



PATIENT

Topo Pascore

SPECIES

Canine

BREED

Rhodesian Ridgeback

SEX

Spayed Female

AGE

6 Years

WEIGHT

36.5 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Guenther

HOSPITAL NAME

Central Island Vet
Emergency Hospital

REFERRING VET

Dr. Preston

INVOICE

45546

DATE

2/27/23

PRESENTING CLINICAL SIGNS

Acute onset dermal/SQ mass LH in region of caudal stifle just proximal to popliteal region. Present since Feb 2023 however some suggestion it may have been present since June 2022. FNA cytology consistent w/ MCT. Staging prior to sx. Chest Rads pending specialist interpretation however no overt abnormalities seen. Sedated dexdomitor/butorphanol/diphenhydramine.

Abnormal PE/Chem/CBC/UA Results: CBC - WNL Chem - WNL UA not performed PE mass LH caudal aspect just proximal to area of stifle w/ associated SQ edema. Otherwise wnl. No palpably enlarged LNs.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 cm 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 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 7.7 cm. The right kidney measured 7.0 cm.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.7 cm length x 0.63 cm at the caudal pole. The left adrenal gland measured 3.2 cm length x 0.79 cm at the caudal pole.

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. Medial folding of the caudal spleen noted. This is not indicative of underlying splenic pathology and likely patient variant. 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.

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.

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



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Pancreas

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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.

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Free Abdomen

BREED

Rhodesian Ridgeback

A solitary, mildly prominent to enlarged medial iliac lymph node was present, measuring 2.7 cm x 0.83 cm. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

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Visualized popliteal lymph nodes were sonographically unremarkable. Example of left popliteal lymph node measured 1.1 cm x 0.39 cm, right measured 1.7 cm x 0.90 cm. Overtly normal inguinal lymph nodes. Example of right inguinal lymph node measured 1.3 cm x 0.37 cm.

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No omental masses. No peritoneal effusion.

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ULTRASONOGRAPHIC FINDINGS

- Mild splenic folding, otherwise sonographically normal spleen
- Sonographically unremarkable peritoneal cavity
- Overtly normal visualized medial iliac popliteal and inguinal lymph nodes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No obvious evidence of intraabdominal neoplastic/metastatic criteria. No obvious evidence of popliteal inguinal or medial iliac lymphadenopathy, which would suggest lymphatic pathology or early neoplastic criteria. Further assessment would include screening splenic FNA cytology as well as screening popliteal/inguinal lymph node cytology for further staging or if recommended by an oncologist. Otherwise, sonographic monitoring of regional lymph nodes as well as the spleen for evidence of changes that may suggest pathology based on oncology recommendations is recommended.

