



PATIENT

Misia Czuprynska

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Spayed Female

AGE

10 Years

WEIGHT

20.12 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jose

HOSPITAL NAME

Elmhurst AEH

REFERRING VET

Dr. Suci

INVOICE

14736

DATE

4/15/22

PRESENTING CLINICAL SIGNS

History: Hx of high liver enzyme for the past few years, decreased appetite, FUO, Tx by rDVM with clavamox, holistic product for liver, loss weight, muscle waste, this AM presented to the ER due to Lethargic, inappetence and possible fever.

Abnormal PE/Chem/CBC/UA Results: Hyperthermia, T 103.9 F, very tense abdomen, Possible mass on mid abdomen palpated, 5% dehydration, QAR, MM: pink pale. BW 4/12/22 Superchem: Alk Phosphatase: 1,151 (H) 5-131 Amylase: 1,376 (H) 290-1,125 Triglyceride: 693 (H) 29-291 CBC: WBC: 24.2 (H) 4.0-15.5 RBC: 4.5 (L) 4.8-9.63 HGB: 9.6 (L) 12.1-20.3 HCT: 31 (L) 36-60 Platelet: 489 (H) 170-400 Neutrophils: 22,506 (H) 2,060-10,600 Fecal: Negative UA: USG: 1.040 (N) Protein: 3+ (H) Bilirubin: 3+ (H) Occult Blood: 3+ (H) 1/25/2022 CHEM: Alk Phosphatase: 1679 (H) 5-131 10/29/2021 CHEM: Alk Phosphatase: 3262 (H) 5-131

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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.

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 6.1 cm in length. Possible to suspected hypoechoic to asymmetrical paracortical lesion was present adjacent to the caudomedial right kidney, measuring 2.5 cm in diameter. Potentially, this could indicate a perirenal extension from the splenic mass. The right kidney measured 6.5 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 0.72 cm width at the caudal pole and 0.57 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 0.73 cm width at the caudal pole and 0.65 cm width at the cranial pole.

Spleen

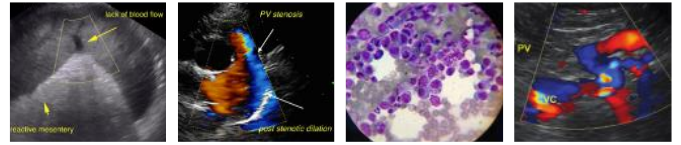
A moderately sized to expansive mass was present, subjectively involving and originating from the mid caudal spleen measuring 8-9 cm diameter. The parenchyma of the mass was heterogeneous to mixed echogenic without areas of cavitation. Concurrent, variably expansive to hypoechoic splenic intraparenchymal nodules, not involved with the mass, were present. An example measured 1.0 cm in diameter. 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.

Liver

The liver exhibited generalized enlargement with areas of mild capsule asymmetry. The liver parenchyma was nonuniformly remodeled to indistinctly nodular. The hepatic and portal vasculature were normal in appearance without signs of congestion.



PATIENT	The gallbladder was non distended in size with mild gallbladder debris. The cystic duct and common bile ducts were normal without evidence of dilation.
Misia Czuprynskia	
	<i>Gastrointestinal</i>
SPECIES	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate non-shadowing to focally hypoechoic ingesta without signs of obstruction or foreign material.
Canine	
BREED	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.
Mini Schnauzer	Normal visible colon wall layers were present with apparent formed feces in lumen.
SEX	<i>Pancreas</i>
Spayed Female	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.
AGE	<i>Free Abdomen</i>
10 Years	Generalized primarily perisplenic nonuniform hyperechoic mesentery was present with mild volume peritoneal free fluid. No overt lymphadenopathy present.
WEIGHT	ULTRASONOGRAPHIC FINDINGS
20.12 Pounds	<ul style="list-style-type: none"> • Large nonhomogeneous to expansive primary splenic mass with concurrent expansive splenic parenchymal nodules • Hepatomegaly, exhibiting remodeled to nonhomogeneous indistinctly nodular parenchyma • Bilateral chronic renal changes with suspect possible left paracortical lesion • Subjective mild gastroenteritis pattern with retained gastric ingesta • Generalized primarily perisplenic nonuniform hyperechoic mesentery and mild volume peritoneal free fluid
INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	REFERRING VET
Jose	Although not definitive, strong concern for regional perisplenic omental seeding as well as left kidney metastasis. Potential for hepatic metastasis possible, although the hepatic presentation may indicate separate chronic hepatopathy, such as cholangiohepatitis or similar given the breed. Regardless, the splenic mass meets neoplastic criteria with strong suspicion for regional omental seeding and left kidney metastasis. This presentation likely precludes surgical options in this case as a probable unfavorable prognosis is unfortunately indicated.
HOSPITAL NAME	INVOICE
Elmhurst AEH	14736
REFERRING VET	DATE
Dr. Suci	4/15/22



