



PATIENT PRESENTING CLINICAL SIGNS

Molli Kozak

History: Diarrhea

Medication: Fortiflora, Metronidazole

SPECIES

Canine

ALT 651, ALP 1583, GGT 14, Urine specific gravity 1.010

BREED

Beagle

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

FS

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 was noted.

AGE

10 years

The area of the aortic trifurcation was free of pathology.

WEIGHT

37 Pounds

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. Mild pyelectasia was noted in the right kidney. The left kidney measured 5.6 cm in length. The right kidney measured 6.0 cm in length.

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.61 cm width at the caudal pole and 0.61 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 0.54 cm width at the caudal pole and 0.44 cm width at the cranial pole.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

Spleen

HOSPITAL NAME

Maple Hills VH

The spleen exhibited normal size and contour with generalized mild splenic parenchyma heterogeneity.

REFERRING VET

Dr. Eckman

Liver/ Gallbladder

The liver exhibited generalized enlargement. A large, expansive, nonhomogeneous mass exhibiting multifocal cystic component occupying the majority of the subjective mid to right liver was present. The mass measured approximately 11.0-12.0 cm in diameter but potentially larger. Potential for multiple to coalescing masses cannot be definitively excluded. The gallbladder was mildly distended containing primarily anechoic content with mild dependent to mildly nondependent yet nonorganized luminal debris. The cystic and common bile ducts were normal.

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DATE

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PATIENT

Gastrointestinal

Molli Kozak

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

Canine

The small intestine presented intact wall layering with a primarily maintained 1:3 muscularis/mucosa ratio. Segmental areas of mild intestinal ileus were present, exhibited by segmental mild retained fluid. No overt obstructive pattern was evident.

BREED

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Normal visible colon wall layers were present with semi-formed to subjective soft fecal matter in lumen.

Pancreas

SEX

FS

The pancreas was mildly prominent in size with heterogeneous to mixed echogenic indistinctly nodular parenchyma.

Free Abdomen

AGE

10 years

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

37 Pounds

- A large, nonhomogeneous to cystic liver mass, potential for multiple to coalescing masses possible yet not definitive
- Mild gallbladder debris (non-mucocele)
- Mild chronic renal changes with minor right kidney pyelectasia
- Nonhomogeneous spleen
- Heterogeneous to nodular pancreas
- Segmental enteritis exhibiting mild nonobstructive ileus

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(Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although sampling is required for further clarification, the liver mass to potential masses are suggestive of neoplastic criteria. Ultrasound guided FNA of the liver mass may be considered for further clarification and potential for oncology consultation.

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ARDMS/RVT

HOSPITAL NAME

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The splenic changes, although nonspecific, may indicate concurrent, hyperplasia, hematopoiesis, or incidental splenitis. Splenic neoplastic criteria is considered unlikely.

REFERRING VET

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The pancreatic changes are suggestive of parenchymal remodeling and suspected areas of nodular hyperplasia. The potential for pancreatic neoplastic criteria is considered low yet possible. Chronic to chronic active pancreatitis, given the presence of diarrhea, is possible.

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Fresh fecal analysis, a GI panel to assess cobalamin and folate levels, and as-needed gastrointestinal support are recommended.

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REFERRING VET

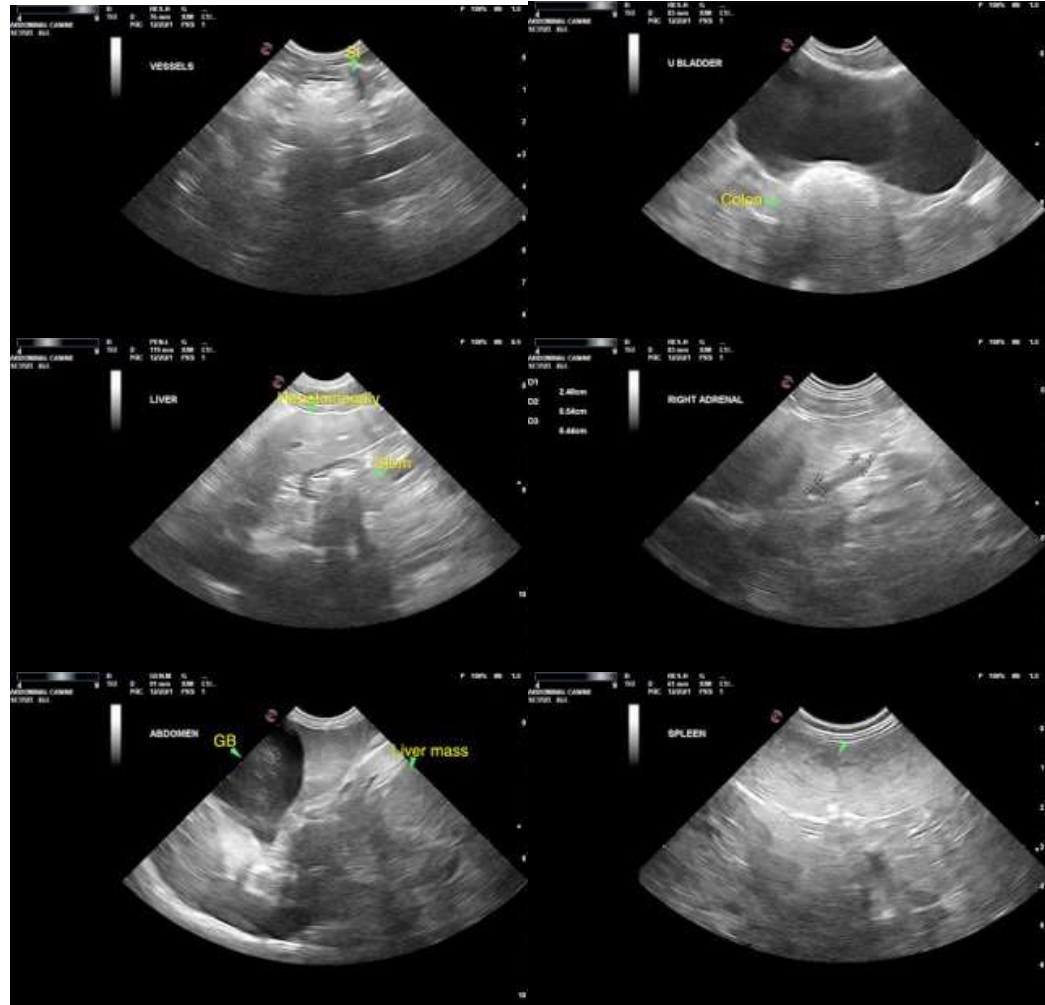
Dr. Eckman

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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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