



PATIENT PRESENTING CLINICAL SIGNS

Sophia Rescue
 History: Possible urinary bladder mass
 Abnormal PE/Chem/CBC/UA Results:

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

Terrier X

The urinary bladder presented normal in size and tone with potential mild ventral displacement secondary to the mass in the area of the uterus to uterine remnant. The proximal urethra was indistinctly visualized owing to possible displacement secondary to the mass. Overt evidence of obstruction to urine outflow was not noted. No evidence of urinary bladder or inflammatory/neoplastic mural changes.

SEX

Female

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 4.4 cm in length. The right kidney measured 4.5 cm in length.

AGE

3 years

No overt pathology directly adjacent to the iliac trifurcation.

WEIGHT

12.8 pounds

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.39 cm width at the caudal pole and 0.39 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 0.38 cm width at the caudal pole and 0.74 cm width at the cranial pole.

INTERPRETED BY

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

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. 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.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

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 with mild debris. The cystic and common bile ducts were normal.

HOSPITAL NAME

Community VP

REFERRING VET

Dr. Carpenter

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.

INVOICE

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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.

DATE

03/16/2022

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



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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.

Free Abdomen

Large to expansive mildly nonhomogeneous to pinpoint hyperechoic mass was present occupying the caudal abdomen dorsal and cranial, to the urinary bladder as well as ventral and potentially lateral to the distal descending colon. The mass measured at least 6-7 cm in diameter. Subtle evidence of regional reactive mesentery was noted around the mass, no overt lymphadenopathy.

The area of the left and right ovaries was without overt pathology although definitive left or right ovarian tissue was obviously visualized.

ULTRASONOGRAPHIC FINDINGS

- Large nonhomogeneous subjectively solid mass dorsal and cranial to the urinary bladder in the area of the uterus/uterine remnant-given its location probable uterine or uterine remnant pathology such as neoplasia, granuloma, chronic stump pyometra or other are possible.
- Overtly normal urinary bladder.
- Normal bilateral kidneys.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mass did not overtly appear to derive from the urinary bladder, colon or proximal urethra while the possibility of adherence of the mass to these structures cannot be excluded. Potential for significant caudal abdominal lymphadenopathy or other unspecified pelvic inlet neoplasia could be possible. Exploratory laparotomy for gross inspection of the mass with potential for biopsy or resection is warranted. Alternatively, CT assessment for further clarification as well as surgical planning could be considered.



