



PATIENT

Gigi Wester

SPECIES

Canine

BREED

American Eskimo

SEX

FS

AGE

14yr

WEIGHT

18lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi CVT

HOSPITAL NAME

Harmony AH

REFERRING VET

Dr Keefe

INVOICE
23745

DATE

02/02/2026

PRESENTING CLINICAL SIGNS

- persistent elev. LE's.
- doing well otherwise
- hx of seizures but none recently
- Phenobarb disc.; Keppra

Abnormal PE/Chem/CBC/UA Results: 12/31/25-Alt 168; Alp 1335; Bun 34; Chol 635; trig 1996; PLT 666 6/27/25: Alt 292; Alp 1319; Chol 389; Amyl >2500; Lip 5716; PLt 516

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was 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 4.5 cm in length. The right kidney measured 5.0 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.48 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.64 cm width at the caudal pole.

Spleen

A mass involving the spleen with secondary capsule expansion and disruption was present in the mid to caudomedial spleen and measured 5-6 cm in diameter. The parenchyma of the mass was non-homogenous to mixed echogenic without areas of cavitation. The non-affected spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

Liver/Gallbladder

The liver was subjectively mildly enlarged. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. 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. Normal vascular volume. 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 contained mild non-shadowing ingesta sonographically suggestive of food echogenicity with no signs of 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 mechanical/metabolic 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 was evident.

Free Abdomen

Mild perisplenic hyperechoic omentum. Mild volume peritoneal effusion. No obvious visualized significant omental lymphadenopathy.

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

ULTRASONOGRAPHIC FINDINGS

Primary

- Splenic mass with mild perisplenic hyperechoic omentum
- Mild non-homogenous non-congested liver
- Normal gallbladder
- Mild age-related renal changes
- Mild volume peritoneal effusion

Secondary

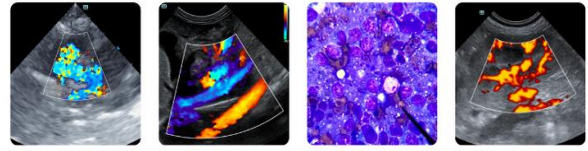
- Gastric ingesta-consistent with food echogenicity

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.

The liver may indicate vacuolar or cholestatic hepatopathy, secondary hepatopathy owing to medication, non-specific hepatitis, infectious disease or immune mediated hepatopathy, hyperplasia or other.

No obvious sonographic evidence of intra-abdominal major organ including liver or cardiac metastasis was visualized. Micrometastasis cannot be definitively excluded.



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If no pathology on thoracic radiographs, and pending echocardiogram with normal clotting status, splenectomy with gross inspection of the abdominal cavity and with suggested hepatic biopsies is warranted.

