



PATIENT

Picaboo Godin

PRESENTING CLINICAL SIGNS

Elevated liver enzymes especially GGT (very high).

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Boston Terrier

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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

11

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. Cortical to corticomedullary cysts were present. An example of a left kidney cyst measured 1.5 cm diameter. Nonobstructive areas of medullary mineralization were present. An example of a right kidney cyst measured 0.89 cm diameter. No evidence of pelvic dilation was present. The left kidney measured 5.3 cm in length. The right kidney measured 5.6 cm in length.

WEIGHT

12.8

INTERPRETED BY

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

Adrenal Glands

Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. Mildly prominent caudal left adrenal gland was present, yet maintained symmetrical capsule contour without evidence of nodular changes or parenchymal escape. The left adrenal gland measured 0.63 cm width in the cranial pole and 0.52 cm width in the caudal pole. The right adrenal gland measured 0.6 cm width in the cranial pole and 0.53 cm width in the caudal pole.

IMAGING PERFORMED BY

Dave Stasiuk RDMS,
RDMS

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.

HOSPITAL NAME

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Dr. Lisa Hamill

Liver/ Gallbladder

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 mild, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation. The cystic and common bile ducts were normal.

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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.



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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.

SPECIES

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

Pancreas

BREED

Boston Terrier

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

SEX

FS

Unspecified mixed echogenic to nonhomogeneous mass lesion was present in the left cranial abdomen measuring approximately 5.0-6.0 cm in diameter. The mass lesion did not appear to be connected to the cranial spleen and was not obviously associated with the left cranial lateral liver, although this potential cannot be definitively excluded. No evidence of lymphadenopathy or peritoneal effusion was noted.

AGE

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WEIGHT

12.8

ULTRASONOGRAPHIC FINDINGS

- Bilateral chronic renal changes with mild nonobstructive medullary mineralization and cortical / corticomedullary cysts
- Mildly prominent caudal left adrenal gland - nonspecific yet not overtly consistent with neoplastic criteria, patient variant, mild adenomatous change or being hyperplasia suspected
- Unspecified mass in left cranial abdomen
- Overtly normal liver
- Mild gallbladder debris (non-mucocele)

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although sampling is required for further clarification, the mass is suggestive of neoplastic criteria although not definitive with additional considerations including nonspecific granuloma, consolidated abscess, or other. Assuming normal clotting status, ultrasound guided FNA of the unspecified mass if accessible is warranted for screening cytology. If surgical options are a potential in this case, further assessment, as well as surgical planning with abdominal CT is likely ideal.

