**PATIENT**

King James Velasquez

**SPECIES**

Canine

**BREED**

Poodle/king charles spaniel mix

**SEX**

M/N

**AGE**

6.5 years

**WEIGHT**

24.3 lbs.

**INTERPRETED BY**R. McKenzie Daniel,  
DVM, DABVP (Canine  
and Feline)**IMAGING  
PERFORMED BY**

Rachel Runnells, RVT

**HOSPITAL NAME**SVS Imaging Kansas  
City**REFERRING VET**

Dr. Elizabeth Wilcox

**INVOICE**

16198

**DATE**

2/16/23

**PRESENTING CLINICAL SIGNS**

Poodle/king charles spaniel mix

History: Screening ultrasound. Other pet (not litter mate) in home had a splenic tumor, so wanted a general screening for pt.

Abnormal PE/Chem/CBC/UA Results: No clinical signs or abnormalities.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Minor, non-dependent, particulate sediment, which may indicate cellular debris / protein, crystalline debris, or mucus, was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes was noted.

The residual prostate was free of pathology.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 5.0 cm in length. The right kidney measured 5.2 cm in length.

**Adrenal Glands**

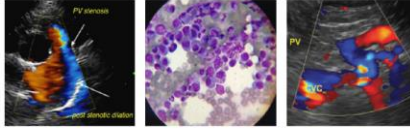
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.40 cm width at the caudal pole and 0.42 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.35 cm width at the caudal pole and 0.45 cm width at the cranial pole.

**Spleen**

The spleen exhibited normal size and contour with a primarily finely textured and homogenous parenchyma. A solitary, small, nondisruptive, uniform hypoechoic nodule was present in the caudal spleen measuring 0.70 cm in diameter. Normal splenic vascularity was noted. No masses were noted.

**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 containing primarily anechoic content with mild, non-dependent, echogenic gallbladder debris. 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.

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***

A solitary, uniform, hyperechoic area of omentum in the ventral abdomen was noted measuring approximately 1.5 cm in diameter, and not consistent with neoplastic criteria. An emerging area of nonspecific yet benign staeitis or nodular fat is possible. No omental masses, lymphadenopathy, or peritoneal effusion was noted.

**ULTRASONOGRAPHIC FINDINGS**

- Solitary nondisruptive splenic nodule
- Focal benign hyperechoic omental nodule - suspect possible emerging benign staeitis or nodular fat
- Mild gallbladder debris - non-mucocele

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The splenic nodule being solitary, nondisruptive, and without evidence of additional splenic nodular changes or masses is likely consistent with benign nodule such as focal minor hyperplasia, hematopoiesis, or similar. Neoplastic criteria is not suspected. Sonographic monitoring of the splenic nodule for evidence of progression with initial recheck in 6 weeks is recommended.

The gallbladder debris is considered incidental given the lack of cholestasis. Hepatosupportive medications may be considered if evidence of hepatic enzyme elevations or cholestasis going forward.



