



**PATIENT PRESENTING CLINICAL SIGNS**

Peanut McConnel History of foreign body, liver mass

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine **Urinary System**

**BREED** The urinary bladder was normal in size and tone. Anechoic urine was present in the lumen with previously noted focal areas of dependent, luminal mineral. The urethra exhibited normal structure and tone to a depth of 3.0 cm.

Yorkshire Terrier

The area of the aortic trifurcation was free of pathology.

**SEX**

FS

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 or pyelectasia was present. Nonobstructive medullary mineral to small renoliths were present. The left kidney measured 4.0 cm in length. The right kidney measured 4.0 cm in length.

**AGE**

2009

**WEIGHT**

8.8

**Adrenal Glands**

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 1.8 cm length x 0.57 cm width at the caudal pole. The right adrenal gland measured 0.41 cm width at the caudal pole.

**INTERPRETED BY**

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**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Maple Hills VH

**Liver/ Gallbladder**

The liver presentation was static, exhibiting previously noted moderately sized, irregular, mixed echogenic to nodular caudal mass extending to the area of the gastric axis with mild gastric impingement and/or displacement. The mass measured approximately 6.0 cm in diameter. Hepatic parenchyma not involved with the mass exhibited normal echogenicity with moderate coarse echotexture and evidence of parenchymal remodeling. Likely intermittent, small thinly-walled intraparenchymal cysts were present.

**REFERRING VET**

Dr. Eckman

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The gallbladder was non-distended in size containing primarily anechoic content with mild gallbladder debris. The cystic and common bile ducts were normal.

**DATE**

2/22/23



**PATIENT**

***Gastrointestinal***

Peanut McConnel

The stomach presented intact mildly prominent wall layering with a normal wall layer ratio. The lumen of the stomach was empty with pockets of luminal gas. No evidence of retained ingesta, or foreign material.

**SPECIES**

Canine

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.

**BREED**

Yorkshire Terrier

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

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***Pancreas***

FS

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

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***Free Abdomen***

No overt lymphadenopathy or peritoneal effusion was present.

**ULTRASONOGRAPHIC FINDINGS**

***Primary Findings***

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- Static liver mass
- Empty stomach with mild luminal gas - no overt evidence of previously noted suspected nonobstructive gastric foreign body, potential for mild gastritis if gastritis signs are present
- Sonographically normal small bowel - no evidence of obstructive pattern
- Heterogeneous pancreas - static

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***Secondary Findings***

- Chronic renal changes with nonobstructive medullary mineral
- Similar appearing minor to focal dependent urinary bladder mineral

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 ARDMS/RVT

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

Maple Hills VH

As-needed gastrointestinal support such as gastroprotectants and/or dietary therapy is suggested if clinical signs indicative of gastritis are present. No indication for gastrointestinal surgical intervention. If not done, hepatic mass sampling may be considered for further clarification.