IMAGING PERFORMED BY

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RDCS

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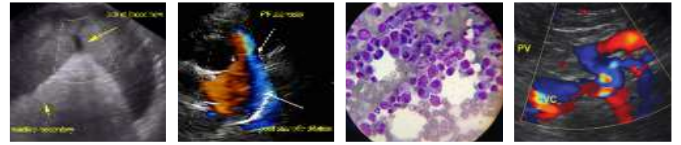
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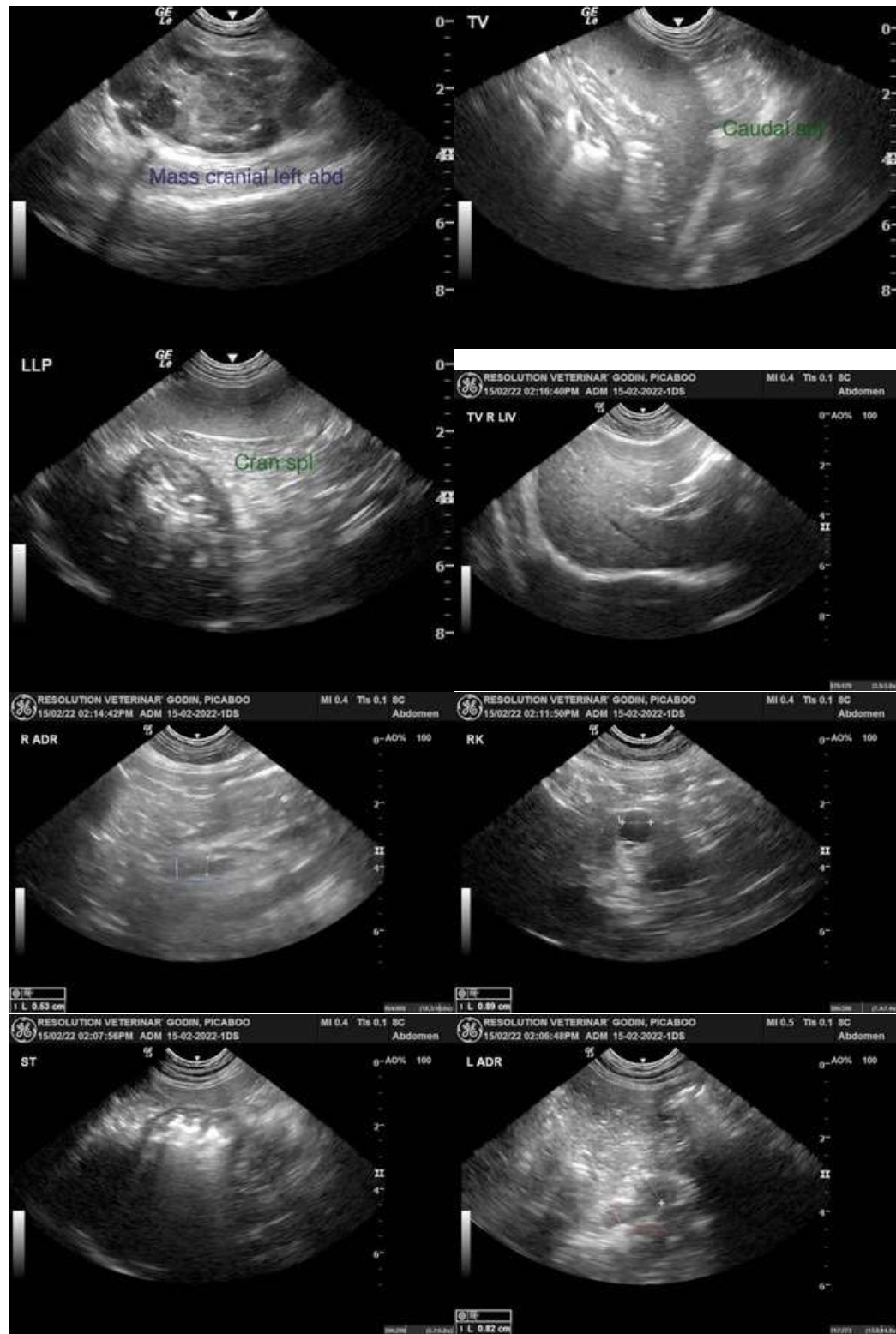
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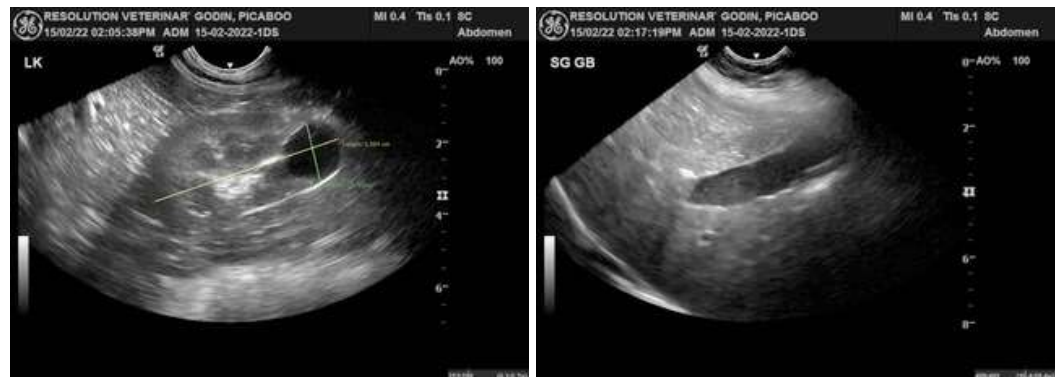
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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