



**PATIENT PRESENTING CLINICAL SIGNS**

Koko Keyes History: Frequent urinary accidents, inappetence.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Abdomen tense with palpation. Rads showed multiple ball like objects and some mineral densities. Labs fairly unremarkable, AST 72.

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED** *Urinary System*

Rottweiler

The urinary bladder, trigone, cystourethral junction exhibited normal tone. Mild nonuniform thickening of the urinary bladder wall was present. Multiple hyperechoic focal echogenicities with distal acoustic shadowing were present in the dependent lumen. The echogenicities were small. An example of an echogenicity measured 0.47 cm width. Concurrent, nondependent particulate sediment was also present and anechoic urine. The proximal urethra was not definitively visualized.

**SEX**

Spayed Female

The right kidney exhibited asymmetrical margination and cortical hypertrophy. Marked loss of corticomedullary border demarcation was noted with areas of medullary mineral. No evidence of concurrent right kidney hydronephrosis. The right kidney measured 7.3 cm.

**AGE**

7 Years

The left kidney exhibited moderate to emerging severe hydronephrosis with fluid distention, extending into the lateral diverticuli. The left ureter exhibited fluid dilation exiting the left kidney, extending caudally. The left kidney measured 9.3 cm.

**WEIGHT**

80 Lbs.

**Adrenal Glands**

The left adrenal gland was indistinctly visualized, subjectively measuring 0.53 cm at the caudal pole.

**INTERPRETED BY**

The right adrenal gland was not definitively visualized.

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

**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.

**IMAGING PERFORMED BY**

Rachel Runnells, RVT

**Liver**

The liver was normal in size and contour. Non-uniform decreased hepatic echogenicity was present with moderate coarse echotexture and increased prominence of portal vascular borders.

**HOSPITAL NAME**

SVS Imaging KC

**REFERRING VET**

Dr. Breinin

**Gastrointestinal**

The stomach exhibited generalized mild to moderate wall thickening, exhibiting intact indistinct wall layering. The gastric body wall measured 0.75 cm. The stomach contained a moderate amount of retained anechoic fluid.

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The visualized small intestine was sonographically normal.

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



**PATIENT**

**Pancreas**

Koko Keyes

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 was evident.

**SPECIES**

Canine

**Free Abdomen**

**BREED**

Rottweiler

Large, expansive mass, occupying the cranial mid and caudal liver to the level of the urinary bladder, was present. The mass measured 7-8 cm in diameter, but larger, as the entire mass would not fit into a single viewing window. The mass exhibited primarily hypoechoic to mildly nonhomogeneous parenchyma. Regional reactive mesentery was noted around the mass. Potential for small pockets of scant free fluid.

**SEX**

Spayed Female

- Urinary bladder calculi
- Moderate to severe left kidney hydronephrosis with concurrent left hydroureter- consistent with left ureter obstruction
- Right kidney, moderate to marked nonspecific chronic renal changes- no evidence of concurrent right kidney hydronephrosis
- Expansive, mass, occupying the majority of cranial mid and caudal liver, extending to the level of urinary bladder
- Thickened stomach, exhibiting hypomotility

**AGE**

7 Years

**WEIGHT**

80 Lbs.

**ULTRASONOGRAPHIC FINDINGS**

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The origin of the mass was not definitive, yet the mass most likely suggests neoplastic criteria. The obstructive left ureter may be secondary to the unspecified mass, although nonobstructive calculi around the urinary bladder cannot be definitively excluded. Assuming normal clotting status, ultrasound guided FNA of the unspecified mass could be considered for screening cytology and potential further clarification. Abdominal CT likely ideal given this presentation. Very guarded to likely unfavorable long term prognosis.

**IMAGING PERFORMED BY**

Rachel Runnells, RVT

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**PATIENT**

Koko Keyes

**SPECIES**

Canine

**BREED**

Rottweiler

**SEX**

Spayed Female

**AGE**

7 Years

**WEIGHT**

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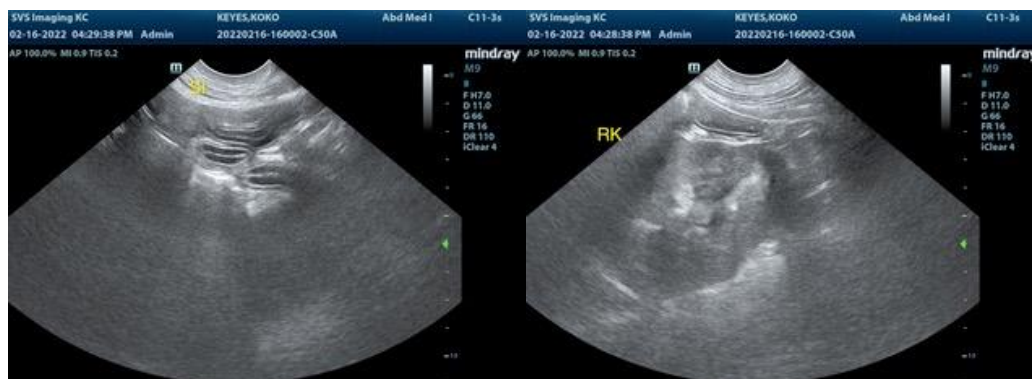
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**PATIENT**

Koko Keyes

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**

Rottweiler

**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
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**SEX**

Spayed Female

**AGE**

7 Years

**WEIGHT**

80 Lbs.

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