



PATIENT

Mindy Muhlhauser

SPECIES

Canine

BREED

Foxhound X

SEX

Spayed Female

AGE

12 Years

WEIGHT

44 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap AH

REFERRING VET

Dr. Lindsey Knouse

INVOICE

45513

DATE

2/27/23

PRESENTING CLINICAL SIGNS

Mindy was presented to Dr. Campbell on 2/7/23 with a 1-2 week duration of not eating well, wouldn't eat I/D, no vomiting or diarrhea noted. Glucose was low at 60, and albumin mildly low at 2.6. WBC mildly increased with severe pancreatitis present. Presented again 2/22/23 for anorexia when stopping cerenia and mirtazapine. Owner is now noting some PU/PD and weakness. Temp 102.4, recheck CBC/Chem/Lytes/T4/4dx (neg). Leukocytosis persistent and glucose improved (90). ALP now 625, amylase/lipase normal. USG is dilute but no evidence of bacteriuria. On palpation of abdomen, Mindy is sensitive in the caudal abdomen and a possible mass is palpated near the liver or stomach. Owner is encouraging to eat with boiled chicken, bread, etc. SDEP Echo position 3 quick read is also included in this abdomen study please.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 5.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with non-dependent particulate debris, which may indicate minor cellular debris/protein/crystalline debris, lipid, or mucus. 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 aortic trifurcation was free of pathology.

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.6 cm. The right kidney measured 5.5 cm.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.1 cm length x 0.62 cm at the caudal pole. The right adrenal gland measured 2.2 cm length x 0.61 cm at the caudal pole.

Spleen

A moderate to large sized, irregular, expansive, mixed echogenic nodule splenic mass was noted in the subjective cranial spleen, occupying the majority of the mid to cranial abdomen and measuring approximately 10 cm in diameter. The discernable spleen exhibited maintained symmetrical capsule contour with mild parenchyma heterogeneity.

Liver

The liver presented subjective mild enlargement with areas of capsule asymmetry. Generalized non-homogeneous parenchyma noted, exhibiting multiple variably sized intraparenchymal nodules. Some of the nodules exhibited central mild hyperechogenicity with mildly hypoechoic periphery, suggestive of target lesions. Example of liver nodule measured 2.7 cm. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. Mild hyperechoic non-organized gallbladder debris present. The cystic and common bile ducts were normal.



PATIENT

Gastrointestinal

Mindy Muhlhauser

The stomach presented intact, mildly prominent gastric walls. Lumen was empty with minor luminal gas.

SPECIES

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.

Canine

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

BREED

Pancreas

Foxhound X

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.

SEX

Free Abdomen

Spayed Female

Intermittent scant pocket of peritoneal free fluid noted.

AGE

Hyperechoic omentum noted around the splenic mass and around the caudal liver.

12 Years

No overt or visualized significant lymphadenopathy

WEIGHT

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

44 Pounds

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

- Irregular splenic mass – consistent with neoplastic criteria i.e., sarcoma or other.
- Non-uniform/nodular liver with suspected intraparenchymal target lesions
- Mild gallbladder debris (non-mucocele)
- Subjective minor gastritis
- Perihepatic/perisplenic hyperechoic omentum and scant peritoneal free fluid

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

IMAGING PERFORMED BY

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Dr. Jennifer Todd

Unfortunately, the hepatosplenic presentation is consistent with multicentric neoplastic criteria with suspected primary splenic neoplasia and hepatic intraparenchymal metastasis. Surgical options appear to be precluded, with an unfavorable prognosis unfortunately indicated.

