



PATIENT

Jasmine Litvinski

SPECIES

Canine

BREED

German Shepherd

SEX

F/S

AGE

13 years

WEIGHT

83 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Glen Rock Veterinary
Hospital

REFERRING VET

Dr. Scott Stekler

INVOICE

16174

DATE

2/15/23

PRESENTING CLINICAL SIGNS

Patient presents for decreased appetite, regenerative anemia, and suspect splenic mass vs. other.
Current meds: PPA 50 mgs BID.

Abnormal PE/Chem/CBC/UA Results: ALT 170, Alk. Phos. 141, Na/K ratio 39, RBC 3.3, HGB 8.0, HCT 24, NRBC 15, PLTs 74, neutrophils 14,250, and lymphocytes 450.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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.

No overt medial Iliac or sublumbar lymphadenopathy/masses were noted.

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 7.1 cm in length. The right kidney measured 6.7 cm in length.

Adrenal Glands

The left adrenal gland was overt normal in size, position, and shape measuring 0.61 cm width at the caudal pole. The right adrenal gland was not definitively visualized.

Spleen

The spleen exhibited mild generalized enlargement most notable in the caudal spleen with the caudal spleen measuring approximately 6.0 cm in diameter. Asymmetrical contour with nonhomogeneous, variably hypoechoic splenic parenchyma was present with discrete parenchyma nodular changes. Overtly normal splenic vascularity was noted.

Liver/ Gallbladder

The liver exhibited potential for mild enlargement. 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 containing primarily anechoic luminal content with mild nonorganized, echogenic debris primarily along the inner luminal surface. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.



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Gastrointestinal

The stomach presented mild wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. The stomach was empty. The gastric body wall width measured 0.65 cm.

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

Mild regional perisplenic hyperechoic omentum was present. No evidence of peritoneal free fluid was noted. No omental lymphadenopathy was visualized.

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

ULTRASONOGRAPHIC FINDINGS

- Irregular nonhomogeneous hypoechoic spleen with caudal splenomegaly / caudal mass lesion
- Low-grade hepatopathy - nonspecific, subjectively benign
- Minor gallbladder debris (non-mucocele)
- Mild chronic renal changes
- Overtly normal gastrointestinal tract, suspect mild gastritis

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The spleen was nonspecific with considerations including irregular to variable hyperplasia, hematopoiesis, splenitis, and breed-associated hypersplenism, although neoplastic criteria is favored. No overt evidence of intraabdominal or cardiac metastasis was noted.

Assuming no evidence of pathology on three-view chest radiographs, splenectomy with gross inspection of the gastrointestinal tract may be considered. However, a guarded prognosis pending splenic histopathology, if a splenectomy is elected, is indicated.



