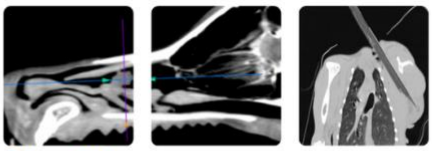


SonoPath www.thefocalzone.com info@thefocalzone.com 289.808.2608

PATIENT

Boomer Persaud

SPECIES

Canine

BREED

Doodle

SEX

Neutered Male

AGE

10 Years

WEIGHT

31.6 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Dog and Cat Clinic of Niagara

REFERRING VET

Dr. Snieder

INVOICE

14973

DATE

04/09/26

PRESENTING CLINICAL SIGNS

In to have various lumps checked. We did pre-anesthetic bloodwork for potential lump removal. Please also check the right axilla - there is a lump that they would like checked (quoted an additional $300 to ultrasound this).

Current Medications: Denamarin, Fucidin topical cream

Abnormal PE/Chem/CBC/UA Results: Most recent bloodwork: MPV 13.4 Plateletcrit 0.55 Albumin 45 (was 40 in Feb) ALT 221 (was 237 in Feb)

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 change were noted.

The area of the residual prostate appeared normal and free of pathology.

Normal size and margination was 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 5.3 cm in length. The right kidney measured 5.1 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 0.63 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 0.59 cm width at the caudal pole.

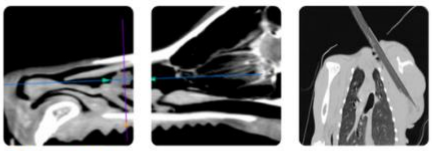
Spleen

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

The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. 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.



SonoPath www.thefocalzone.com info@thefocalzone.com 289.808.2608

PATIENT

Boomer Persaud

SPECIES

Canine

BREED

Doodle

SEX

Neutered Male

AGE

10 Years

WEIGHT

31.6 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Dog and Cat Clinic of Niagara

REFERRING VET

Dr. Snieder

INVOICE

14973

DATE

04/09/26

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained echogenic, moderate nonshadowing ingesta without signs of obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Mild segmental similar appearing intestinal ingesta.

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

Pancreas

The parenchyma of the right pancreas was mildly hyperechoic and nonhomogenous to adjacent omental fat with diffuse parenchyma remodeling. The capsule of the pancreas was mildly asymmetrical in contour without evidence of peripancreatic inflammation. These changes may suggest chronic inflammation, fibrosis, or saponification if previous history of pancreatitis. No overt signs of pancreatic neoplasia.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

A homogenous non-inflamed right axillary subcutaneous mass was present measuring approximately 4.8 cm x 2.9 cm. No evidence of associated regional cellulitis.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Hepatopathy.
- Normal gallbladder.
- Chronic pancreatitis/fibrosis pattern.
- Age-related renal changes.
- Normal adrenal glands.
- Homogenous right axilla subcutaneous mass- sonographically consistent with fat echogenicity/lipoma.

Secondary Findings

- Gastrointestinal ingesta- consistent with postprandial presentation.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the liver was nonspecific but most consistent with benign hepatopathy. Considerations for the liver may include benign vacuolar / cholestatic hepatopathy, inflammatory/infectious/immune mediated disease, hyperplasia, hematopoiesis, toxic hepatopathy (i.e. copper), other with neoplasia thought less likely. Ultrasound guided FNA of the liver using a 25-gauge needle and assuming normal coagulation parameters would be warranted for screening cytology. Hepatosupportive medications such as Denamarin or Vitamin E as well as Ursodiol due to its antioxidant and immunomodulatory effects within the liver would be warranted, although these medications may not result in decreased hepatic enzyme levels. Leptospirosis titers / PCR may be considered if clinically indicated. Core or surgical biopsy likely required for definitive diagnosis.

PATIENT

Boomer Persaud

SPECIES

Canine

BREED

Doodle

SEX

Neutered Male

AGE

10 Years

WEIGHT

31.6 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Dog and Cat Clinic of Niagara

