



PATIENT

Marty McBride

SPECIES

Canine

BREED

Mix

SEX

MN

AGE

15 years

WEIGHT

66

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Brita Kiffney

HOSPITAL NAME

Northshore VH

REFERRING VET

Dr. Brita Kiffney

INVOICE

16548

DATE

4/6/23

PRESENTING CLINICAL SIGNS

exam reveal multiple sq masses, many quite large and unchanged. mm wasting over pelvic limbs o
Abnormal PE/Chem/CBC/UA Results: pending cbc chem ua fecal, TT4 and 4dx

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 was noted.

There was no overt pathology associated with the residual prostate.

No evidence of medial Iliac or sublumbar lymphadenopathy 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 6.6 cm in length. The right kidney measured 7.5 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 0.68 cm width at the caudal pole and 0.61 cm width at the cranial pole. The right adrenal gland was indistinctly visualized yet no overt pathology was noted. The right adrenal gland subjectively measured 0.51 cm width at the caudal pole.

Spleen

The spleen exhibited normal size and overall contour with subtle parenchyma heterogeneity. Intermittent, discrete, non-disruptive, hypoechoic splenic nodules were noted with an example measuring 0.34 cm in diameter.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild nonorganized echogenic gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammation was noted. The cystic and common bile ducts were normal.

Gastrointestinal

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. The stomach wall width measured 0.50 cm.



PATIENT	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. The duodenum wall measured 0.61 cm width. The jejunum wall measured 0.45 cm width.
Marty McBride	
SPECIES	Normal visible colon wall layers were present with apparent formed feces in lumen.
Canine	<i>Pancreas</i>
BREED	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
Mix	<i>Free Abdomen</i>
SEX	No visualized omental lymphadenopathy, omental masses, or evidence of peritoneal effusion was present.
MN	
AGE	ULTRASONOGRAPHIC FINDINGS
15 years	<ul style="list-style-type: none"> • Mild chronic renal changes • Subtle splenic nodule / nodules - subjectively benign • Hepatic parenchymal remodeling • Mild gallbladder debris (non-mucocele) • Sonographically unremarkable gastrointestinal tract • Heterogeneous pancreas - suspect age-related pancreatic changes or minor remodeling possibly owing to previous inflammation
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INTERPRETED BY	<u>INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS</u>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Sonographically, no evidence of significant visceral pathology without evidence of intraabdominal neoplastic or metastatic criteria. Correlation with pending lab work is recommended. The discrete splenic nodules tend to trend benign and are suggestive of probable discrete areas of incidental hyperplasia, hematopoiesis, or similar.
IMAGING PERFORMED BY	
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HOSPITAL NAME	A GI panel to include PLI/TLI/Cobalamin/Folate, as well as three view chest radiographs and neurological / musculoskeletal examination, are recommended to potentially assess for or rule out occult disease if weight loss in conjunction with loss of muscle mass is present.
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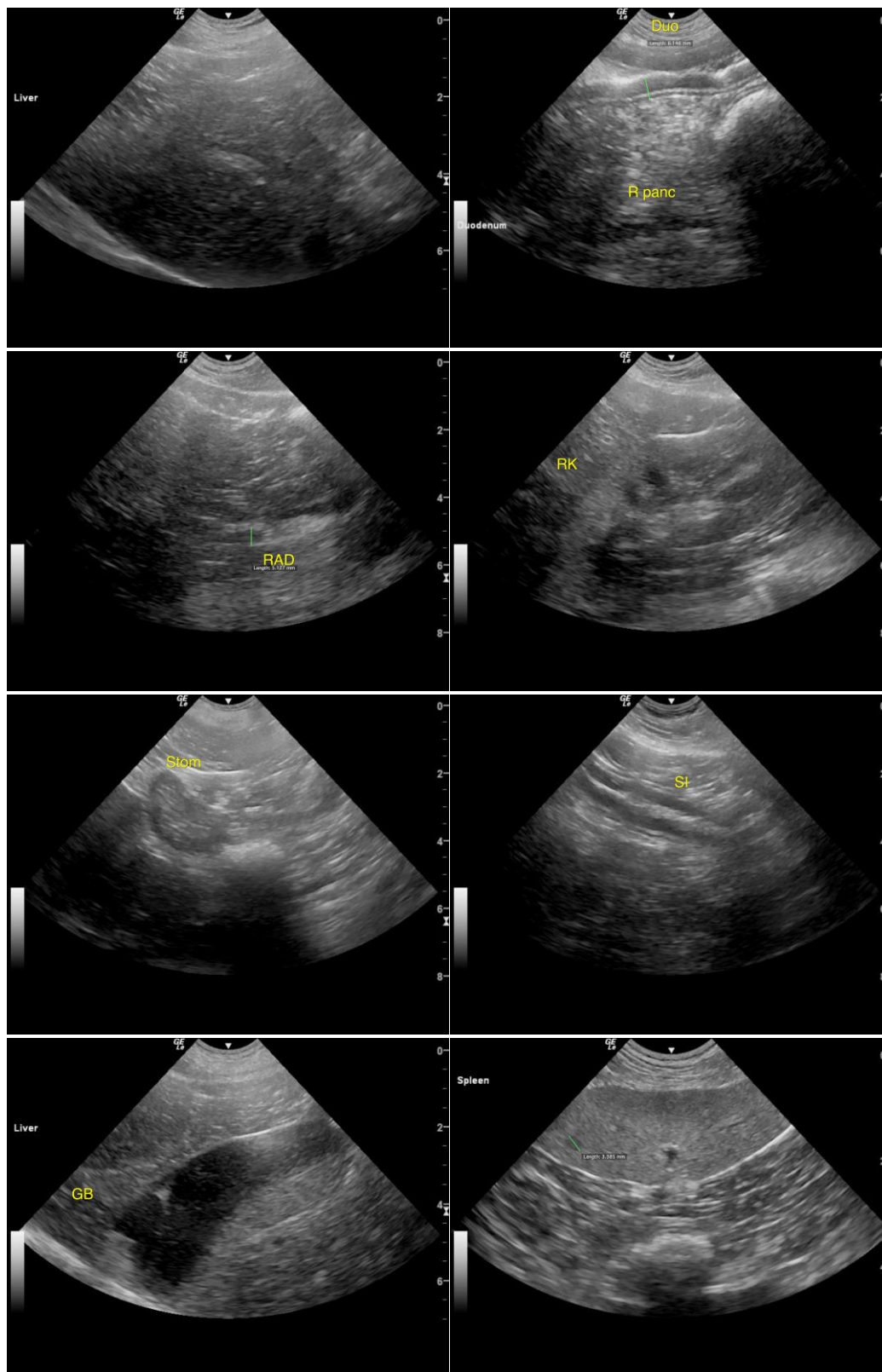
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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