



PATIENT PRESENTING CLINICAL SIGNS

Luppy Oare History: 2 day history of inappetence , weakness/disorientation, and one day episode of vomiting. Palpable abdominal mass

SPECIES Abnormal PE/Chem/CBC/UA Results: Chem-BUN 30 , ALT 450, ALP 388 CBC- hgb12.9 (HCT 38.8), retic 333,900, WBC 33,900, Neuts 30,080, PLT127,00
Canine

BREED

Staffordshire Terrier X

SEX

Spayed female

AGE

11 years

WEIGHT

61 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenna Walsh CVT

HOSPITAL NAME

Santa Clara Animal
Hospital

REFERRING VET

Dr. Barbara Brasted-
Maki

INVOICE

10076ag

DATE

02/25/2022

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some mildly 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 6.0 cm in length. The right kidney measured 7.4 cm in length.

Adrenal Glands

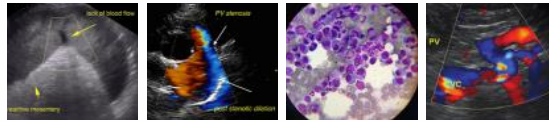
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.79 cm width at the caudal pole and 0.97 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.68 cm width at the caudal pole and 0.73 cm width at the cranial pole.

Spleen

Multiple variably sized to expansive masses involving the spleen with secondary asymmetrical capsule expansion and disruption were present. An example measured 7-8 cm and 4-5 cm respectively. The parenchyma of the mass was heterogeneous to mixed echogenic with 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. Regional peri splenic non uniform reactive mesentery with potential for adhesions was present. Regional omental inflammation was present around the mass.

Liver

The liver exhibited mild generalized enlargement. The liver exhibited hepatic parenchyma remodeling with multi focal variably sized to mildly expansive nonhomogeneous intraparenchymal nodules some of which appear to mildly distort the hepatic capsule. An example of liver nodule measured 3.2 cm in diameter. 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.



PATIENT *Gastrointestinal*

Luppy Oare 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.

SPECIES

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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

Staffordshire Terrier X

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

SEX

Spayed female

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.

AGE

11 years

Free Abdomen

A moderate volume of cellular peritoneal free fluid was present.

WEIGHT

61 pounds

Cardiac

A brief examination of the heart revealed mild volume pericardial free fluid, subjective thickening of the right ventricular free wall, right atrioventricular groove and right atrial free wall.

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

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

- Nonhomogeneous variably expansive splenic masses with regional peri splenic reactive mesentery, suspect adhesions.
- Multiple non homogenous hepatic intraparenchymal nodules.
- Moderate volume peritoneal free fluid-likely consistent with hemoabdomen.
- Concurrent pericardial effusion with thickened RA/RV free wall.

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Jenna Walsh CVT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unfortunately, the sonographic findings are consistent with multicentric neoplasia consistent with probable primary splenic neoplasia with hepatic and cardiac metastasis.

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An unfavorable prognosis is indicated.

