



**PATIENT**

Mazie Swann

**SPECIES**

Canine

**BREED**

Canine

**SEX**

Spayed Female

**AGE**

10 Years

**WEIGHT**

59 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

**HOSPITAL NAME**

Willakenzie AC

**REFERRING VET**

Dr. Popuette

**DATE**

4/20/23

**Invoice**

22107

**PRESENTING CLINICAL SIGNS**

History: Increased respiratory rate and effort, increased abdominal firmness, decreased appetite  
Current Medications budesonide, metoclopramide, famotidine, furosemide Radiographic Findings  
increased cardiac size Rt atrium, increased caudal cardiac waist, possible fluid in lungs Primary  
Question/Differential to Be Answered in This Exam is there a heart problem, fluid in lungs?

Abnormal PE/Chem/CBC/UA Results: most recent bloodwork results the liver enzymes were elevate

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 7.4 cm in length. The right kidney measured 7.2 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 0.48 cm width at the caudal pole and 0.50 cm at the cranial pole.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.38 cm width at the caudal pole and 0.55 cm width at the cranial pole.

**Spleen**

The spleen was normal in size and contour with generalized finely textured homogenous parenchyma. A solitary nondisruptive, well-demarcated, hyperechoic nodule was noted in the cranial spleen. The nodule measured 0.66 cm in diameter. The nodule did not distort the splenic capsule. No splenic masses were noted. Splenic vascularity was normal.

**Liver**

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The visualized cranial abdominal caudal vena cava at the level of the liver and diaphragm exhibited normal volume without evidence of congestive criteria.

The gallbladder was non distended in size with mild echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation. The gallbladder was otherwise normal.



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***Gastrointestinal***

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The stomach presented intact wall layering with a normal wall layer ratio. Mild gastric ingesta was noted, sonographically consistent with food.

**SPECIES**

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.

Canine

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

**BREED**

***Pancreas***

Canine

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.

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***Free Abdomen***

No omental masses, lymphadenopathy or peritoneal effusion was present.

**AGE**

10 Years

**ULTRASONOGRAPHIC FINDINGS**

- Sonographically normal spleen with benign cranial nodule- consistent with benign myelolipoma
- Normal volume liver, benign hepatopathy
- Mild gallbladder debris (non-mucocele)
- Mild age-related kidneys

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No sonographic evidence of significant visceral pathology, including no evidence of neoplastic criteria or hepatic congestion. Considerations for the liver may include suspect vacuolar hepatopathy criteria, inflammatory disease, i.e., cholangiohepatitis (given the concurrent presence of gallbladder debris), or other hepatopathy without evidence of infiltrative neoplasia. Screening hepatic FNA cytology could be considered for further clarification, assuming normal clotting status. Hepatosupportive medications, including Denamarin or Ursodiol may prove beneficial.