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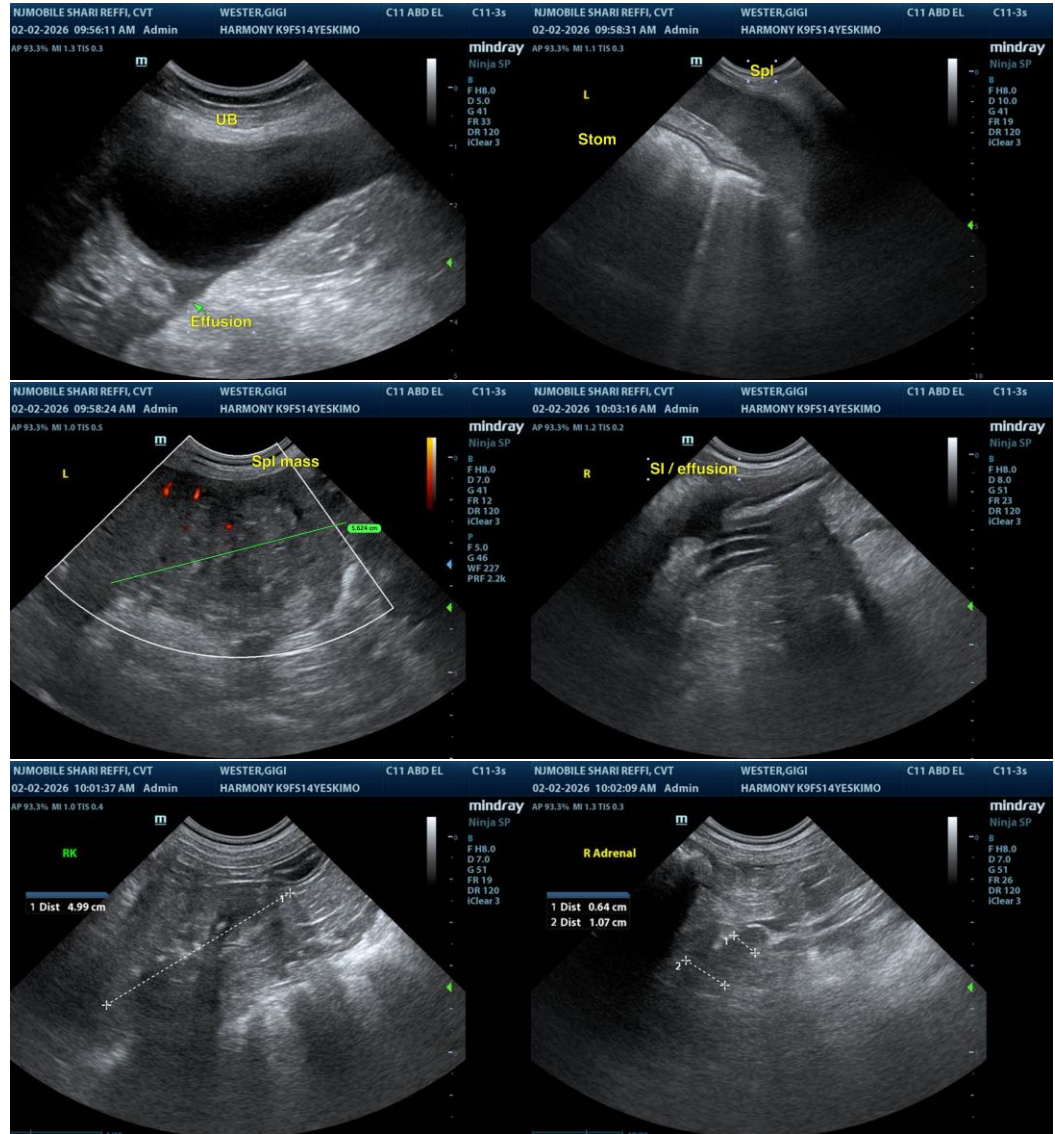
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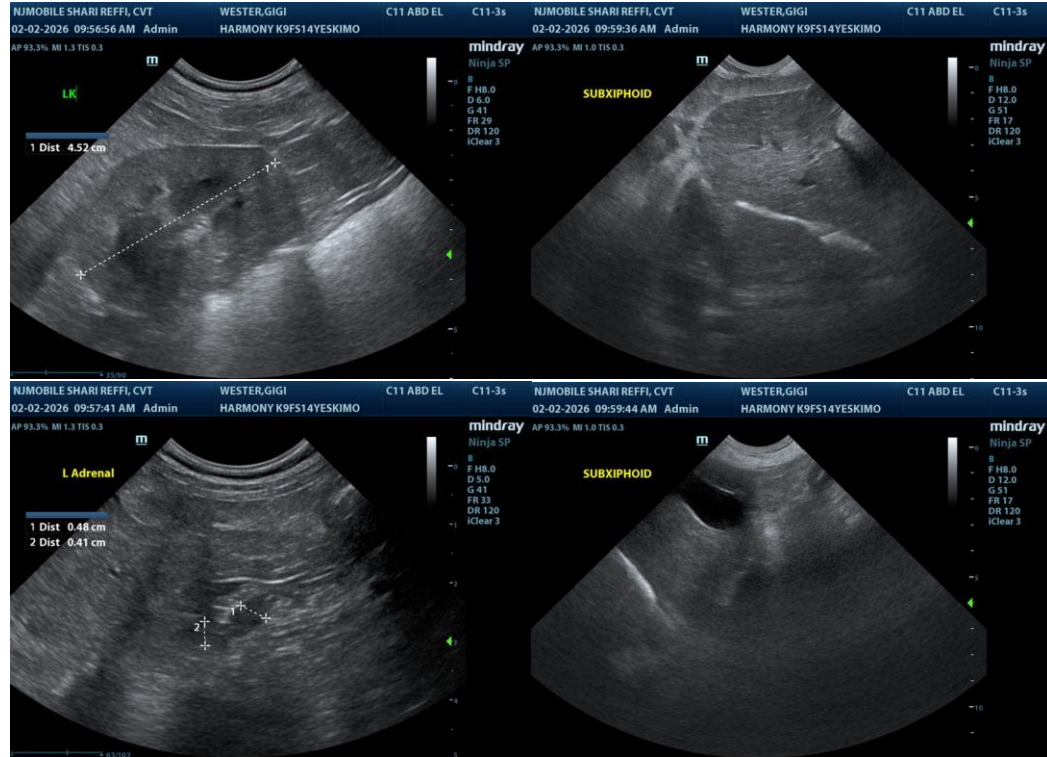
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 (Canine and Feline)

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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info@sonopath.com

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