



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Diesel Peller	Was seen at emergency clinic initially for abdominal pain. Brief ultrasound raised concern for splenic lesion. No other clinical signs. No heart murmur.
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: Leukopenia characterized by neutropenia and lymphopenia.
Canine	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN WITH LIMITED HEART</b>
<b>BREED</b>	<b>Urinary System</b>
Rottweiler Mix	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 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.
<b>SEX</b>	
MN	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 6.5 cm in length. The right kidney measured 6.9 cm in length.
<b>AGE</b>	
9yr	The area of the aortic trifurcation was free of pathology.
<b>WEIGHT</b>	The area of the residual prostate appeared normal and free of pathology.
36.5kg	<b>Adrenal Glands</b>
<b>INTERPRETED BY</b>	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.65 cm width at the caudal pole and 0.71 cm width at the cranial pole. No overt pathology in the area of the right adrenal gland.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<b>Spleen</b>
<b>IMAGING PERFORMED BY</b>	The spleen exhibited mild to moderate enlargement with symmetrical capsule contour and generalized mild parenchyma heterogeneity. Intermittent small well demarcated hyperechoic nodules were present, an example measuring 0.55 cm in diameter. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. No evidence of expansive/disruptive splenic mass/lesion.
Dr. Barthelemy	<b>Liver/Gallbladder</b>
<b>HOSPITAL NAME</b>	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.
Southpointe Pet Hospital	<b>Gastrointestinal</b>
<b>REFERRING VET</b>	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.
Dr. Callan	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.
<b>INVOICE</b>	Normal visible colon wall layers were present with apparent formed feces in lumen.
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<b>DATE</b>	
02/06/2023	



**PATIENT**

**Pancreas**

Diesel Peller

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.

**SPECIES**

Canine

**Free Abdomen**

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

**BREED**

Rottweiler Mix

Brief subjective echocardiogram revealed overtly normal cardiac structure and function with subjective bradycardia likely owing to sedation. If sedation was not used, a full echocardiogram +/- ECG is recommended. No evidence of pericardial effusion or cardiac tumors.

**SEX**

MN

- Mild to moderate splenomegaly with asymmetrical contour and intermittent primarily small hyperechoic nodules-incident hyperplasia, hematopoiesis, focal splenitis, or similar with suspect hyperechoic benign myelolipomas. Potential for early infiltrative neoplasia thought less likely
- Mild age related renal changes

**AGE**

9yr

**ULTRASONOGRAPHIC FINDINGS**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

36.5kg

Assuming normal clotting status and using a 25g needle, a splenic FNA for screening cytology is warranted for further assessment primarily to ensure only benign changes are present and rule out early infiltrative neoplasia. No other evidence of intra-abdominal visceral pathology was present. No additional evidence of neoplastic criteria. A definitive cause of potential intra-abdominal pain was not obvious. The spleen was not consistent with torsion criteria. Radiographic or sonographic monitoring of the spleen for evidence of progressive splenomegaly is recommended.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Barthelemy

