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Clinical Sonography & Telecytology
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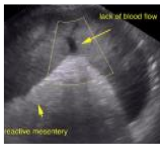
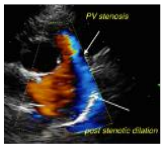
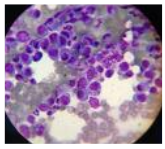
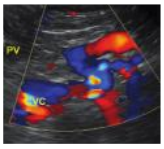

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Captain Jack Atkinson

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered Male

AGE

8 Years

WEIGHT

14.8 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Rachel Runnells, RVT

HOSPITAL NAME

SVS Imaging KC

REFERRING VET

Dr. Taylor

INVOICE

20929

DATE

2/2/23

PRESENTING CLINICAL SIGNS

History: Not eating.

Abnormal PE/Chem/CBC/UA Results: TP- Elevated, Glob-Elevated, RBC- LOW

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone and cystourethral junction 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 were noted.

The area of the residual prostate appeared normal and free of pathology.

No evidence of medial iliac or sublumbar lymphadenopathy.

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 4.8 cm in length. The right kidney measured 5.0 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 0.45 cm width at the caudal pole and 0.59 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 0.43 cm width at the caudal pole and 0.37 cm width at the cranial pole.

Spleen

An expansive, mildly irregular, nonuniform, hypoechoic splenic mass was noted with mild regional hyperechoic perisplenic omentum. The spleen not involved with the mass exhibited maintained symmetrical capsule contour and finely textured homogenous parenchyma. Potential for scant perisplenic free fluid, although no evidence of significant peritoneal effusion or evidence of definitive splenic mass rupture.

Liver

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 thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

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.

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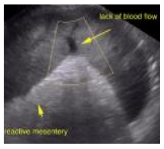
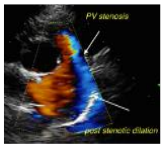
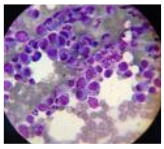
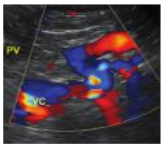

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Normal visible colon wall layers were present with apparent formed feces in lumen.

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 was evident.

Free Abdomen

No overt lymphadenopathy. Potential for scant perisplenic free fluid, although no evidence of significant peritoneal effusion or evidence of definitive splenic mass rupture.

Other

A rapid view of the heart revealed no evidence of pericardial effusion or overt evidence of cardiac tumors/metastatic disease. Decreased LV function and bradycardia are noted, suspected to be owing to sedation.

ULTRASONOGRAPHIC FINDINGS

- Splenic mass with regional mild hyperechoic perisplenic omentum, potential for scant perisplenic effusion
- Sonographically normal liver

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other). Neoplastic criteria is favored. No obvious evidence of intraabdominal or cardiac metastasis. No evidence of gastrointestinal structural pathology or mechanical/metabolic ileus.

Assuming no evidence of pathology on three view chest radiographs, laparotomy with splenectomy, gross inspection of the liver, perisplenic omentum and gastrointestinal tract is warranted.

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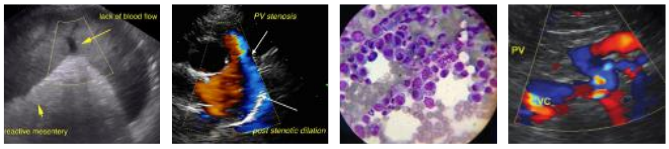

