



PATIENT

Katie Mhley

PRESENTING CLINICAL SIGNS

Lethargic, decreased appet. and thirst. Rads done for lameness in RHL, large splenic mass noted. Current meds: Galliprant 60mg PRN

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Rbc 4.78; hct 30.9; Hgb 10.8; Retic 9.1. Chem-Pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Boxer Mix

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 were noted.

SEX

FS

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 6.0 cm in length.

AGE

12.5yr

The area of the aortic trifurcation was free of pathology.

WEIGHT

60lb

The area of the iliac trifurcation was free of pathology including no evidence of medial, iliac or sublumbar lymphadenopathy.

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 0.49 cm width at the caudal pole and 2.3 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.58 cm width at the caudal pole and 2.1 cm length.

Spleen

IMAGING PERFORMED BY

Shari Reffi CVT

A mass involving the caudal spleen with secondary asymmetrical capsule expansion and disruption was present and measured 11-12 cm in diameter. The mass appeared to extend caudally to the level of the apical urinary bladder. The parenchyma of the mass was heterogeneous to mixed echogenic with areas of cavitation. The non-affected spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Regional omental inflammation was present around the mass.

HOSPITAL NAME

Morris Hills Vet Clinic

Liver/Gallbladder

REFERRING VET

Dr. Hirshenson

The liver presented enlarged in size. 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.

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Gastrointestinal

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The stomach was indistinctly visualized yet non-distended containing mild non-shadowing ingesta/chyme.

SPECIES

Canine

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.

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

Pancreas

BREED

Boxer Mix

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.

SEX

FS

Free Abdomen

Mild volume peritoneal free fluid exhibiting mild fluid echogenic changes was present. Peripheral perisplenic mild nonuniform hyperechoic omentum was present around the splenic mass.

AGE

12.5yr

No overt omental lymphadenopathy.

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

60lb

- Large nonhomogeneous/mixed echogenic splenic mass.
- Associated mild volume peritoneal effusion and perisplenic hyperechoic omentum.
- Mild hepatic parenchymal remodeling-subjectively benign.
- Mild age related renal changes.
- Overtly normal GI tract.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although histopathology is required for definitive diagnosis, the splenic mass is most suggestive of neoplasia such as sarcoma or other. Benign pathologies are possible yet considered less likely. Likely secondary mild hemoabdomen present. No obvious or definitive evidence of major organ metastasis although the possibility of micrometastasis or regional omental seeding cannot be definitely excluded.

IMAGING PERFORMED BY

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Three view chest radiographs are recommended if not done to assess for occult thoracic pathology. Assuming no evidence of pathology on chest radiographs, splenectomy with gross inspection of the perisplenic omentum and liver may be considered. A guarded prognosis pending splenic pathology is indicated.