**HOSPITAL NAME**

Southpointe Pet  
Hospital

**REFERRING VET**

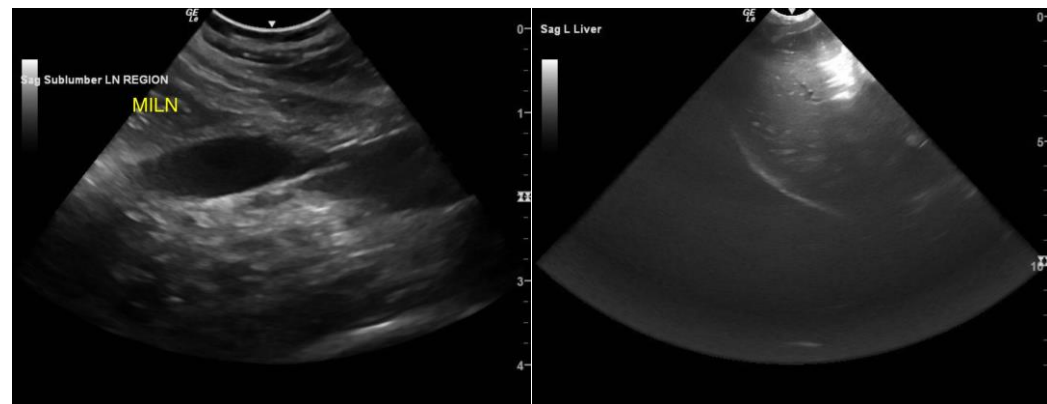
Dr. Callan

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**PATIENT**

Diesel Peller

**SPECIES**

Canine

**BREED**

Rottweiler Mix

**SEX**

MN

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9yr

**WEIGHT**

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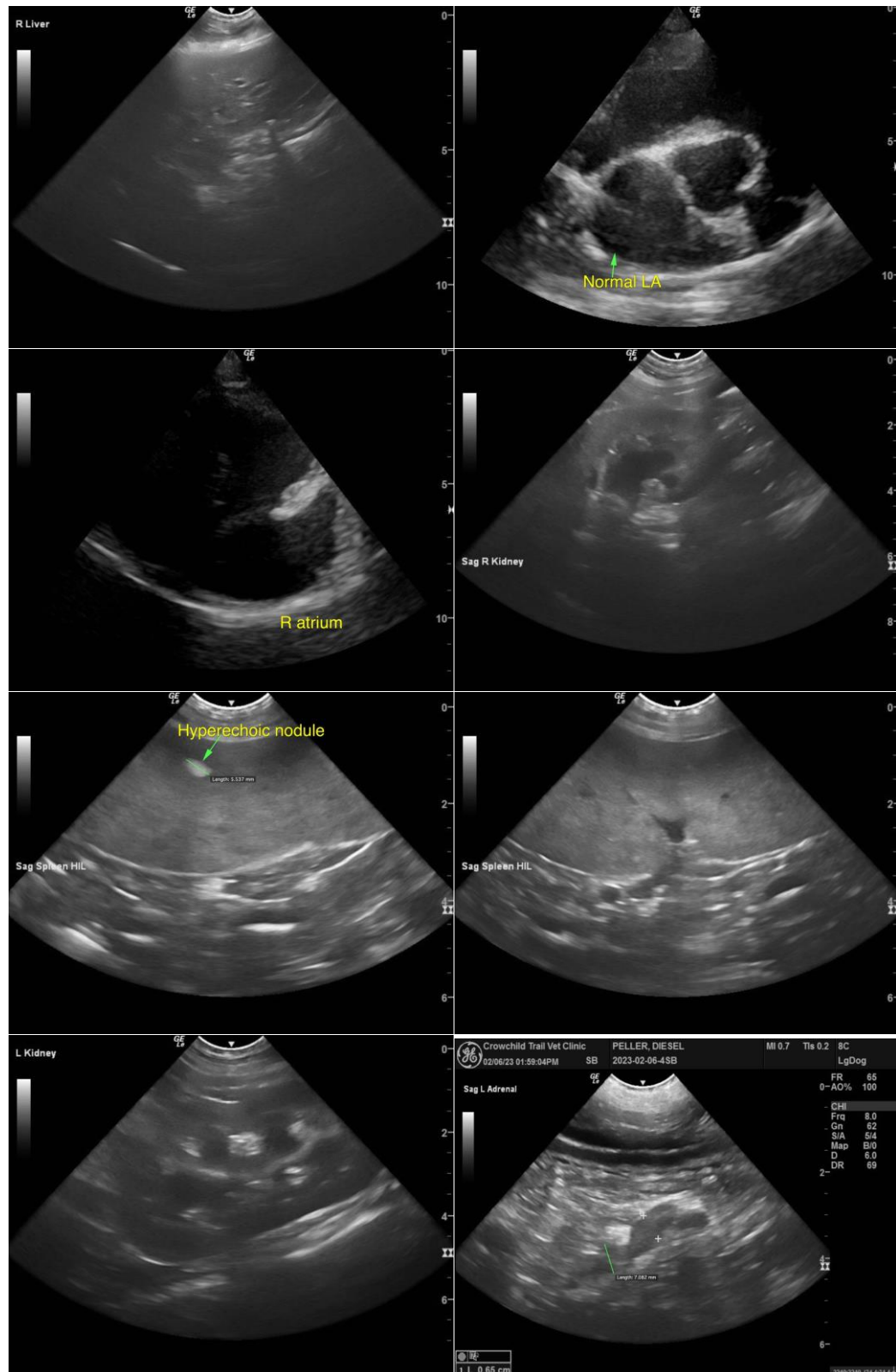
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not



**PATIENT**

visible in the image/video clips provided.

Diesel Peller

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.

**SPECIES**

Canine

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)  
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**BREED**

Rottweiler Mix

**SEX**

MN

**AGE**

9yr

**WEIGHT**

36.5kg

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