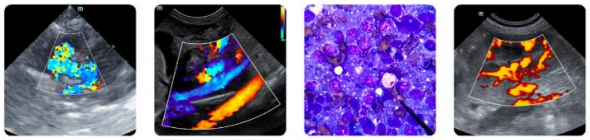


SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Nelson Sheers

SPECIES

Canine

BREED

Greyhound

SEX

MN

AGE

14 yrs, 9 mos

WEIGHT

73.8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Barton Heights AH

REFERRING VET

Dr. Candelaria

INVOICE

10700

DATE

3/9/26

PRESENTING CLINICAL SIGNS

History:

- BCS 2/9, Elevated LE"s, Anemia
- current meds: Metronidazole

Abnormal PE/Chem/CBC/UA Results: HCT-23.7; ALT-548; ALP-429

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 were noted.

There was no overt pathology in the area of the residual prostate.

No evidence of pathology in the area of the aortic trifurcation.

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 8.2 cm in length. The right kidney measured 8.9 cm in length.

Adrenal Glands

The left and right adrenal glands were not definitively visualized owing to increased periadrenal omental artifact.

Spleen

The spleen was markedly enlarged with asymmetrical contour and nonhomogeneous hypoechoic to nodular parenchyma. Splenic folding was present. Subjective adequate splenic vascularity was noted.

Liver/ Gallbladder

The liver presented marked hepatomegaly exhibiting a swollen contour with maintained homogeneous to mildly hyperechoic parenchyma. Normal hepatic vascular volume was present without overt 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 without evidence of retained ingesta, fluid, 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.

PATIENT

Nelson Sheers

SPECIES

Canine

BREED

Greyhound

SEX

MN

AGE

14 yrs, 9 mos

WEIGHT

73.8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Barton Heights AH

REFERRING VET

Dr. Candelaria

INVOICE

10700

DATE

3/9/26

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

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

Moderate volume echogenic peritoneal effusion and generalized nonhomogeneous hyperechoic omentum were noted. Several, variably swollen, nonhomogeneous hepatic lymph nodes adjacent to the portal vein were present, with an example measuring 5.7 cm x 3.5 cm.

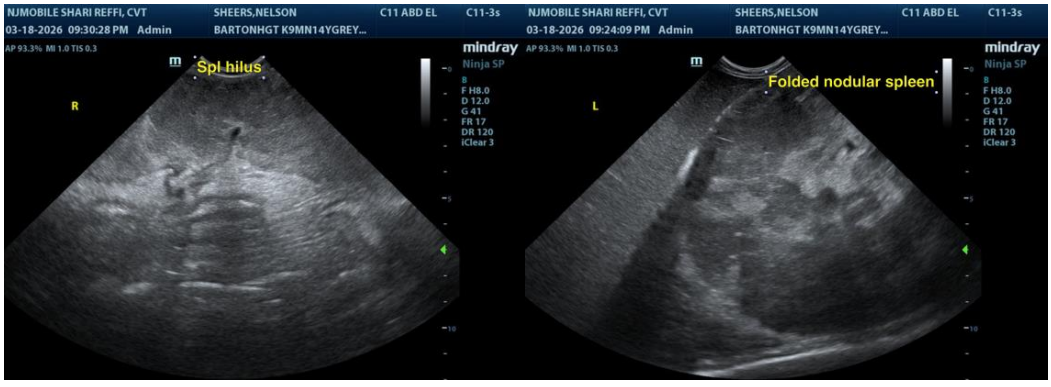
Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window. Subjective normal RA/RV volume was noted.

ULTRASONOGRAPHIC FINDINGS

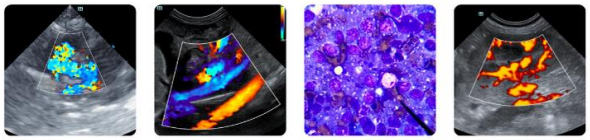
- Marked nonhomogeneous nodular asymmetrical splenomegaly with folding
- Markedly enlarged non-congested mildly hyperechoic liver
- Hepatic lymphadenopathy
- Peritoneal effusion and generalized nonhomogeneous omentum
- Subjective normal cardiac structure / function

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unfortunately, multicentric neoplastic criteria are met involving the spleen, likely liver, and hepatic lymph nodes with high suspicion for carcinomatosis, lymphomatosis, or similar. Assuming normal clotting status, hepatosplenic FNA cytology and effusion analysis could be considered for further clarification. However, an unfavorable prognosis is indicated.