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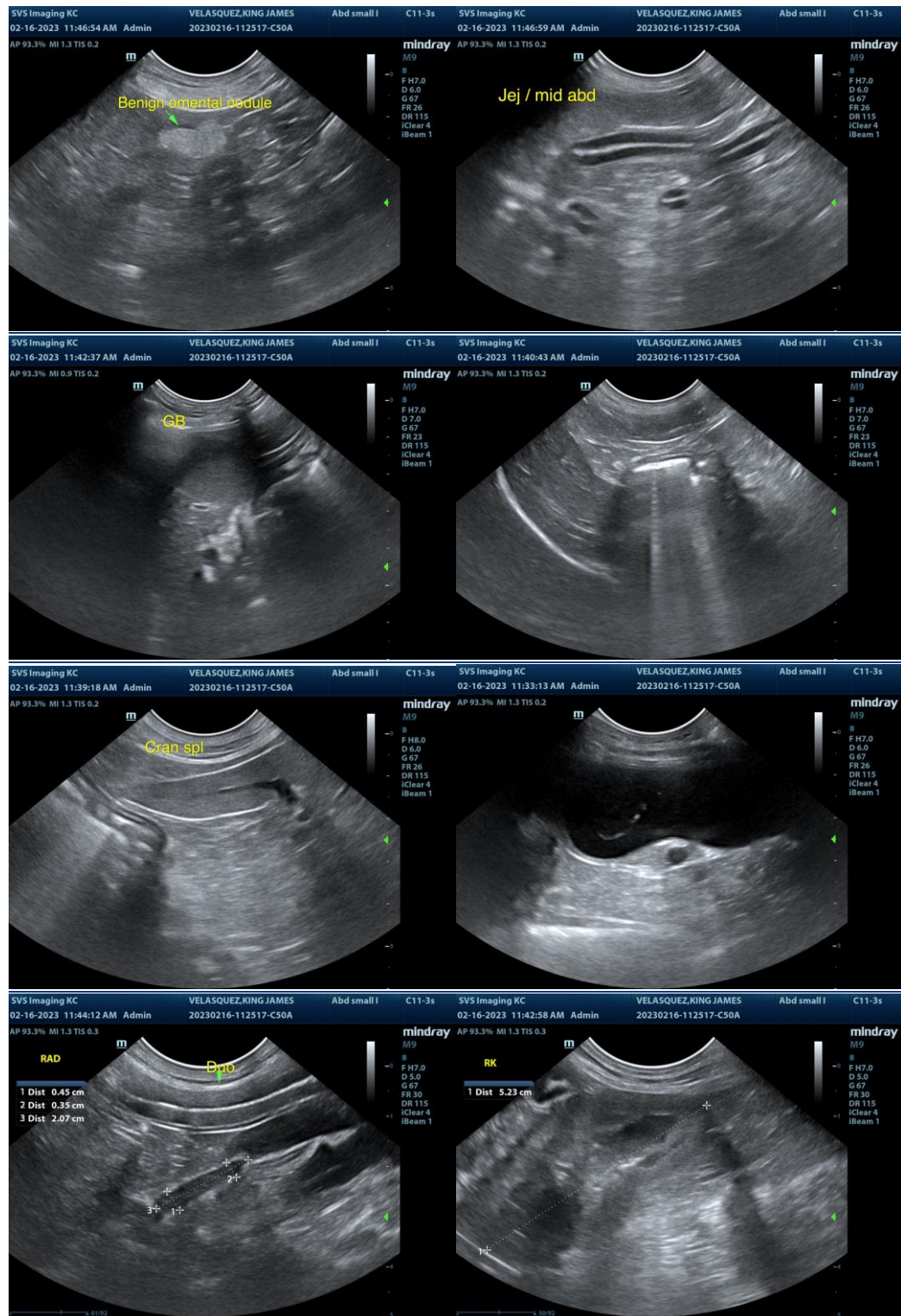
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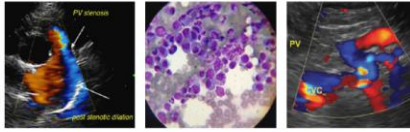
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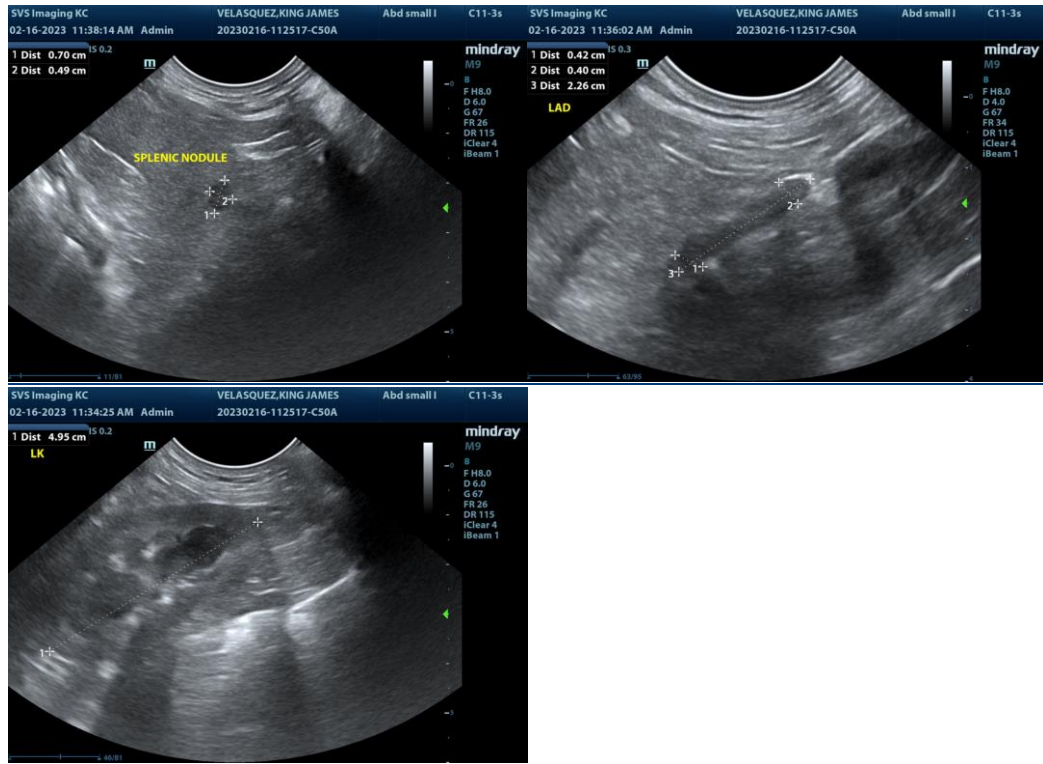
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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