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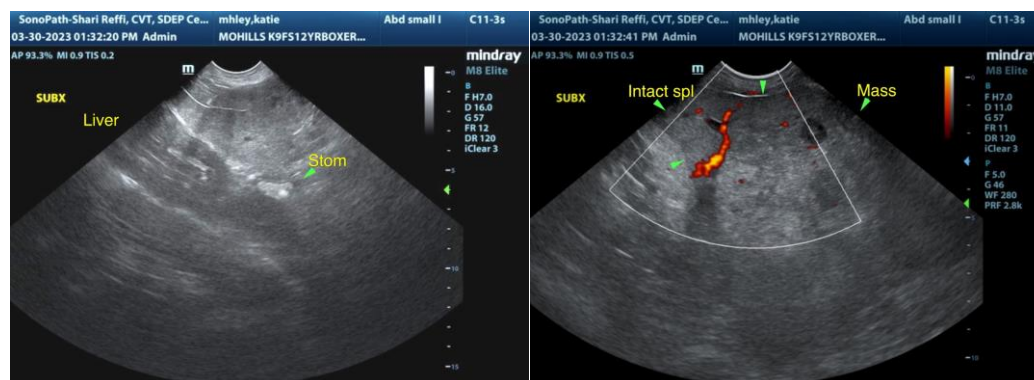
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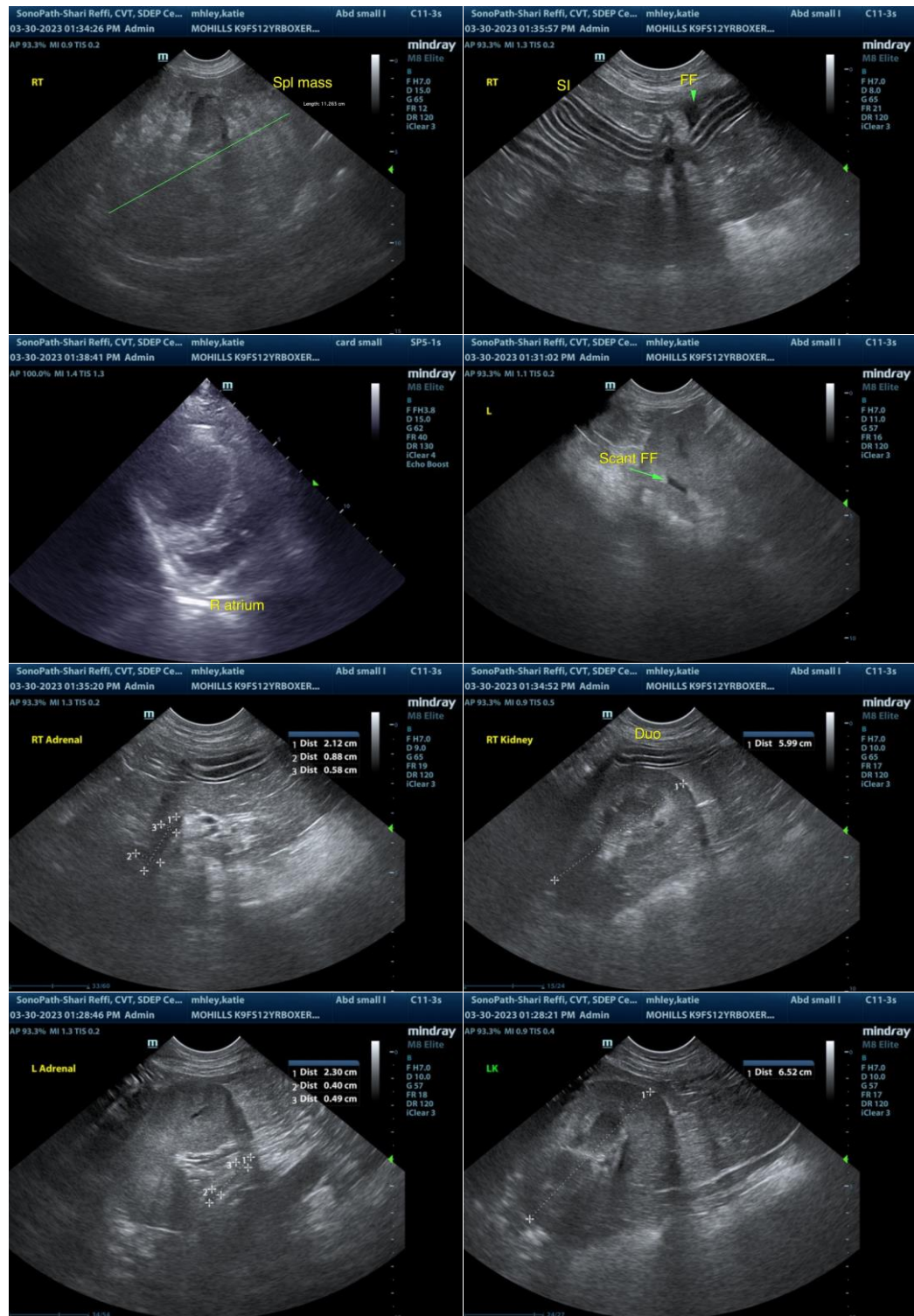
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I



PATIENT

can be of any further assistance, please contact me.

Katie Mhley

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

mac.daniel@sonopath.com

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