



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Kiwi Hernandez	Presented for an abdominal ultrasound to further evaluate recurrent Gastrointestinal problems. PT has been having blood in the feces and Anorexia. Pt has been on metronidazole, Fenbendazole, omeprazole, DiaGel and even with this medication problems continues. FNA of LNS and jejunum was done: Pending
<b>SPECIES</b>	
Canine	Abnormal PE/Chem/CBC/UA Results: BW: CBC:Basophilia 0.20, rest wnl CHEM: Increased GLOB 4.7, Decreased BUN 5 cPL: Normal 4DX: neg all Fecal: NPS
<b>BREED</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Mixed Medium	<b>Urinary System</b>
<b>SEX</b>	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.
FS	
<b>AGE</b>	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 6.0 cm in length. The right kidney measured 6.4 cm in length.
2yr	
<b>WEIGHT</b>	The area of the uterine remnant appeared normal and free of pathology.
35lb	
<b>INTERPRETED BY</b>	<b>Adrenal Glands</b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.46 cm width at the caudal pole and 2.7 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.53 cm width at the caudal pole and 2.8 cm length.
<b>IMAGING PERFORMED BY</b>	<b>Spleen</b>
Dr Gabriel Ferrer DVM	The spleen exhibited normal size and contour with diffuse discrete hypoechoic splenic micronodules were present. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.
<b>HOSPITAL NAME</b>	<b>Liver/Gallbladder</b>
Pulse: Pet Ultrasound Services	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.
<b>REFERRING VET</b>	<b>Gastrointestinal</b>
Dr. Javier Rodriguez	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.
<b>INVOICE</b>	
13633ag	A segmental moderately sized intestinal mass was present in the mid abdomen consistent with jejunal location measuring 5-6 cm x 3-4 cm. The mural mass exhibited moderate to marked mural hypertrophy, decreased echogenicity and loss of discernable intestinal wall layering. By comparison, the intact intestinal wall measured 0.333 cm in width. Mildly prominent intestinal mucosa layer was
<b>DATE</b>	
04/28/2023	



**PATIENT**

Kiwi Hernandez

present. Concurrent segmental thickened subjectively intact colon wall was present with generalized soft feces.

**Pancreas**

**SPECIES**

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.

**BREED**

Mixed Medium

**Free Abdomen**

Multifocal variably sized irregular non-homogenous mesenteric lymph nodes were present, an example measuring 3.4 cm x 2.0 cm. The majority of the nodes exhibited abnormal width: length ratio >0.5.

**SEX**

FS

Mild volume peritoneal effusion was present.

Generalized primarily peri intestinal to perilymphatic hyperechoic omentum was present.

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

2yr

- Small intestinal mass-consistent with jejunal location.
- Concurrent segmentally thickened colon containing soft feces.
- Micronodular spleen.
- Associated variably enlarged irregular mesenteric lymphadenopathy.
- Mild volume peritoneal effusion.

**WEIGHT**

35lb

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Although pending sampling is required for further assessment, primary concern for multicentric enterocolic, splenic and lymphatic neoplasia is indicated. Considerations include round cell neoplasia, carcinoma, intestinal stromal tumor, leiomyoma/leiomyosarcoma or other. Correlation with pending cytology is recommended with potential oncology consult.

Assuming normal clotting status and using a 25g needle, a splenic FNA for screening cytology is warranted for further staging. Intestinal and lymphatic surgical biopsy may be required for a definitive diagnosis.

Three view chest radiographs are recommended if not done to assess for occult thoracic pathology.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr Gabriel Ferrer  
DVM