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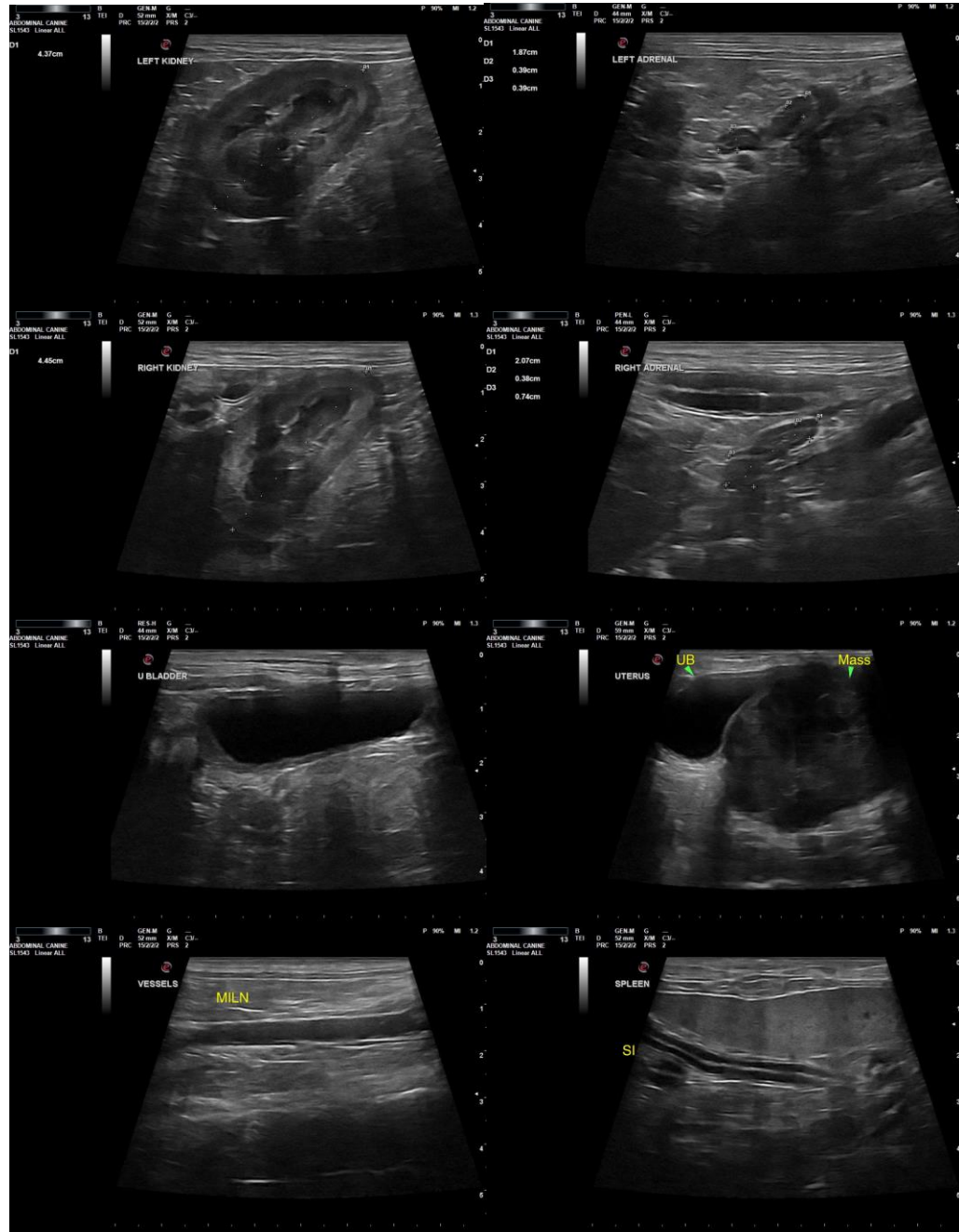
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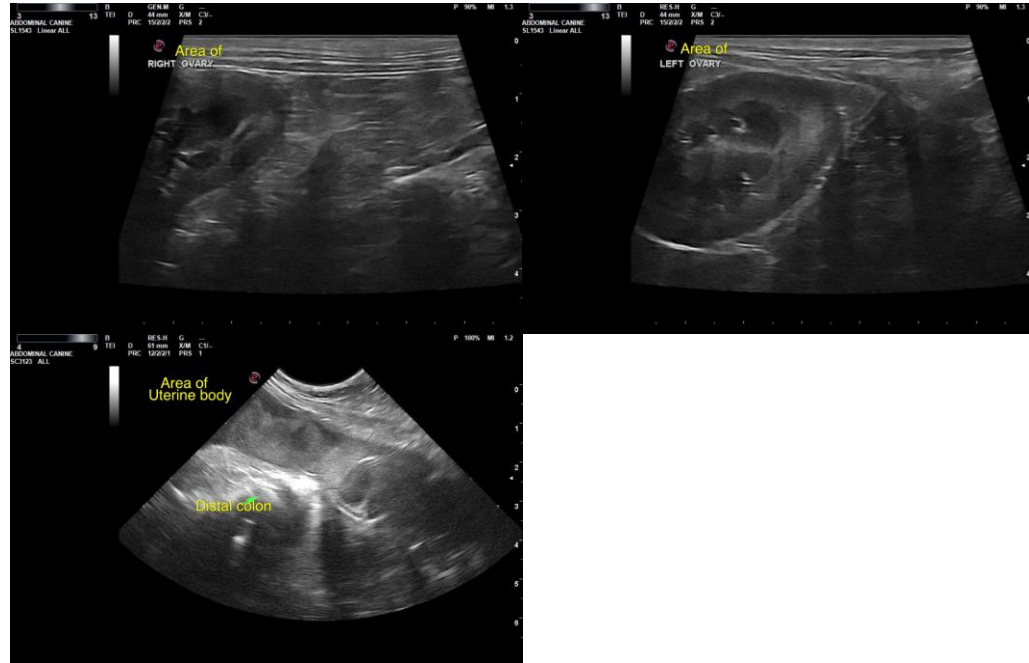
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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