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Nelson Sheers

SPECIES

Canine

BREED

Greyhound

SEX

MN

AGE

14 yrs, 9 mos

WEIGHT

73.8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Barton Heights AH

REFERRING VET

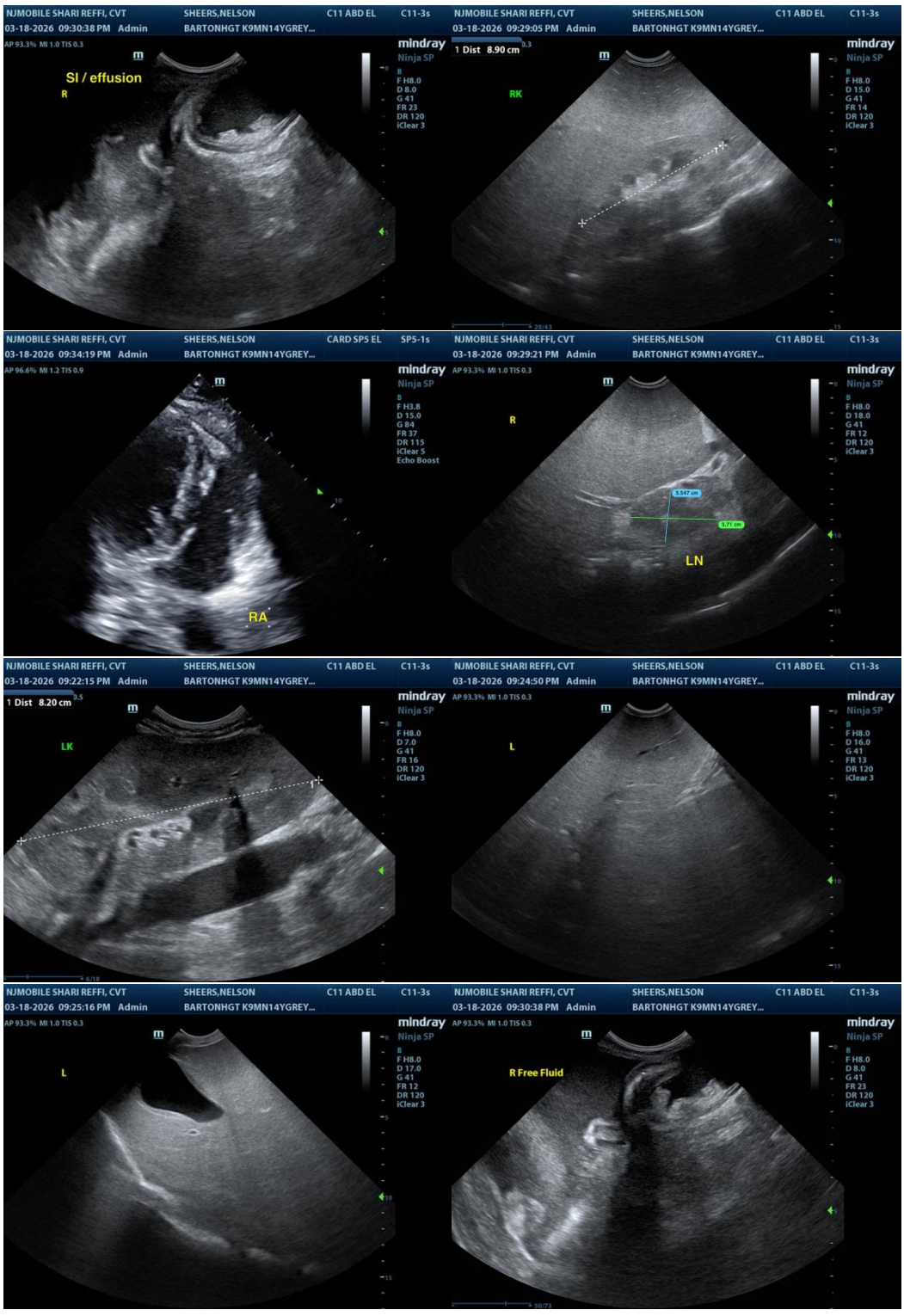
Dr. Candelaria

INVOICE

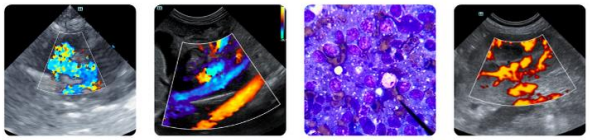
10700

DATE

3/9/26



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Nelson Sheers

SPECIES

Canine

BREED

Greyhound

SEX

MN

AGE

14 yrs, 9 mos

WEIGHT

73.8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Barton Heights AH

REFERRING VET

Dr. Candelaria

INVOICE

10700

DATE

3/9/26

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