PATIENT

Misia Czuprynska

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Spayed Female

AGE

10 Years

WEIGHT

20.12 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jose

HOSPITAL NAME

Elmhurst AEH

REFERRING VET

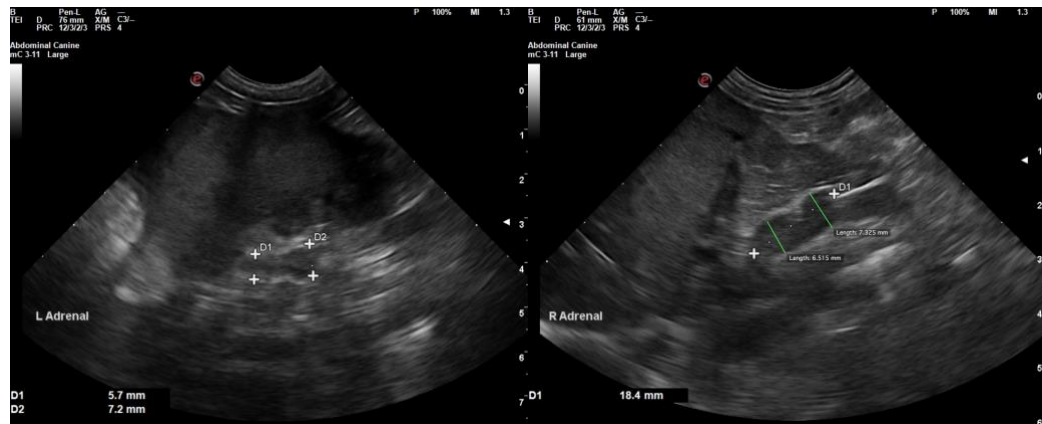
Dr. Suci

INVOICE

14736

DATE

4/15/22





PATIENT

Misia Czuprynska

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Spayed Female

AGE

10 Years

WEIGHT

20.12 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jose

HOSPITAL NAME

Elmhurst AEH

REFERRING VET

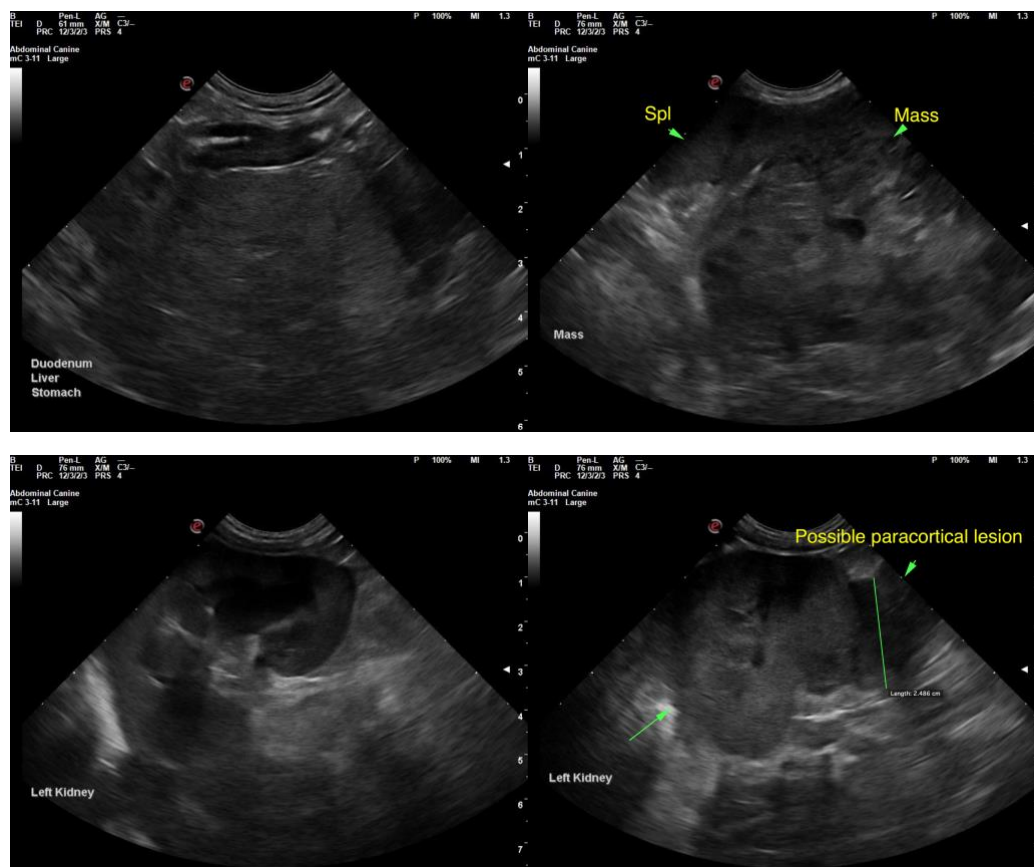
Dr. Suci

INVOICE

14736

DATE

4/15/22



The information and recommendations provided are based on the images presented by the referring veterinarian. 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