

**PATIENT**

Izzy Keim

**SPECIES**

Canine

**BREED**

Yorkshire Terrier Mix

**SEX**

SF

**AGE**

11 years

**WEIGHT**

14 lbs.

**INTERPRETED BY**R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)**IMAGING  
PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Rigg

**INVOICE**

10231ag

**DATE**

3/25/22

**PRESENTING CLINICAL SIGNS**

ADR- Doesn't want to jump onto bed, BM's don't seem normal- soft in consistency  
Abnormal PE/Chem/CBC/UA Results: Bloated Abdomen, Ascites, Abdominal Mass

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

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 was noted.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some mildly increased echogenicity and loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.8 cm in length. The right kidney measured 4.4 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.34 cm width at the caudal pole and 0.50 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 0.46 cm width at the caudal pole and 0.41 cm width at the cranial pole.

**Spleen**

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, echogenic nodules were present throughout the cranial to caudal 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia, previous infarction, emerging mineralization or myelolipomas and are not overtly suggestive of neoplastic criteria.

**Liver/ Gallbladder**

The liver presented with mild to moderate generalized enlargement. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with 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. No evidence of small intestinal mucosa lesions.

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The colon walls presented intact yet prominent wall layering with mild thickened to echogenic submucosa. The colon lumen was primarily empty with lumen dilation.

**Pancreas****SPECIES**

Canine

The pancreas was normal in size and contour with heterogeneous to hypoechoic parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

**Free Abdomen****BREED**

Yorkshire Terrier Mix

Moderate volume cellular peritoneal free fluid was observed. Regional to generalized non uniform to nodular mesentery exhibiting nonspecific hypoechoic omental lesion to ill-defined mass noted in the mid abdomen. The omental mass measured approximately 5-6 cm in diameter. No overt evidence of significant lymphadenopathy.

**SEX**

SF

**ULTRASONOGRAPHIC FINDINGS****AGE**

11 years

**Primary Findings**

- Regional to generalized nonuniform to nodular mesentery.
- Ill defined mid abdominal hypoechoic omental mass lesion.
- Mild hepatomegaly without evidence of congestion-subjectively benign.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recommend abdominocentesis, rapid cytospin and rapid slide preparation of the sediment to conserve the integrity of the cells would be recommended in order to optimize the cytological interpretation. Culture of the fluid can also be considered if any suspicion of inflammatory elements is noted. Carcinomatosis and lymphomatosis are the primary differentials.

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The free fluid has mild echogenic changes to it. Assuming no subnormal albumin that would diminish oncotic pressures to the point of causing free fluid as well as no evidence of passive congestion with hepatic vasculature or vena cava and no significant, diffuse hepatic disease is noted as well as no evidence of intestinal perforation or other pathology that would be responsible for effusion of this nature, lymphatic obstruction owing to carcinomatosis, lymphomatosis or similar is my primary concern.

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Three view chest radiographs are suggested to rule out concurrent thoracic pathology and assess cardiopulmonary status.

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svsmobileimaging.com 309-737-3070



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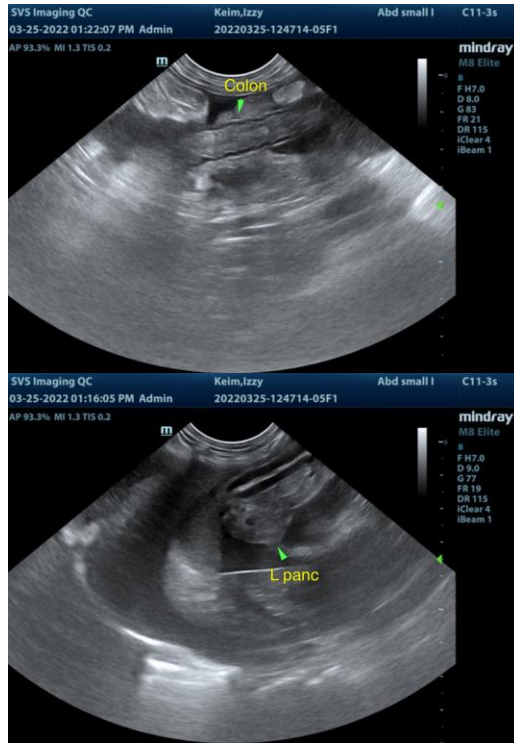
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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