**PATIENT**

Cosmo Schultheis

SPECIES

Canine

BREED

Golden Retriever

SEX

MN

AGE

9 years

WEIGHT

95 lbs.

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP (Canine
and Feline)**IMAGING
PERFORMED BY**

Amy Mayhew LVT

HOSPITAL NAME

SVS Imaging MI

REFERRING VET
Union Lake VH**INVOICE**
13871**DATE**
5/12/22**PRESENTING CLINICAL SIGNS**

-History high grade MCT mass on spleen noted with oncologist in March and aspirate revealed benign changes Here today for dermal mass removal, cranial aspect of spleen more rounded than expected, quick u/s revealed mass

Abnormal PE/Chem/CBC/UA Results: See attached previous aus report and cytology results.

Aspirate of splenic mass was performed today via ultrasound guidance. Results pending. Coags were normal today.

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.

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 1.4 cm in diameter.

The area of the aortic trifurcation was free of pathology.

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 7.1 cm in length. The right kidney measured 7.4 cm in length.

Adrenal Glands

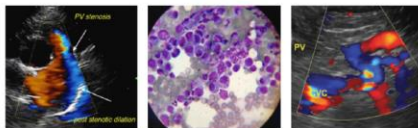
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.73 cm width at the caudal pole and 0.55 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.78 cm width at the caudal pole and 0.51 cm width at the cranial pole.

Spleen

The spleen was overall normal in size with primarily maintained symmetrical capsule contour and finely textured homogeneous parenchyma. Previously noted mixed echogenic to nonhomogeneous macronodule to small mass was present in the subjective cranial spleen measuring approximately 2.5 cm x 2.3 cm. The macronodule to small mass exhibited potential microcystic component yet did not overtly appear to distort the adjacent splenic capsule. A smaller indistinct, nondisruptive, mildly nonhomogeneous nodule was noted in the mid to caudal spleen measuring 0.83 cm x 0.52 cm. Normal splenic vascularity was noted.

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 mild parenchymal

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remodeling. 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.

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with luminal gas and no signs of ileus, obstruction, or foreign material.

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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.

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

SEX

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Pancreas

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 were evident.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

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ULTRASONOGRAPHIC FINDINGS

- Previously noted mixed echogenic cranial splenic nodule - subjectively mild progressive enlargement compared to previous measurement
- Concurrent indistinct non-expansive mid to caudal splenic nodule
- Minor hepatic parenchymal remodeling - benign

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The previously noted cranial splenic nodule appeared to be slightly larger in area compared to the previous measurement, yet did not appear to distort the adjacent splenic capsule. Considerations may include previously diagnosed reactive lymphoid hyperplasia although other etiologies such as hematopoiesis, splenitis, granuloma, or metastatic neoplasia, given the patient's history, could be possible.

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Correlation with pending splenic cytology is recommended. Pending cytology, continued serial sonographic monitoring vs. potential splenectomy as a more aggressive approach, may be considered.

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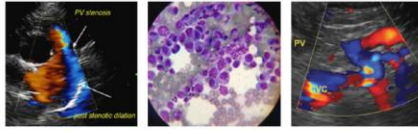
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IMAGING PERFORMED BY

