

PATIENT	PRESENTING CLINICAL SIGNS
Piper Sommer	Spayed June 2022. Feb 24, 23 seen for UTI like symptoms, hematuria observed. March 17, 23 at annual PE and vaccines noted physical changes associated with estrus - mammary and vulva enlargement. April 17, 23 Progesterone level - 15.6!!! Confirms concerns for ovarian tissue remaining. US to assess where tissue may be to consider exploratory and excise for histopath. Has been on Nexgard Spectra.
SPECIES	
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Bernadoodle	Urinary System
SEX	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.
Spayed Female	
AGE	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 5.3 cm. The right kidney measured 5.4 cm.
2.5 Years	
WEIGHT	Adrenal Glands
35.4 kg	The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.3 cm length x 0.63 cm at the caudal pole. The left adrenal gland measured 2.4 cm length x 0.62 cm at the caudal pole.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	Liver
Crystal Hill	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 gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
HOSPITAL NAME	Gastrointestinal
Haldimand AH	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.
REFERRING VET	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.
Dr. Rode	Normal visible colon wall layers were present with apparent formed feces in lumen.
INVOICE	
46917	
DATE	
4/25/23	
	Pancreas



PATIENT

Piper Sommer

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.

SPECIES

Canine

Free Abdomen

The uterine remnant was overtly normal in sonographic appearance without obvious evidence of stump granuloma or stump pyometra criteria. The subjective uterine remnant measured approximately 0.80 cm in diameter.

BREED

Bernadoodle

A small, uniform hypoechoic, primarily spherical structure was noted caudal to the right kidney on the right side of the abdomen, measuring approximately 1.2 cm in diameter.

SEX

Spayed Female

Intermittent, mildly prominent to enlarged mesenteric nodes were present, primarily in the mid to left abdomen, caudal to the left kidney and adjacent to the aorta. Example measured 2.5 cm x 0.80 cm. Minor asymmetrical lymph node contour with primarily homogeneous parenchyma. The lymph nodes were not consistent with inflammatory or neoplastic criteria.

AGE

2.5 Years

No evidence of peritoneal effusion.

WEIGHT

35.4 kg

ULTRASONOGRAPHIC FINDINGS

- Small hypoechoic structure caudal to the right kidney in the right mid abdomen.
- Intermittent subjective benign/reactive mesenteric lymph nodes in the mid to left abdomen.
- Overtly normal uterine remnant – no evidence of granuloma or stump pyometra criteria.
- Normal bilateral kidneys and urinary bladder.

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the significantly elevated progesterone level, and assuming concurrent clinical signs suggestive of estrus, correlation with vaginal cytology to assess for concurrent cornified epithelial cells would be ideal. Likewise, correlation of increased progesterone levels with antimullerian hormone assay, which is another reliable indicator of functional gonadal tissue, could be considered.

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Haldimand AH

REFERRING VET

Dr. Rode

If strong clinical suspicion of ovarian remnant, the small hypoechoic structure noted caudal to the right kidney would be suggestive of retained right ovarian tissue. No obvious evidence of retained left ovarian tissue, with evidence of mild regional mid left benign mesenteric lymphadenopathy. However, if exploratory surgery is elected in this case, gross inspection of both the area of the previous right and left ovaries would be recommended.

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Piper Sommer

SPECIES

Canine

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Bernadoodle

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IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Haldimand AH