REFERRING VET

Dr. Snieder

INVOICE

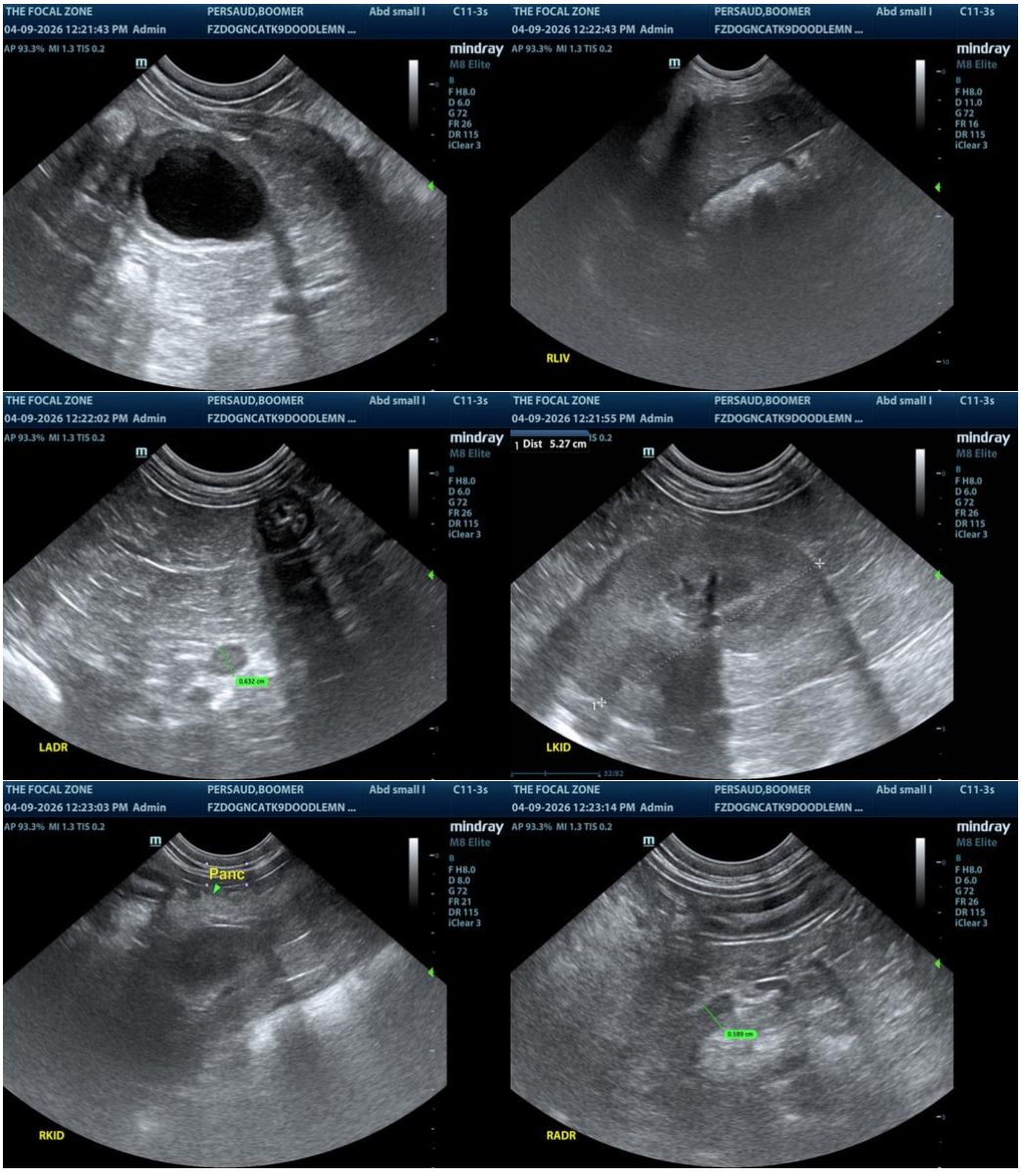
14973

DATE

04/09/26

No evidence of adrenal pathology as a contributing factor in conjunction with non-reported clinical signs which may suggest adrenal disease. Adrenal screening could be considered if clinical signs are non-reported or arise despite lack of adrenomegaly.

FNA cytology of the subcutaneous mass for further clarification and confirmation of subjective lipoma is recommended. No anesthetic contraindications, assuming normal BUN, glucose, cholesterol and albumin levels.



PATIENT

Boomer Persaud

SPECIES

Canine

BREED

Doodle

SEX

Neutered Male

AGE

10 Years

WEIGHT

31.6 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Dog and Cat Clinic of Niagara

REFERRING VET

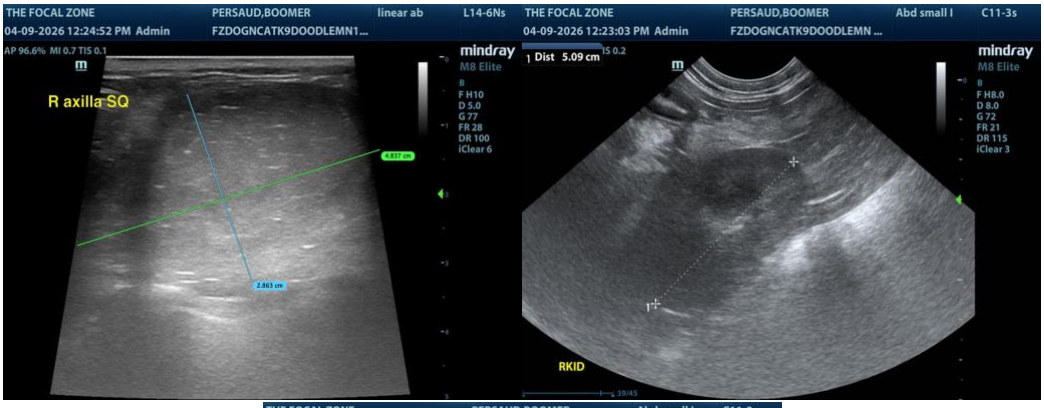
Dr. Snieder

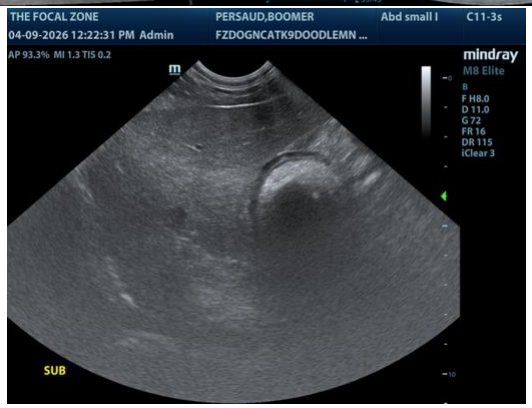
INVOICE

14973

DATE

04/09/26





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