HOSPITAL NAME

Lambs Gap AH

REFERRING VET

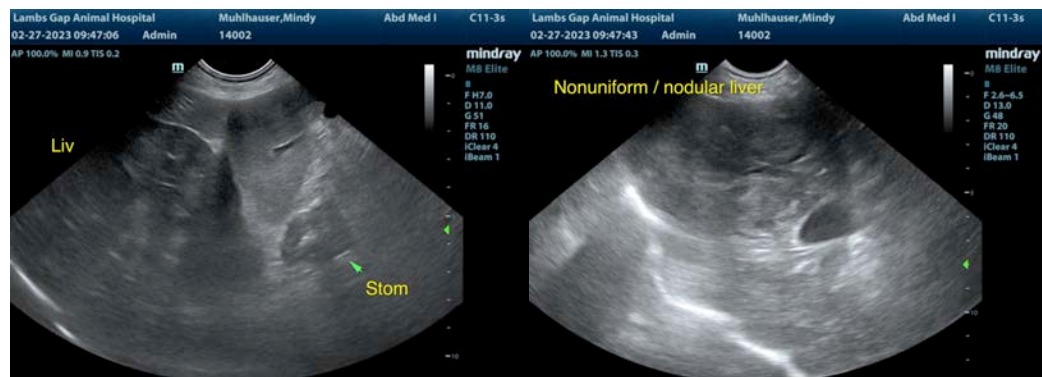
Dr. Lindsey Knouse

INVOICE

45513

DATE

2/27/23





PATIENT

Mindy Muhlhauser

SPECIES

Canine

BREED

Foxhound X

SEX

Spayed Female

AGE

12 Years

WEIGHT

44 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap AH

REFERRING VET

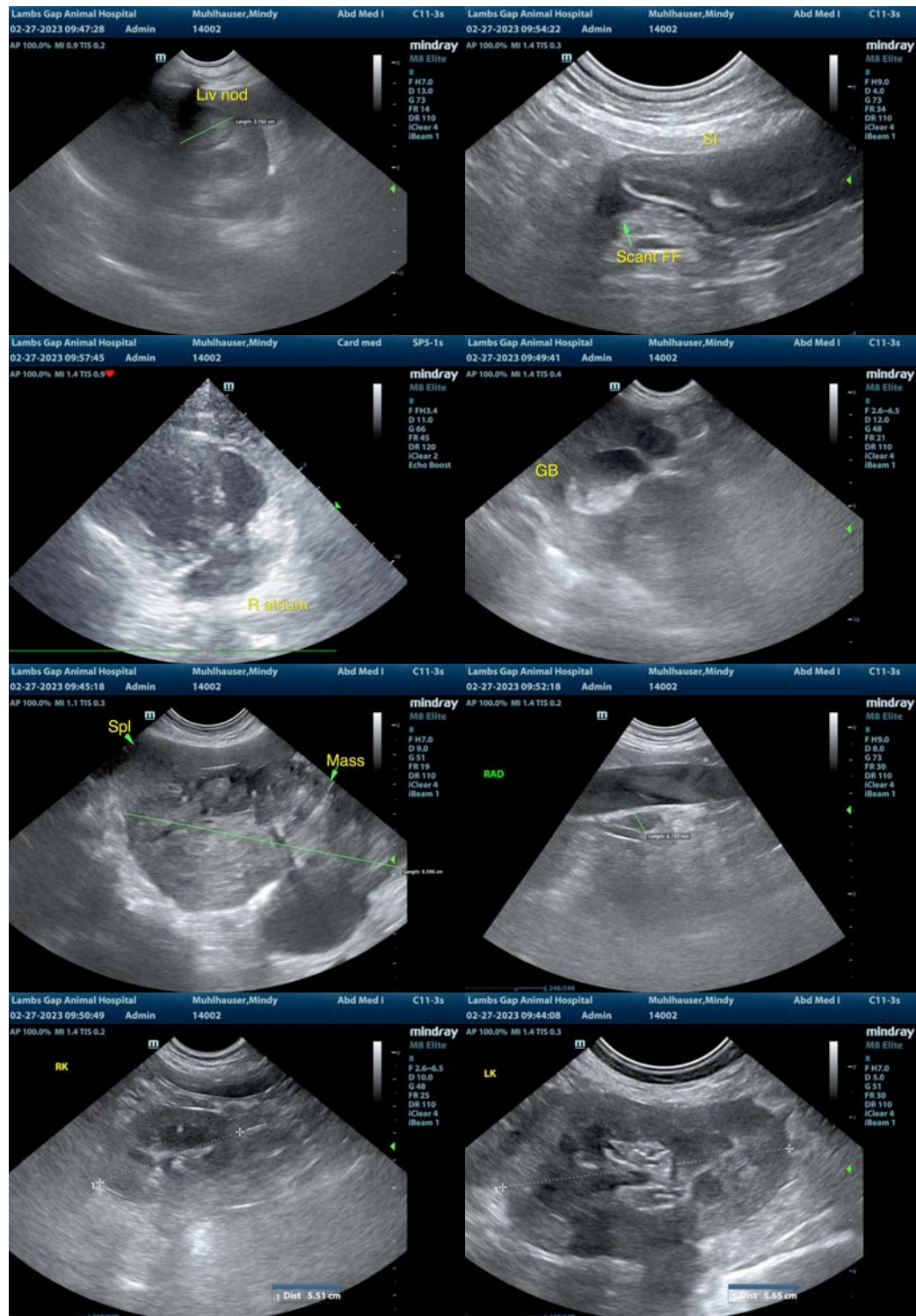
Dr. Lindsey Knouse

INVOICE

45513

DATE

2/27/23





PATIENT

Mindy Muhlhauser

SPECIES

Canine

BREED

Foxhound X

SEX

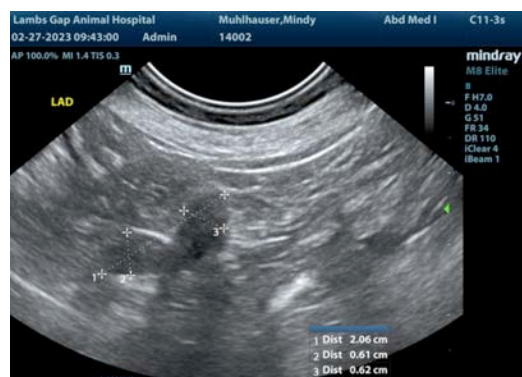
Spayed Female

AGE

12 Years

WEIGHT

44 Pounds



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

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap AH

REFERRING VET

Dr. Lindsey Knouse

INVOICE

45513

DATE

2/27/23