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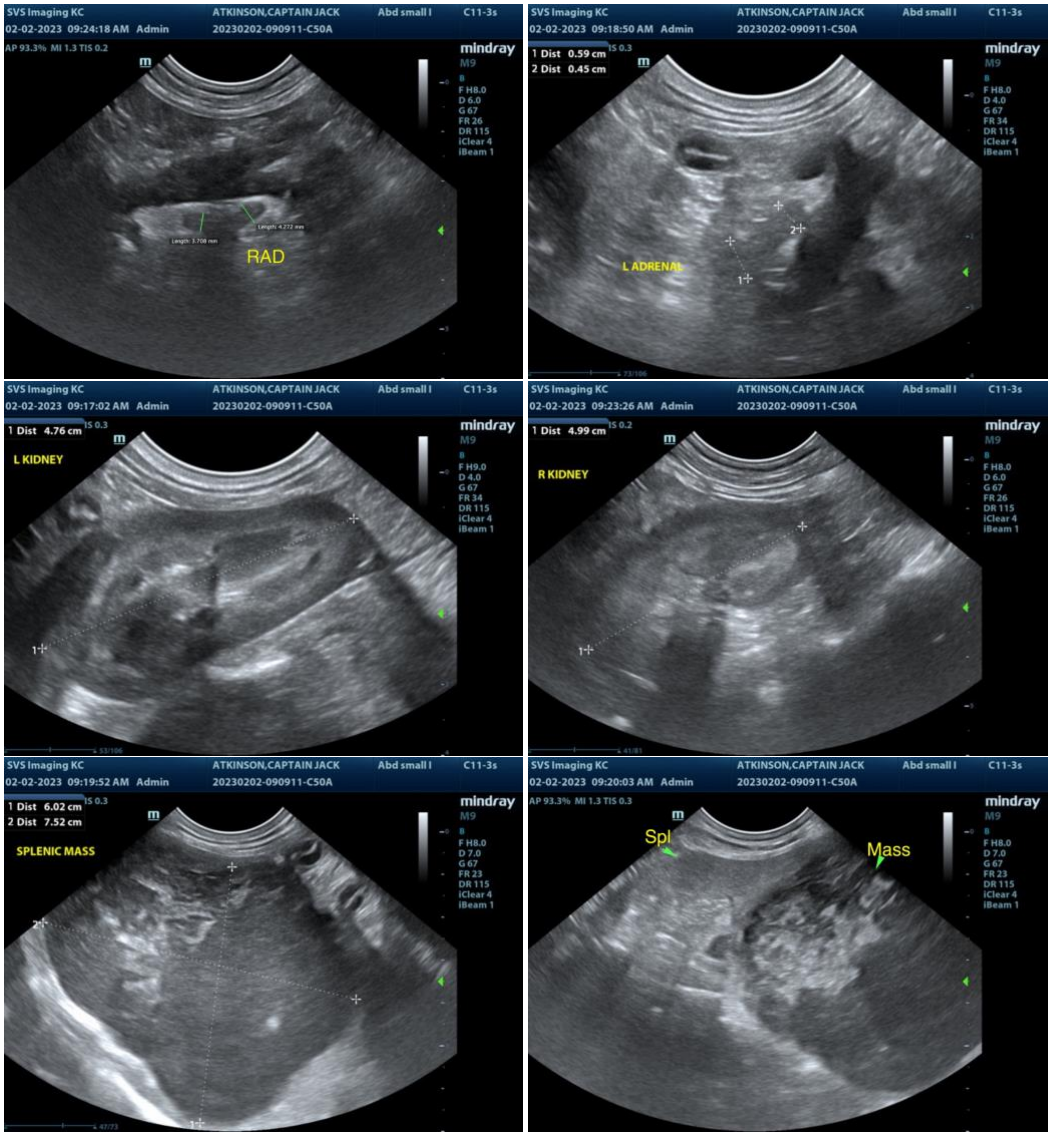

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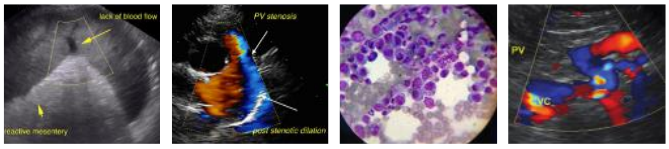

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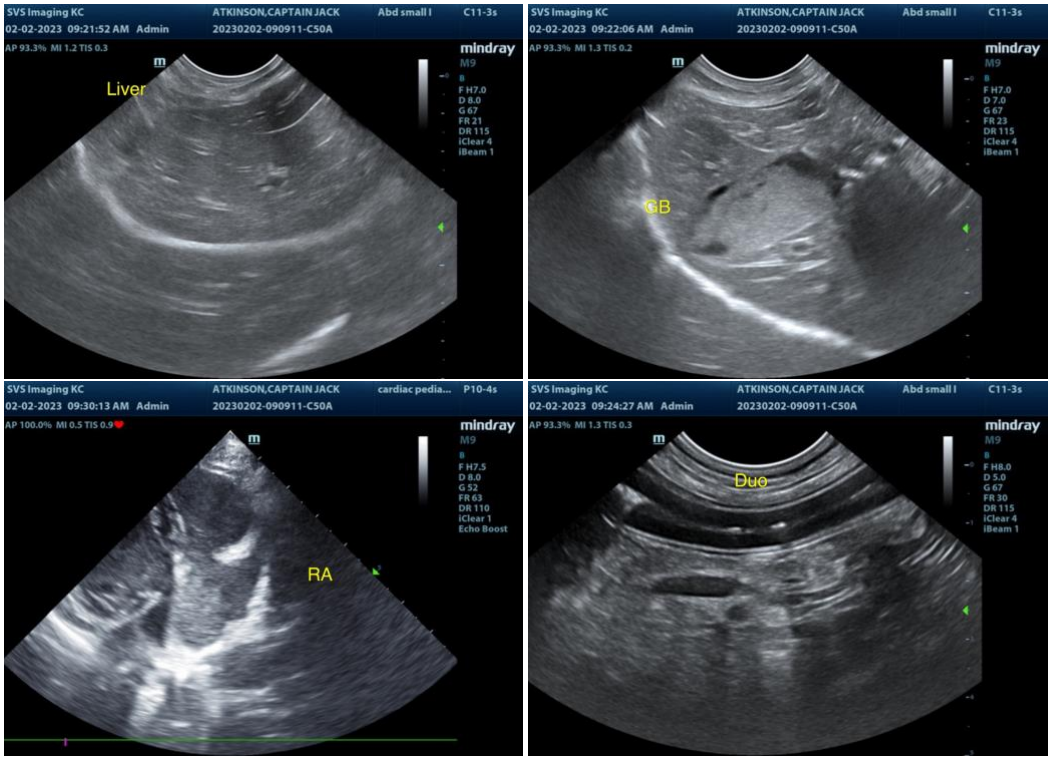

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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