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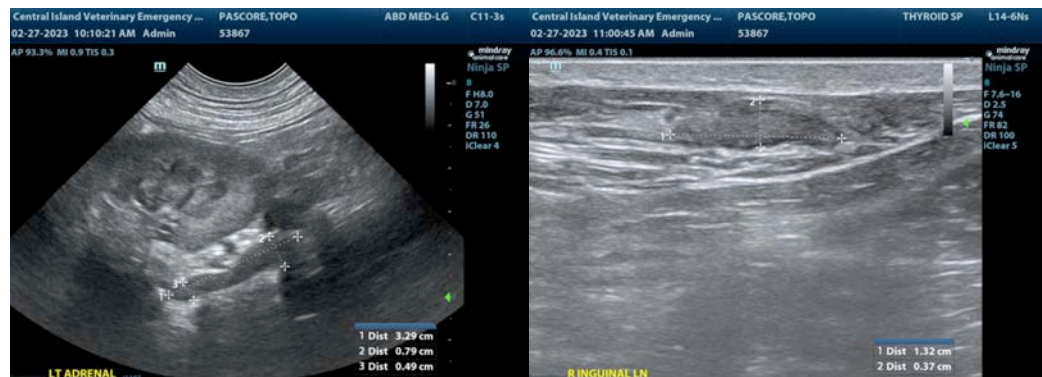
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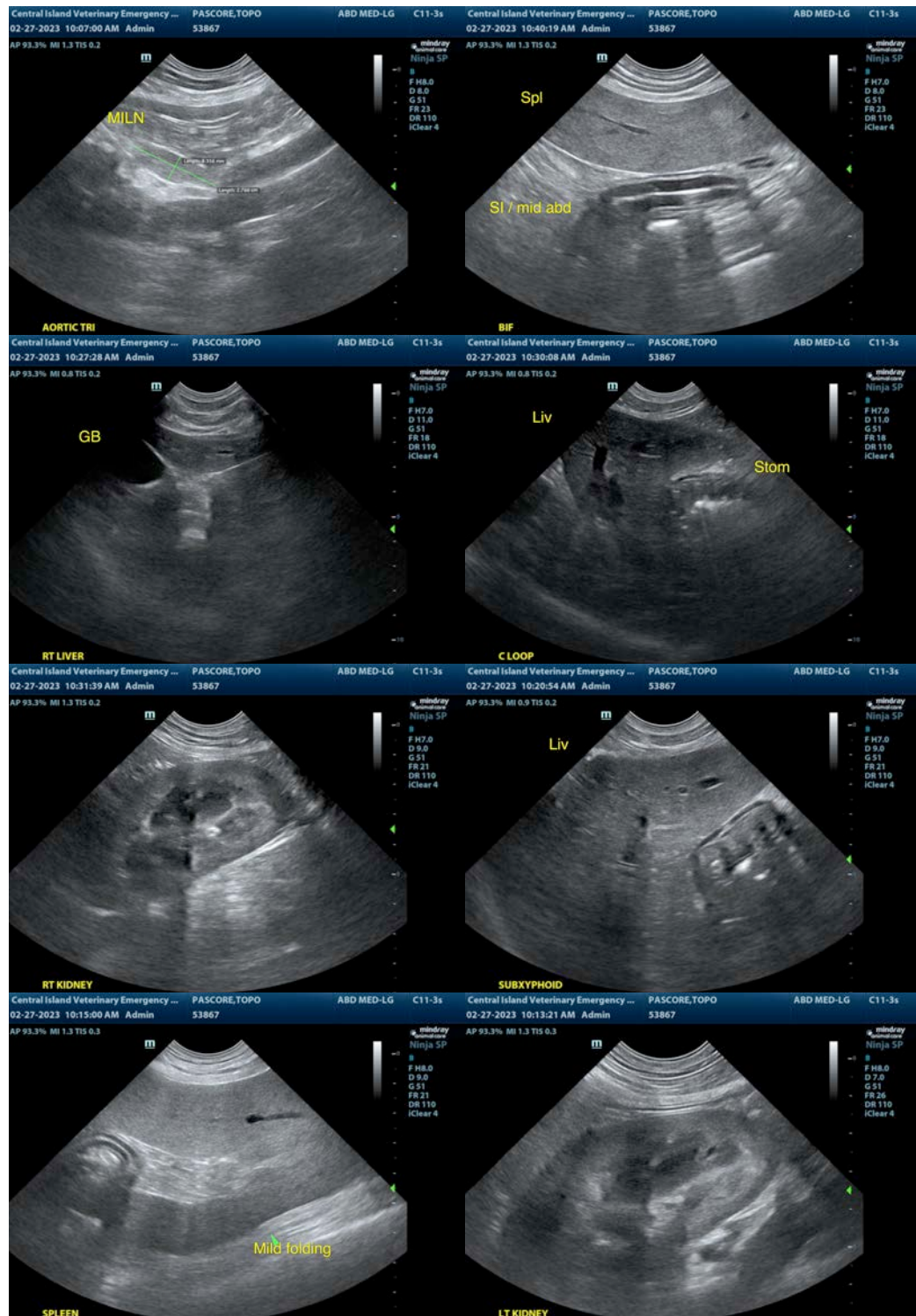
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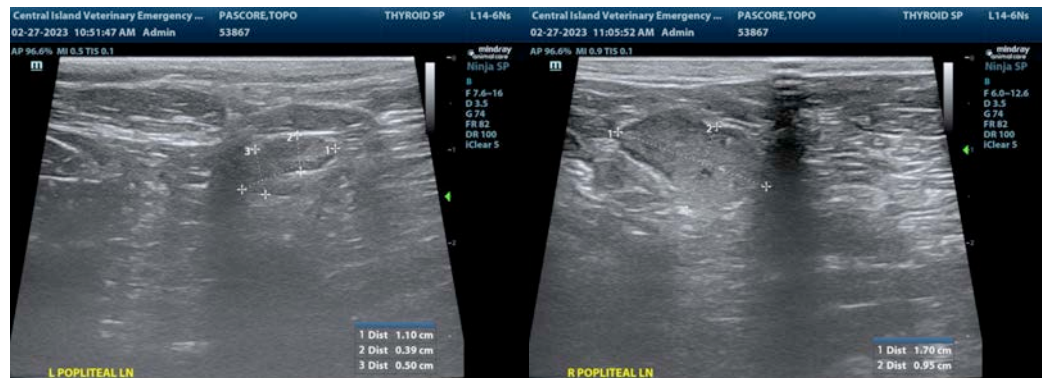
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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