



## PATIENT

Lana Ernst

## SPECIES

Canine

## BREED

Pitbull Mix

## SEX

FS

## AGE

10yr

## WEIGHT

34.6kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski, DVM

## HOSPITAL NAME

Alpine 24/7 / ER

## REFERRING VET

Apex Veterinary  
Services Ltd.

## INVOICE

24677

## DATE

04/28/2026

## PRESENTING CLINICAL SIGNS

Presented for lethargy, inappetence, vomiting (several days), acute abdominal distension.

Abnormal PE/Chem/CBC/UA Results: Physical Exam T: 37.5°C HR: 148 bpm RR: 40/min, no increased effort MM: pale pink, CRT <2 sec Mentation: QAR Hydration: Adequate

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

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 mild, non-dependent particulate sediment. The ureteral papillae were normal. The ureters were not visible, which is normal. No evidence of inflammatory or neoplastic changes was 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 7.0 cm in length. The right kidney measured 8.0 cm in length.

The area of the iliac trifurcation was free of pathology including no evidence of medial iliac or sublumbar lymphadenopathy or masses.

### Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.62 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.55 cm width at the caudal pole.

### Spleen

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.

### Liver/Gallbladder

Generalized hepatomegaly with diffuse severe non-homogenous nodular parenchyma. Ill-defined hepatic mass to masses were present an example of liver mass measured ~ 13 cm in diameter. Hepatic parenchyma appeared to extend caudally past the level of the gastric axis into the area of the left pancreas. The gallbladder was mildly distended in size with thin walls and moderate non-organized mobile debris. The common bile duct was not visualized without overt evidence of dilation or post hepatic obstructive criteria.

### Gastrointestinal

The stomach presented mild thickened wall. Intact wall layering was maintained and distinct. The stomach contained a mild to moderate amount of anechoic fluid.



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The visualized segments of small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material.

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

### *Pancreas*

The definitive pancreas was not visualized owing to hepatic pathology and increased omental artifact.

## BREED

Pitbull Mix

### *Free Abdomen*

Moderate volume echogenic peritoneal effusion.

## SEX

FS

Perihepatic to mid/ cranial abdomen, non-homogenous nodular appearing omentum and intermittent mildly swollen to non-homogenous mesenteric lymph nodes. An example of a lymph node measured 1.0 cm in diameter.

## AGE

10yr

## ULTRASONOGRAPHIC FINDINGS

### Primary

- Hepatomegaly exhibiting marked non-homogenous nodular parenchyma with ill-defined mass /masses
- Perihepatic to mid /cranial abdomen, non-homogenous nodular omentum and intermittent mesenteric lymphadenopathy
- Sonographically normal spleen
- Hypomotile gastritis pattern, sonographically normal empty visualized small intestine
- Echogenic peritoneal effusion

## WEIGHT

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### Secondary

- Age-related renal changes

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Diffuse to expansive hepatic neoplastic criteria is met with considerations including sarcoma, carcinoma or other. Likely associated regional perihepatic omental seeding and metastatic lymphadenopathy with associated peritoneal effusion or hemoabdomen present. No evidence of contributing splenic pathology. Curative surgical options appear precluded.

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A poor prognosis is unfortunately indicated.