REFERRING VET

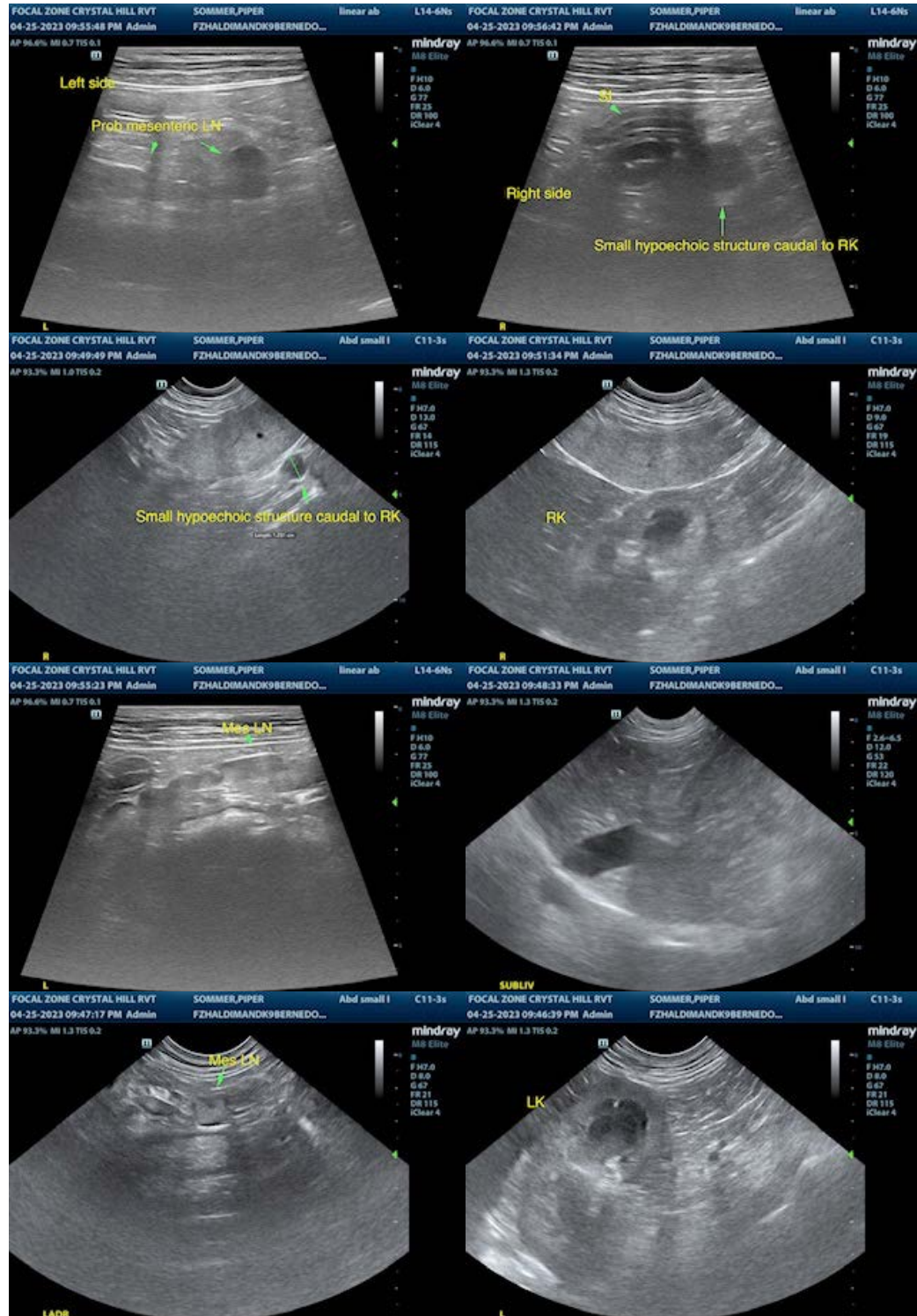
Dr. Rode

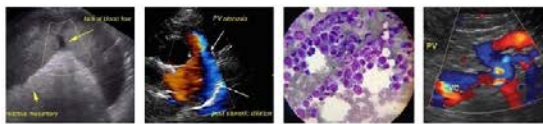
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SEX

Spayed Female

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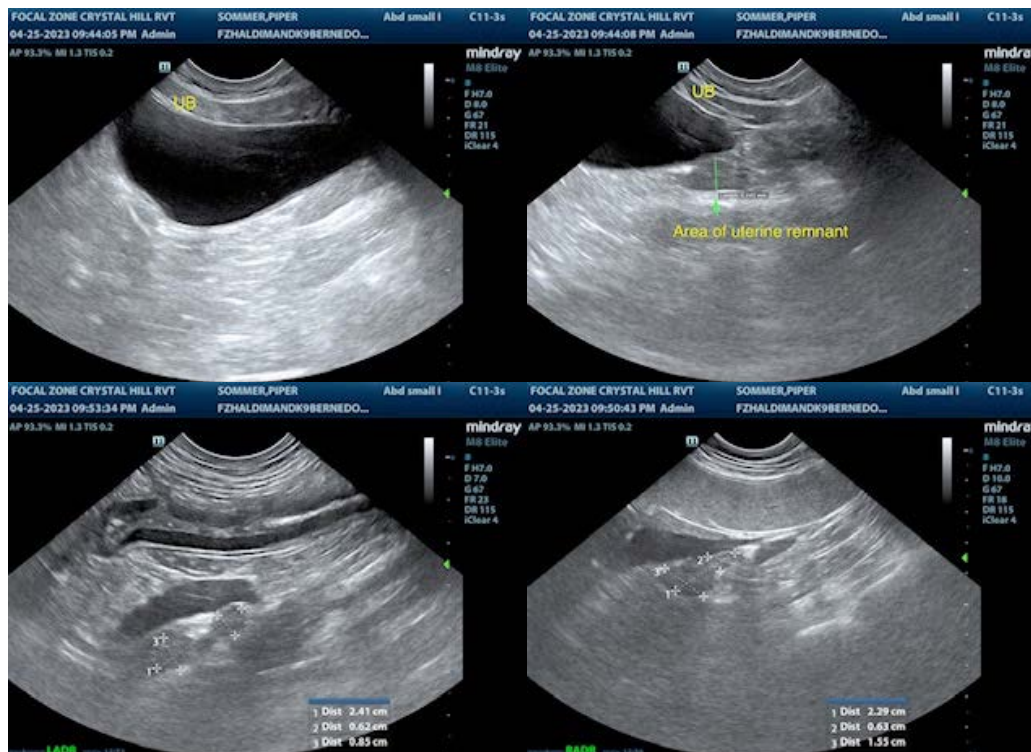
Dr. Rode

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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