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svsimagingmi@gmail.com



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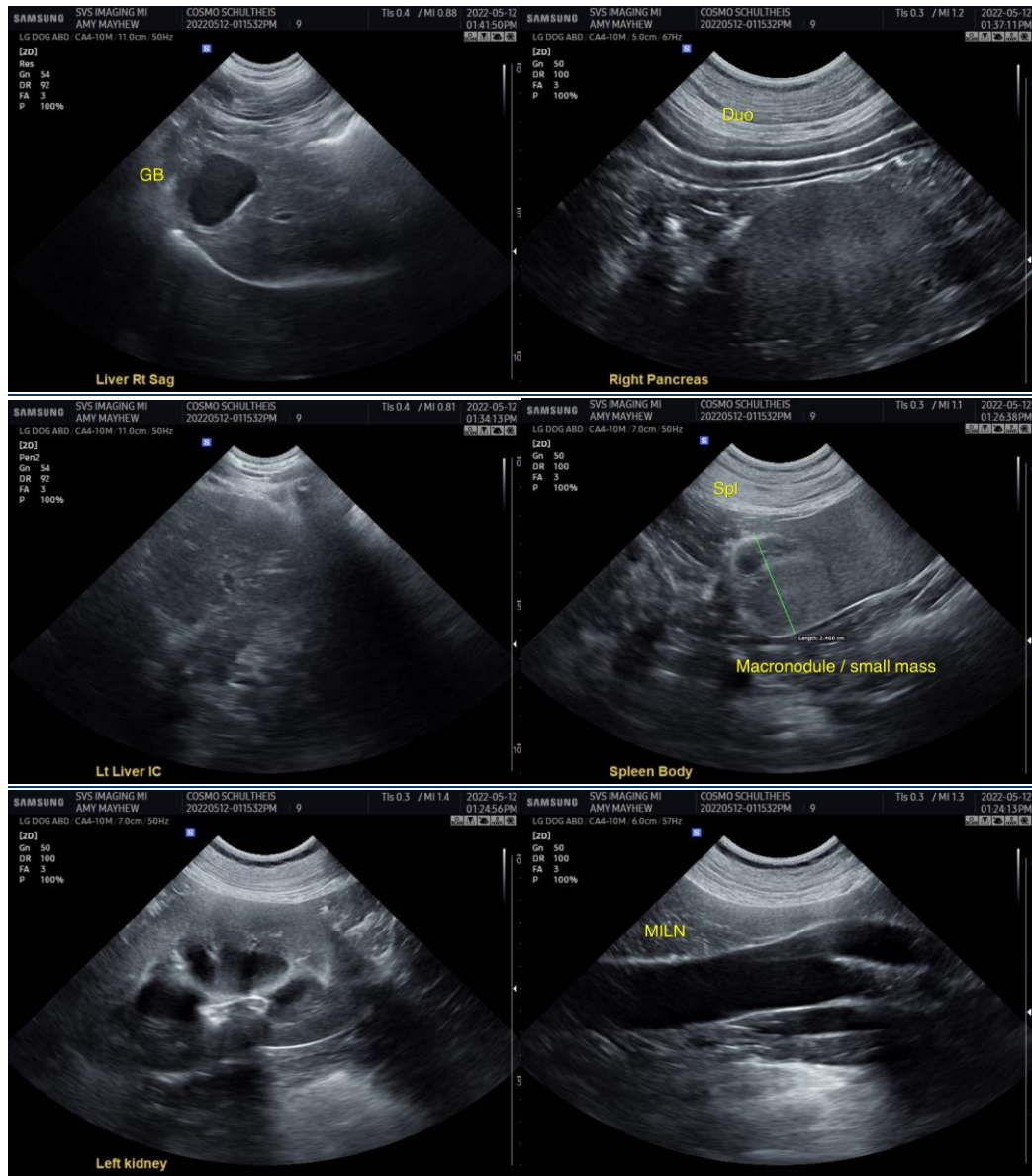
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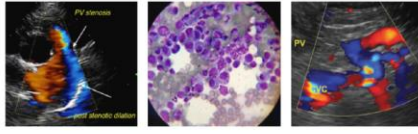
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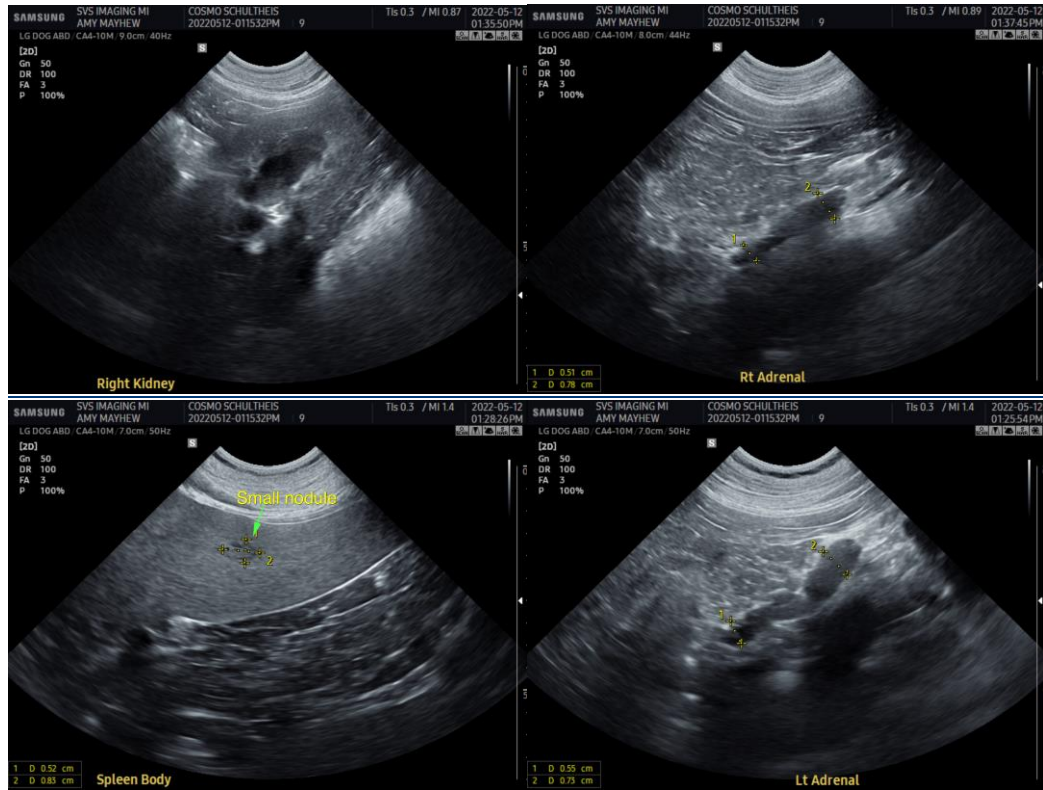
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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