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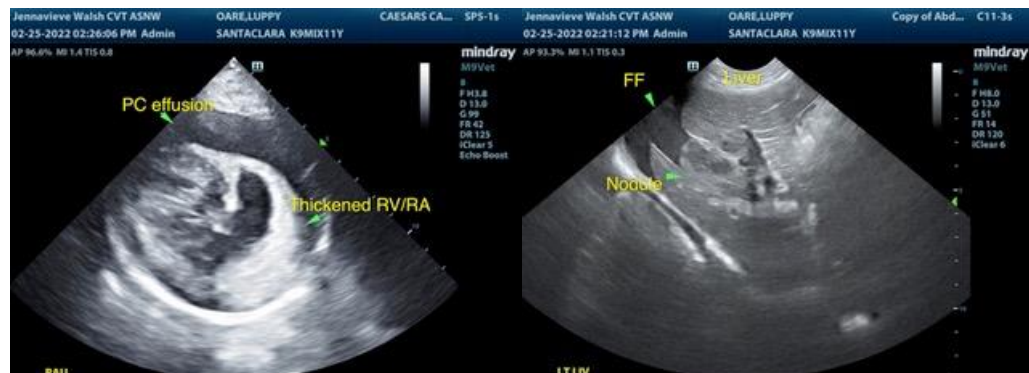
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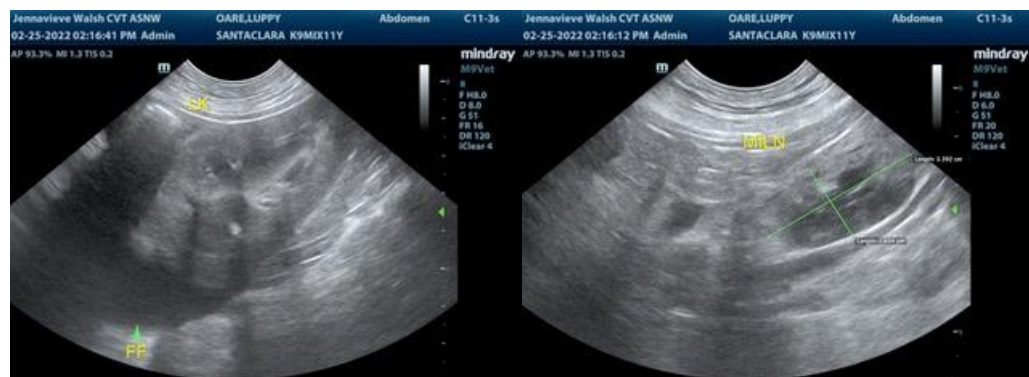
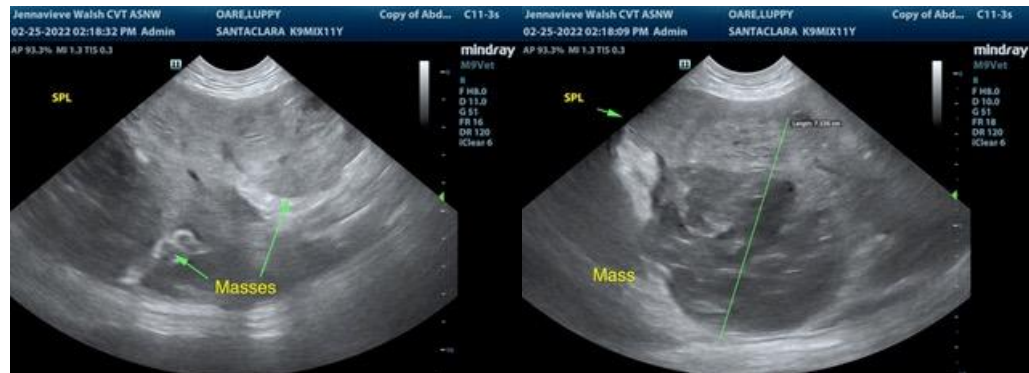
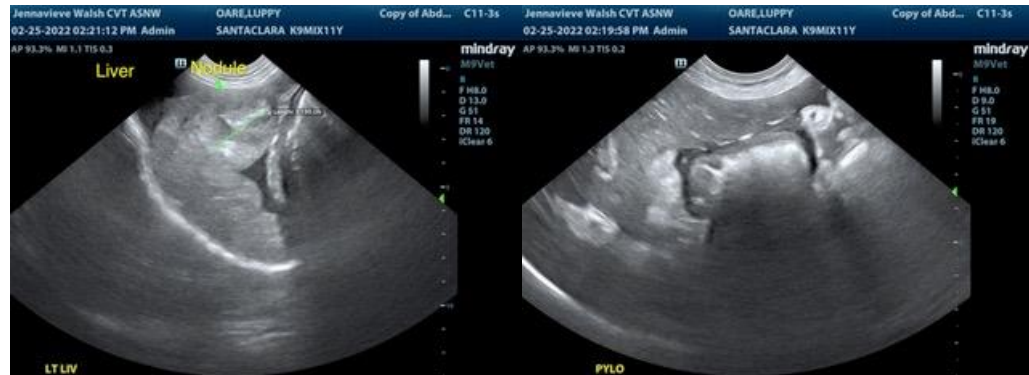
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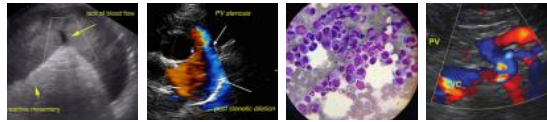
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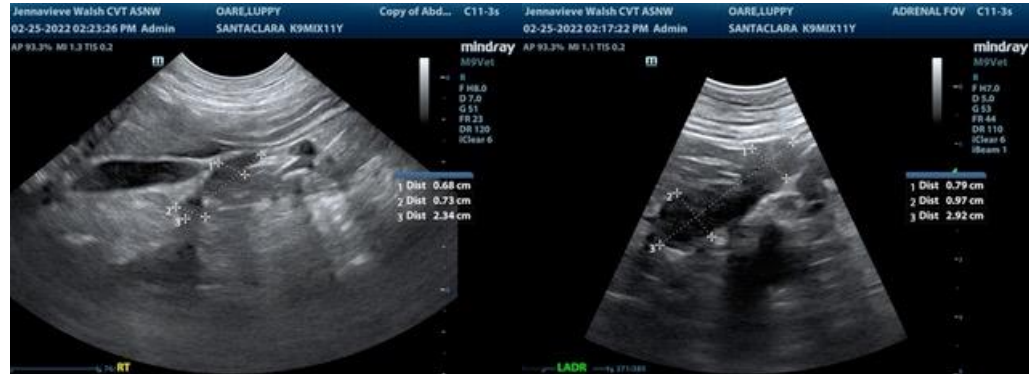
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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