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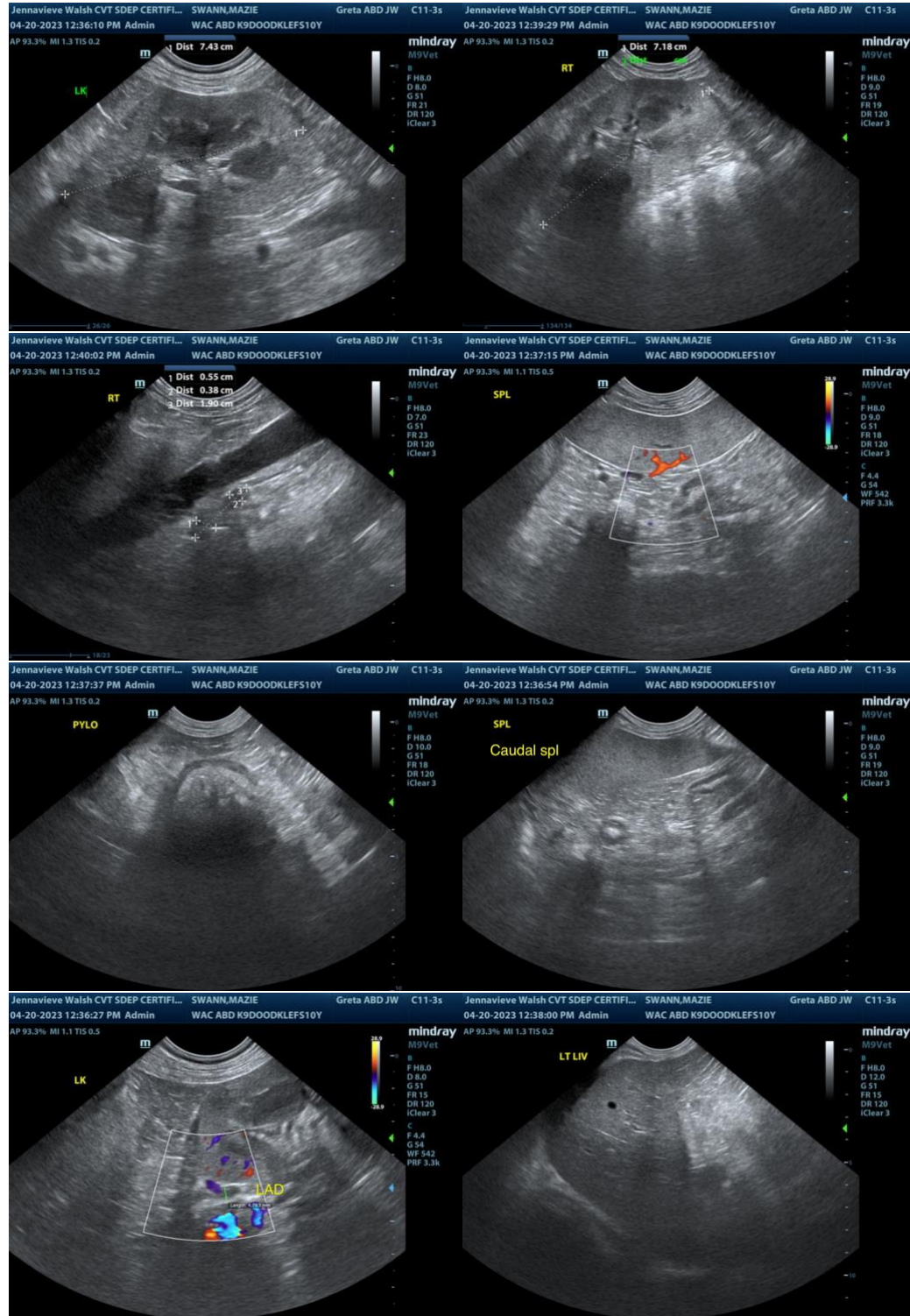
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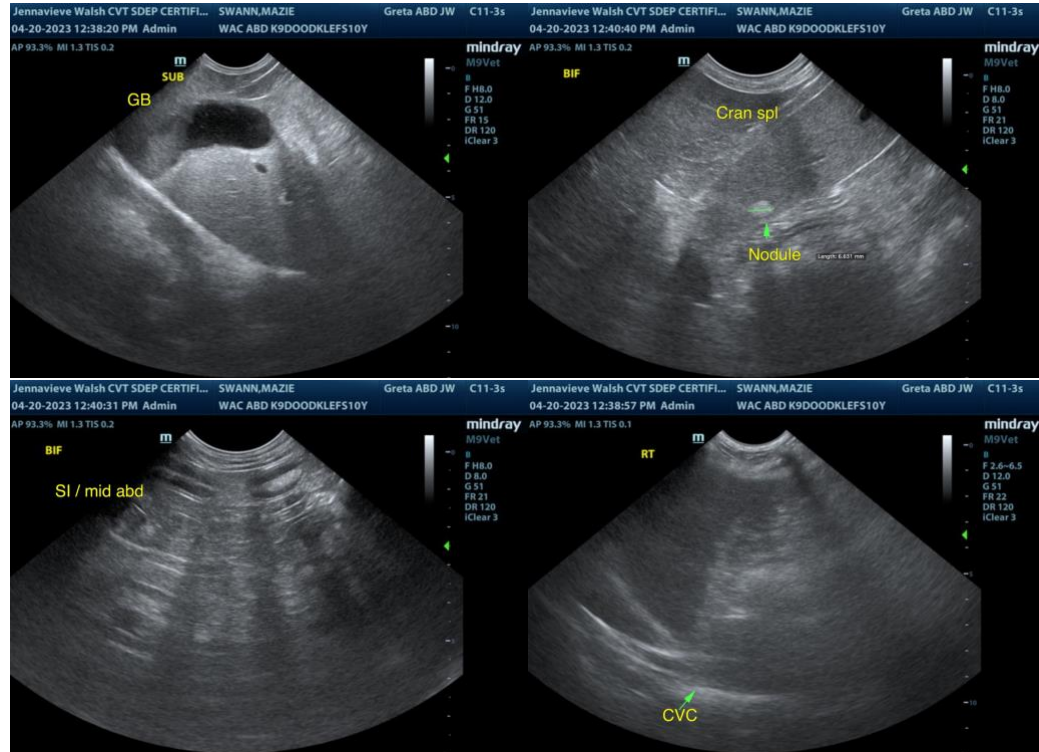
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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