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**BREED**

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**SEX**

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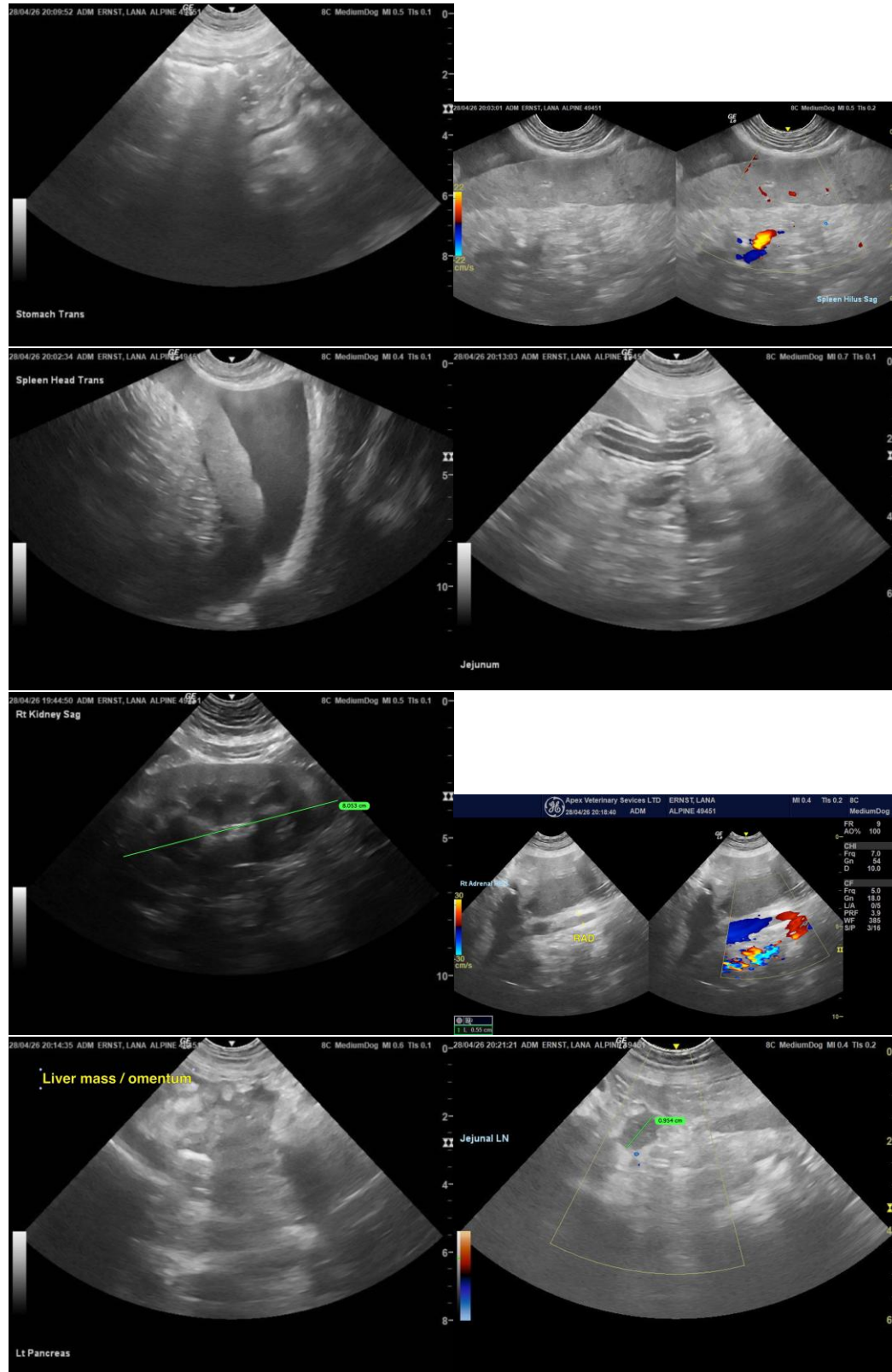
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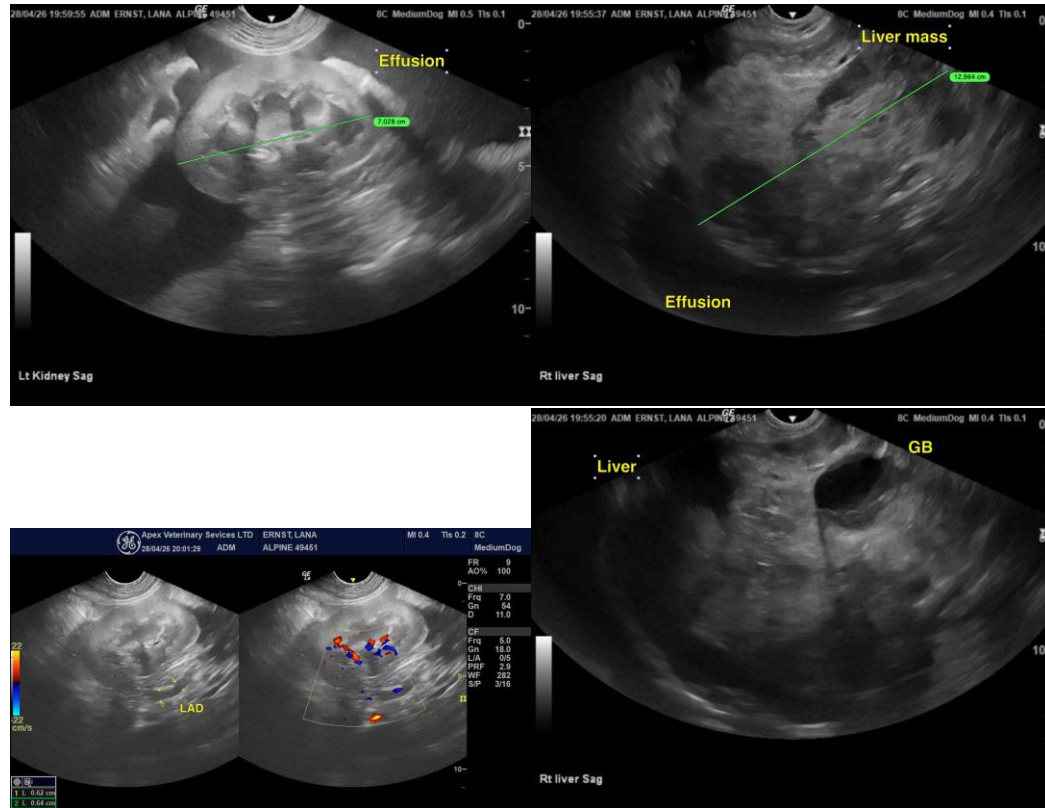
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)