

PATIENT

Martin Herrera

SPECIES

Canine

BREED

Schnauzer

SEX

Neutered Male

AGE

13 Years

WEIGHT

18.8 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Paul Kim

HOSPITAL NAME

Ridgefield Park Animal
Hospital

REFERRING VET

Dr. Paul Kim

INVOICE

14758

DATE

03/30/26

PRESENTING CLINICAL SIGNS

Submitted study contained 34 still images and three videos for review.

Hematuria 2 days ago, BW to recheck the liver function.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was normal in size and tone with accumulated particulate to focally hyperechoic urinary bladder sediment versus urinary bladder masses with an example measuring 1.1 cm in diameter. The trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen. The ureteral papillae were normal. The ureters were not visible which is normal. Color doppler assessment of the urinary bladder was not utilized.

A solitary asymmetrically enlarged nonhomogenous medial iliac lymph node was present measuring 2.8 cm x 1.5 cm.

The prostate presented subjective to mildly enlarge exhibiting nonhomogenous pinpoint to focally hyperechoic parenchyma measuring approximately 2.0 cm in diameter.

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 increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Pinpoint hyperechoic medullary mineral was present. The left kidney measured 4.5 cm in length. The right kidney measured 4.7 cm in length.

Adrenal Glands

The left adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.50 cm width in the caudal pole.

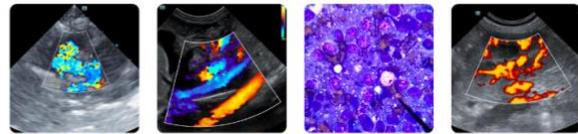
The right adrenal gland was not definitively visualized.

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.

Liver & Gallbladder

The liver revealed generalized hepatomegaly. The liver parenchyma was mild / moderate nonuniform and hypoechoic to the spleen with a mild/ moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. A moderately sized to expansive nonhomogenous cystic liver mass was present measuring approximately 8.0 cm to 8.5 cm in diameter.



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The gallbladder was non distended in size with moderate congealed nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

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.

Normal visible colon wall layers were present with apparent 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

No overt lymphadenopathy or peritoneal effusion was present.

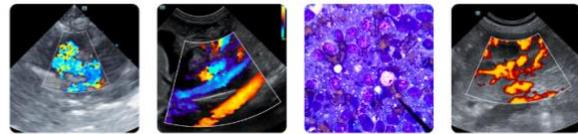
ULTRASONOGRAPHIC FINDINGS

- Accumulated urinary bladder sediment/mineral versus urinary bladder masses.
- Mildly enlarged nonhomogenous focally hyperechoic to possibly mineralized residual prostate gland.
- Asymmetrically enlarged nonhomogenous medial iliac lymph node.
- Nonhomogenous to cystic liver mass.
- Congealed gallbladder debris- not consistent with mature mucocele criteria.
- Age-related kidneys with focal medullary mineral.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Concern for urinary bladder and prostatic neoplastic criteria with medial iliac metastasis is warranted. Correlation with urinalysis, culture/sensitivity and screening BRAF assay is recommended. Multicentric neoplasia involving the liver is suspected. Concurrent FNA cytology of the liver mass is warranted for further assessment.





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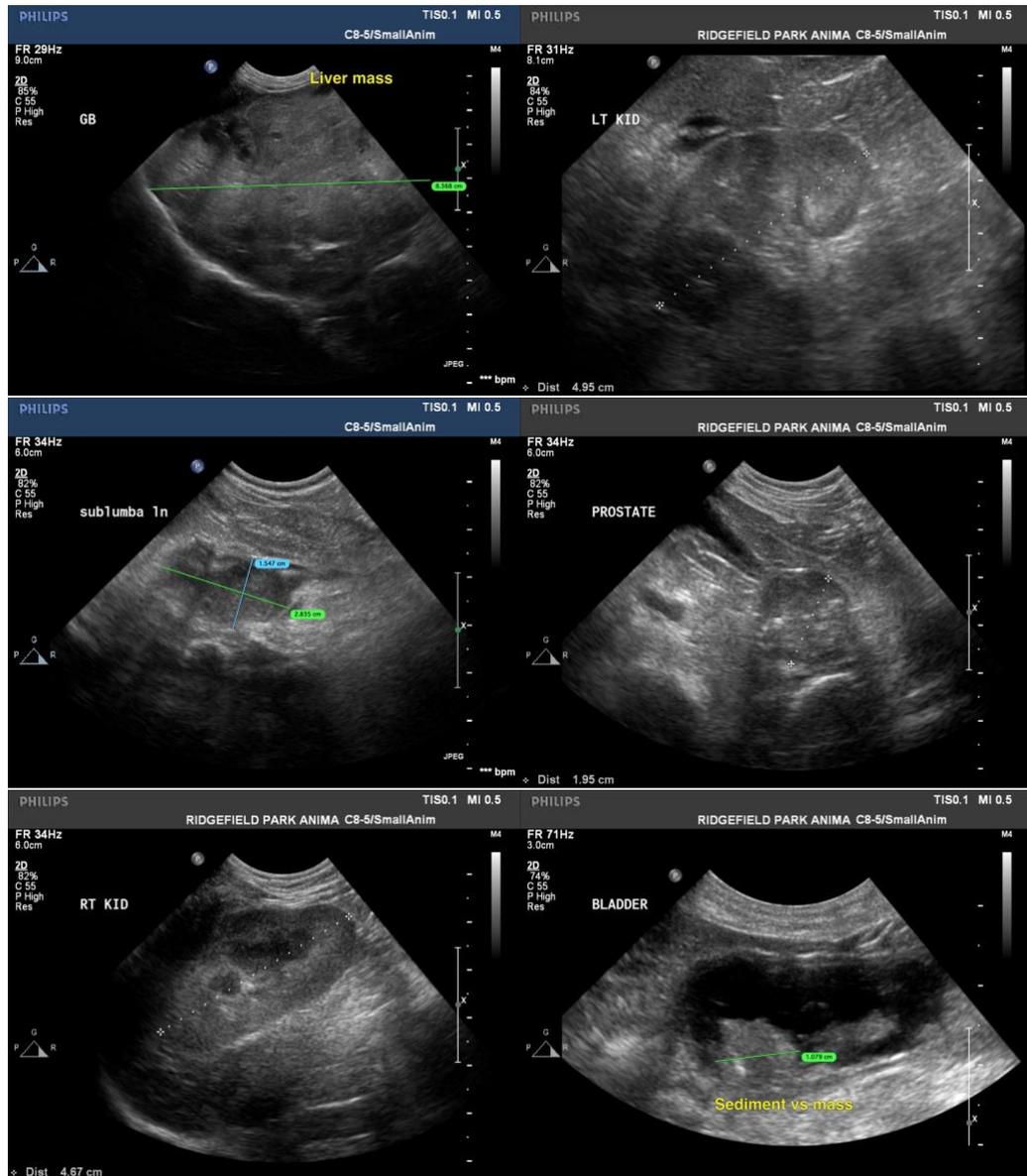
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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