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**BREED**

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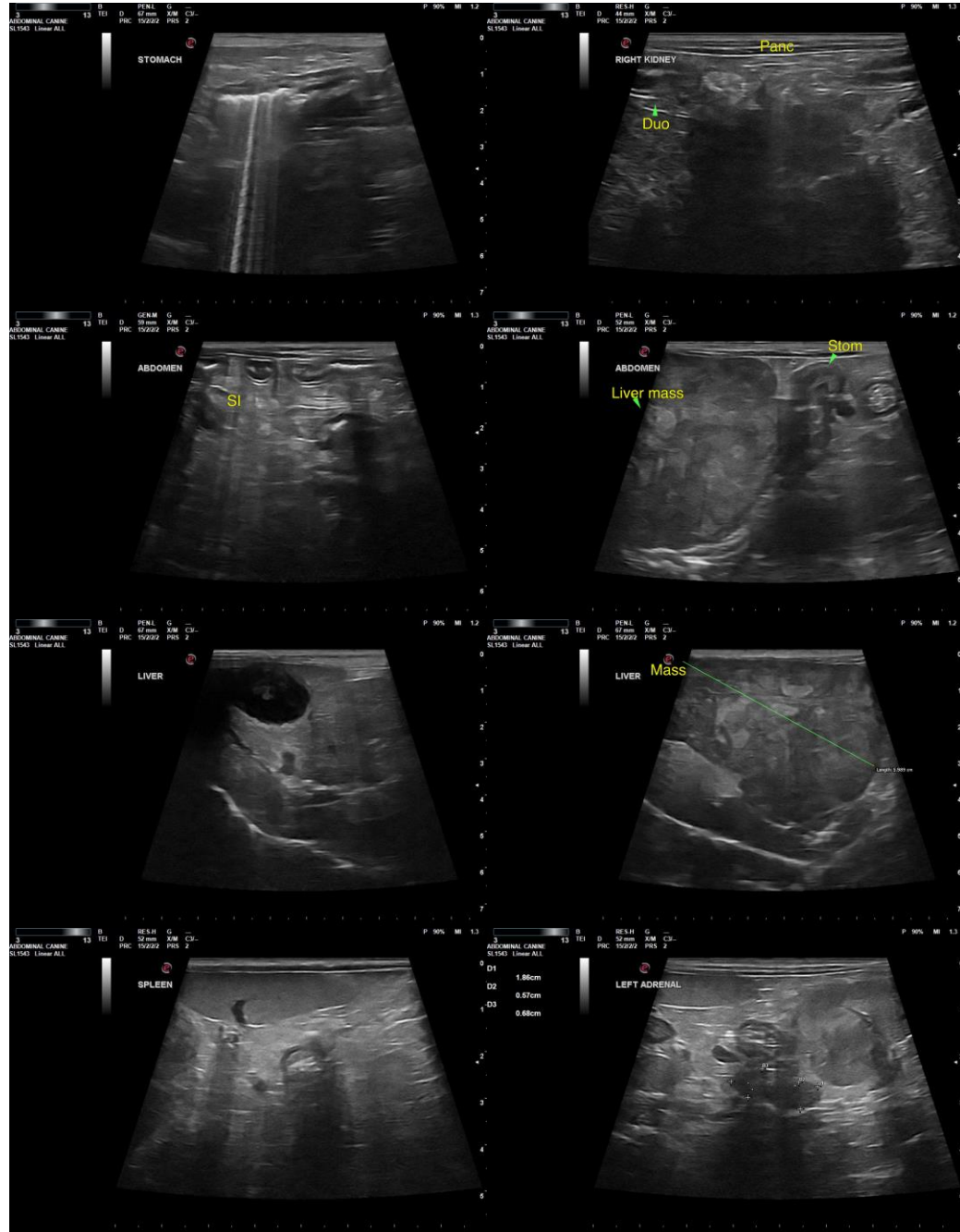
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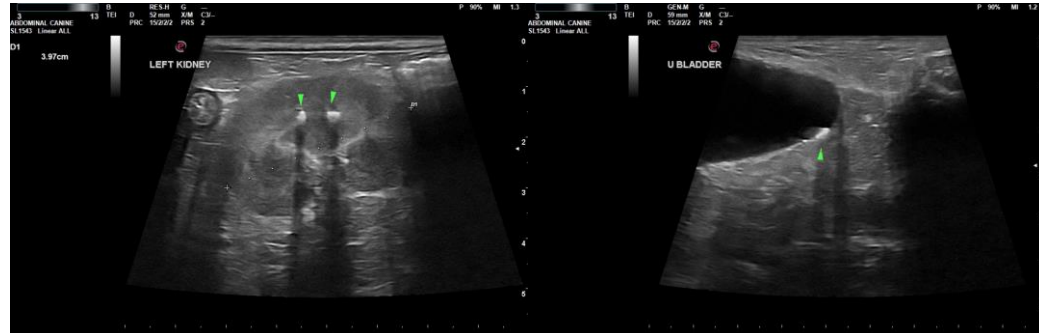
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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