**PATIENT**Pepper Melvin
Crawford**SPECIES**

Canine

BREED

Poodle X

SEX

Neutered male

AGE

13 years

WEIGHT

12 pounds

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

Amy Mayhew LVT

HOSPITAL NAME

SVS Imaging Michigan

REFERRING VET

Family Pet Practice

INVOICE

10344ag

DATE

04/12/2022

PRESENTING CLINICAL SIGNS

History: Recent bout of inappetence, vomiting, and soft stools. Previous AUS noted splenic and hepatic changes. Presents for monitoring.

Abnormal PE/Chem/CBC/UA Results: See attached BW and prior AUS report

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 5 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.

The residual prostate was free of pathology measuring 1.1 cm in diameter.

The area of the aortic trifurcation was free of pathology.

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 4.2 cm in length. The right kidney measured – cm in length

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.59 cm width in the cranial pole and 0.85 cm width in the caudal pole. The right adrenal gland measured 0.8 cm width in the cranial pole and 0.74 cm width in the caudal pole.

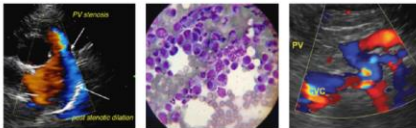
Spleen

The spleen exhibited normal overall size with 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 previously noted mildly expansive nonhomogeneous to hypoechoic lesion in the mid to cranial spleen measuring 1.8 cm x 1.2 cm was present. An additional nonexpansive to disruptive nodule was present in the caudal medial spleen measuring 0.78 cm x 0.42 cm. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Previously noted left ventral intraparenchymal nodules were present, one nodule exhibited primary uniform hypoechoic parenchyma measuring 2.3 cm x 1.1 cm. An additional nodule exhibiting heterogeneous parenchyma measuring 1.9 cm x 1.1 cm was present in the left ventral liver. 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 and mild luminal debris. The cystic and common bile ducts were normal.

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with mild luminal gas and no signs of ileus, obstruction, or foreign material. The ventral gastric body wall measured 0.43 cm in width.

The duodenum exhibited intact yet subjective prominent wall layering with subtle corrugation and mucosal speckling. The duodenum wall measured 0.46 cm in width.

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

Pancreas

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

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS**Primary Findings**

- Previously noted mildly expansive nonhomogeneous splenic lesion.
- Nonexpansive previously noted variably echogenic left liver nodules.
- Suspect gastroduodenitis.

Secondary Findings

- Mild chronic renal changes.
- Mild gallbladder debris (non-mucocele).
- Mild pancreatic remodeling-suspect age related variant, potential for low grade to chronic pancreatitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Subjectively the hepatosplenic nodules appear to be essentially static in size and appearance with potential for minor progression. Previously mentioned etiologies are still applicable. Mild concurrent vacuolar hepatic changes suspect given the ALP elevation. Considerations may include continued serial sonographic monitoring of the nodules vs previously mentioned biopsy/FNA for final assessment. Correlation of the pancreatic presentation with a Spec CPL could be considered. As needed supportive therapy for suspect gastroduodenitis and low-grade pancreatitis would be reasonable.