**HOSPITAL NAME**

Pulse: Pet Ultrasound  
Services

**REFERRING VET**

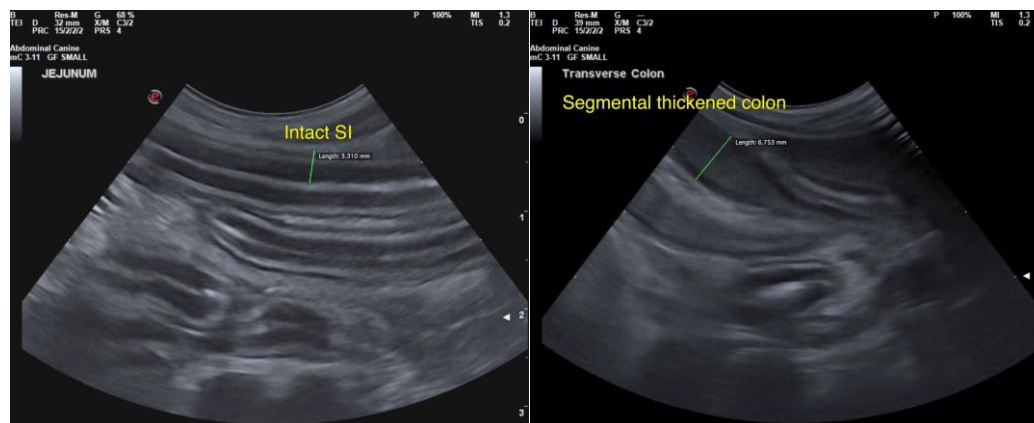
Dr. Javier Rodriguez

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**SPECIES**

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**BREED**

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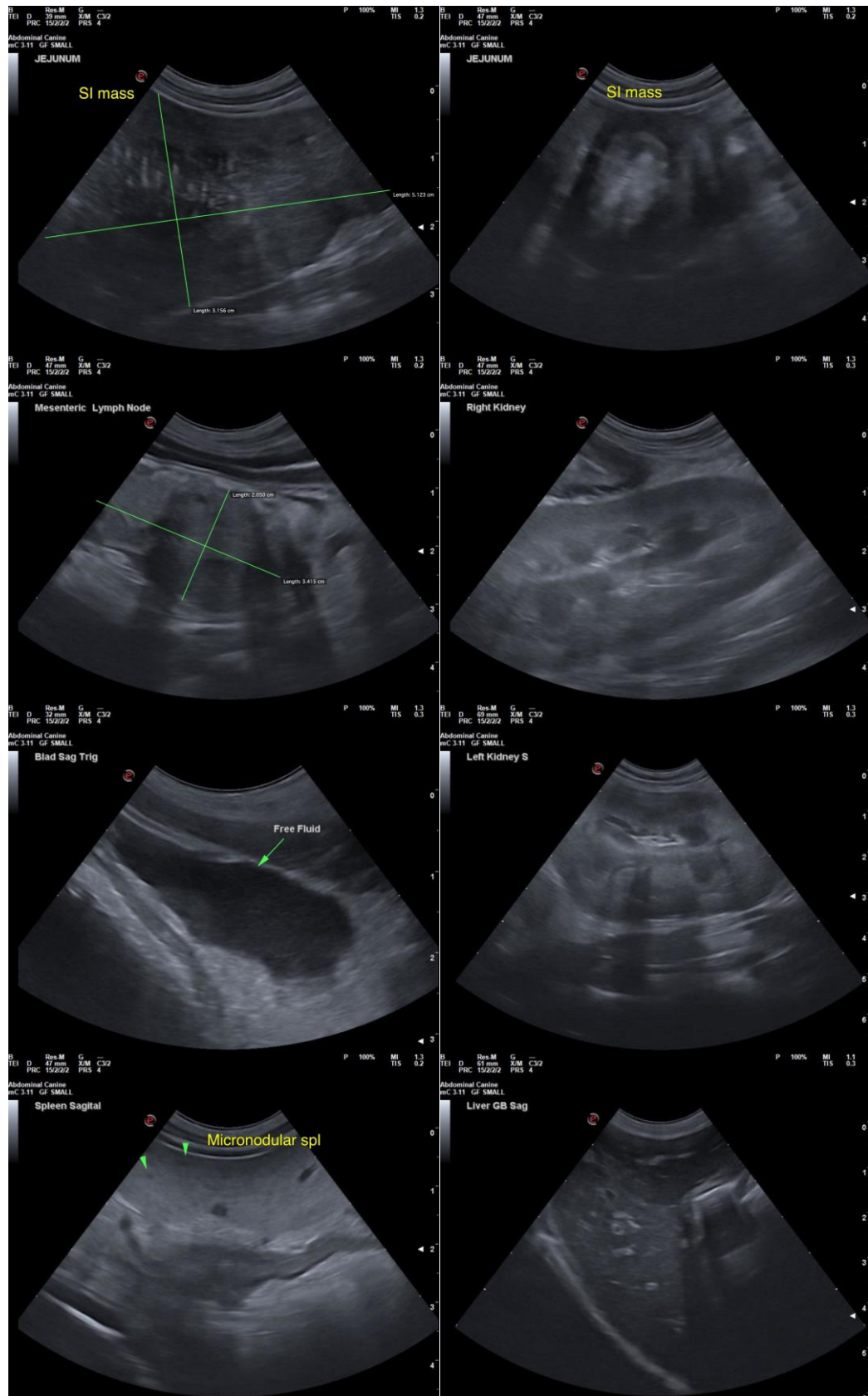
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**AGE**

2yr

**WEIGHT**

35lb



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.

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