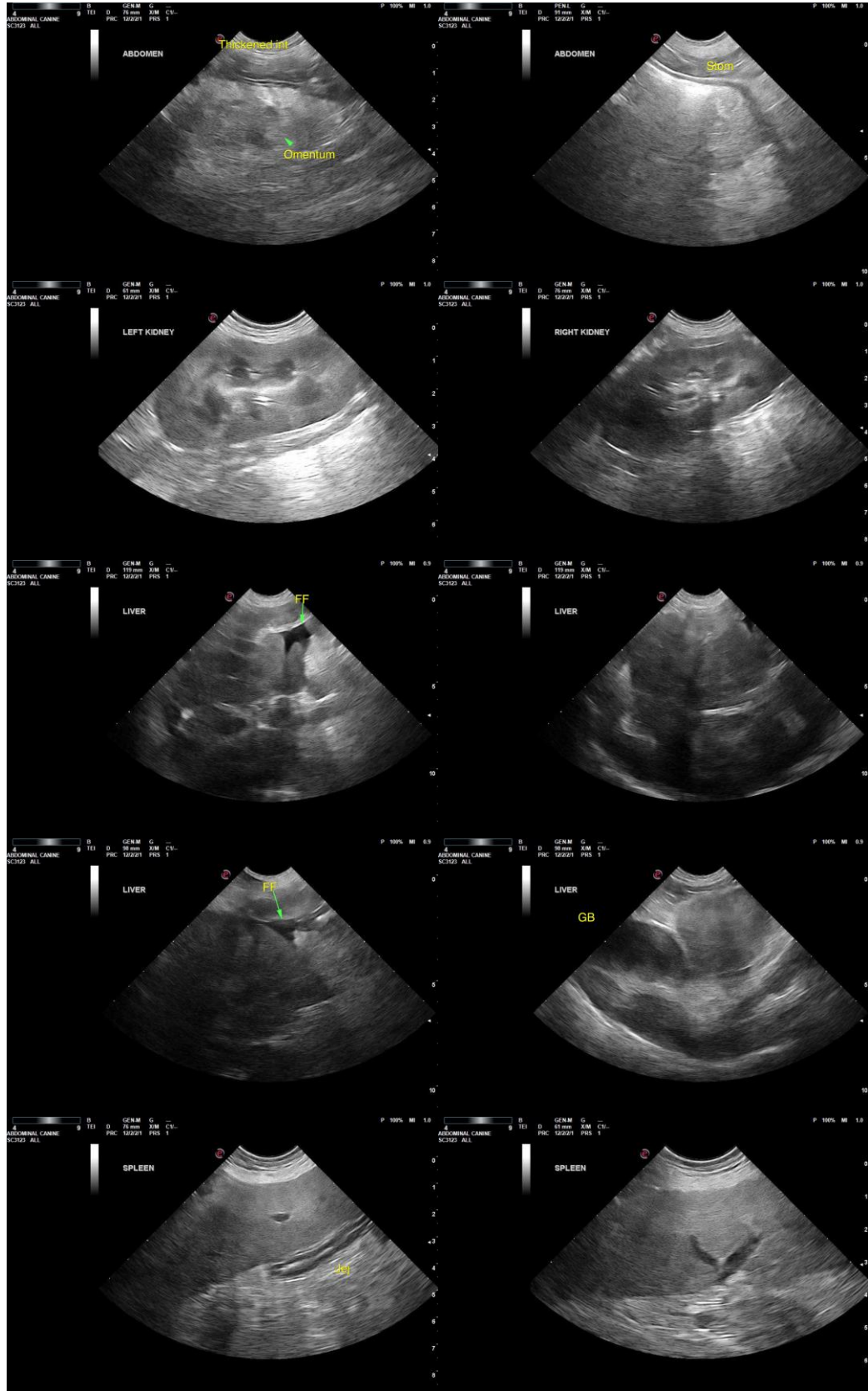
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Canine

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.

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Lab Mix

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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