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svsimagingmi@gmail.com



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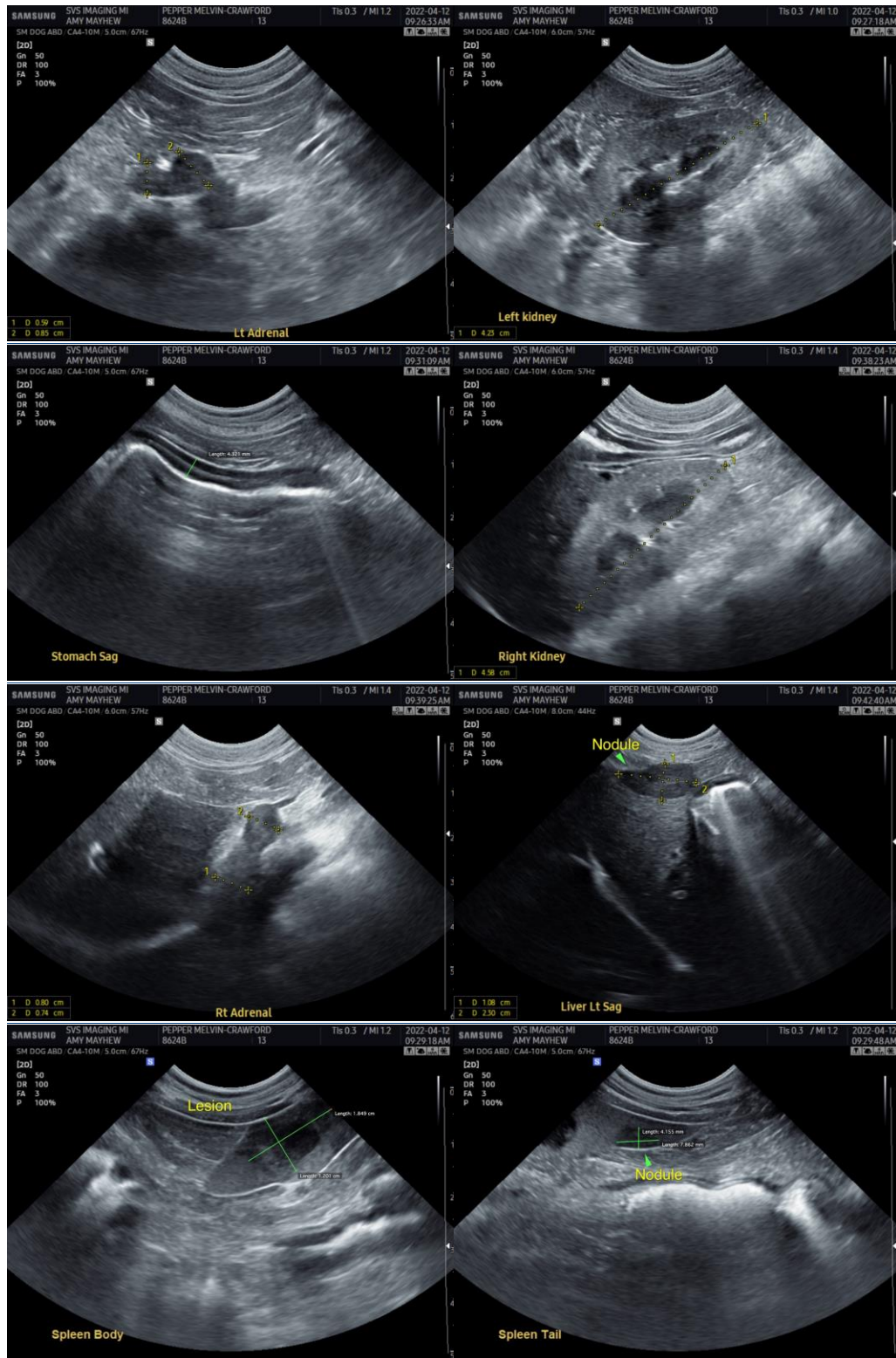
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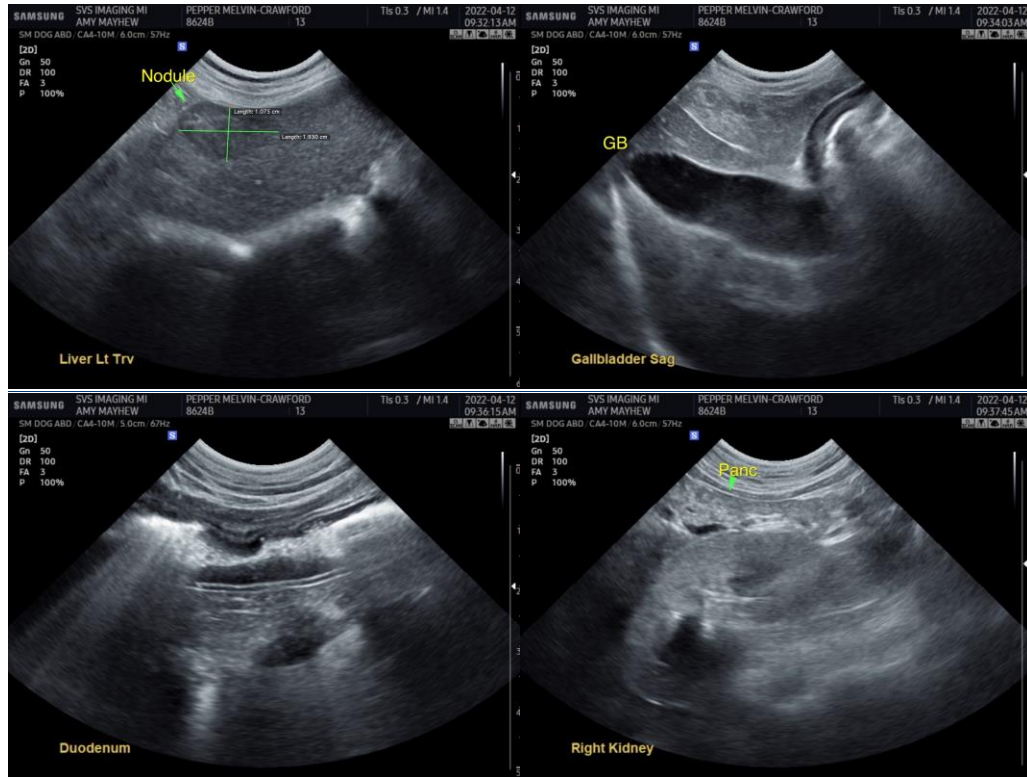
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
info@SonoPath.com