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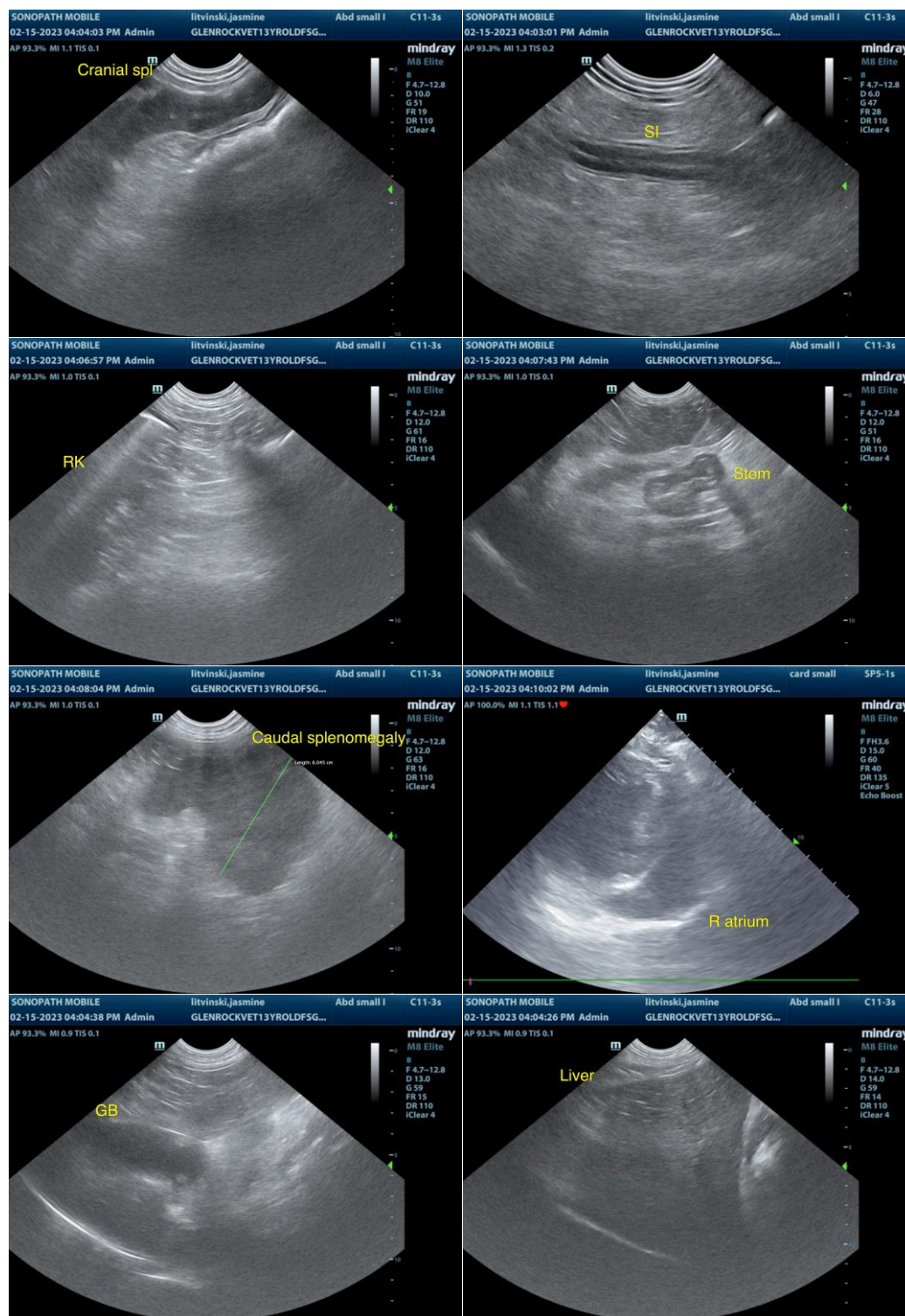
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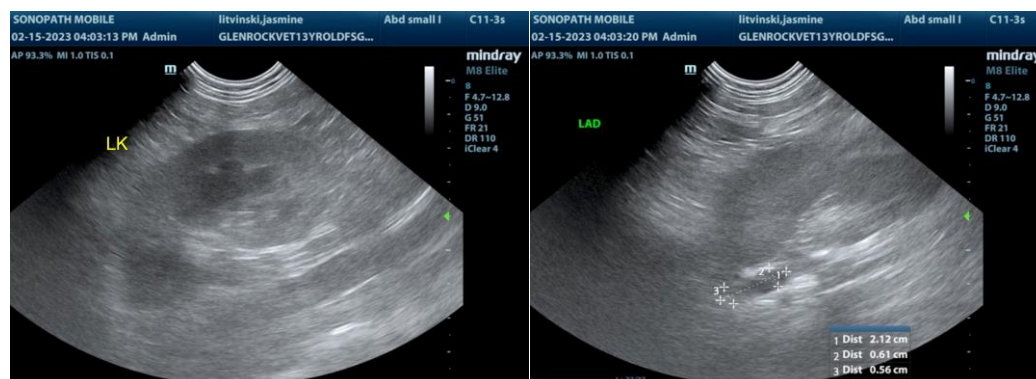
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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