



PATIENT

Atlas Zahirovic

SPECIES

Canine

BREED

Pitbull

SEX

Male

AGE

5 Years

WEIGHT

69.8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Ryan Bergner, LVT

HOSPITAL NAME

Waterville Veterinary
Clinic

REFERRING VET

Dr. James Gilchrist

INVOICE

16363

DATE

05/19/26

PRESENTING CLINICAL SIGNS

Atlas is a 5-year-old intact Male Pit Bull, presented for a second opinion regarding anemia. The owner reports that Atlas has been lethargic and unwell for approximately two weeks. He was seen by another veterinarian recently where bloodwork confirmed anemia. Clinical signs at home include hyporexia, PU/PD and mild icterus. He experienced two episodes of diarrhea this morning, though he did not have diarrhea last week. The owner's son administered a dewormer recently. Atlas has lost weight, previously weighing 74.2 lbs and now weighing 69.8 lbs.

Abnormal PE/Chem/CBC/UA Results: P is mildly icteric Weight loss PU/PD Severe, macrocytic, hypochromic, regenerative anemia. Current Hct 16.7% Elevated Urobilinogen and bilirubin in urine Did not obtain blood chemistry at appt

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 prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured 3.6 cm in diameter.

Normal size and margination was 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 7.9 cm in length.

Adrenal Glands

The left adrenal gland was not definitively visualized.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.74 cm width at the caudal pole.

Spleen

Asymmetrically enlarged to swollen nonhomogenous hypoechoic spleen with areas of parenchymal expansion and associated asymmetrical capsule distortion. Variable splenomegaly with a section of enlarged spleen measuring approximately 9.0 cm in diameter. Adequate splenic vascular volume without evidence of torsion or thrombosis.

Liver & Gallbladder

The liver revealed mild to possible moderate hepatomegaly with rounded symmetrical contour and homogenous mildly hypoechoic parenchyma with increased prominence of portal vascular borders. The hepatic and portal vasculature were normal in appearance without signs of congestion. A solitary



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to suspect intermittent well demarcated hypoechoic liver nodules were present with an example measuring 1.9 cm in diameter.

The gallbladder was non-distended in size with mildly prominent hyperechoic wall containing anechoic bile. The common bile duct was not visualized.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild nonshadowing ingesta/chyme.

The visualized segments of small intestine were sonographically normal.

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

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 was evident.

Free Abdomen

Hypoechoic to swollen mesenteric and medial iliac lymph nodes were present. An example of mesenteric lymph node measured 3.2 cm x 2.3 cm. An example of medial iliac lymph node measured 3.6 cm x 2.9 cm. Mild peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Asymmetrically enlarged to swollen hypoechoic non-homogenous spleen.
- Enlarged, mildly hypoechoic liver.
- Several to multiple hypoechoic to swollen mesenteric/medial iliac lymph nodes.
- Mild volume of peritoneal effusion.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Unfortunately, and although sampling is required for further clarification, multicentric hepatosplenic, and lymphatic neoplastic criteria is met with considerations including multicentric round cell neoplasia, sarcoma, i.e. hemangiosarcoma or histiocytic sarcoma versus other.

Further assessment may include (assuming normal clotting status and using a 25-gauge needle) hepatosplenic and accessible lymph node FNA cytology with oncology consult. Three view chest radiographs are recommended. Unfortunately, an unfavorable prognosis is indicated.



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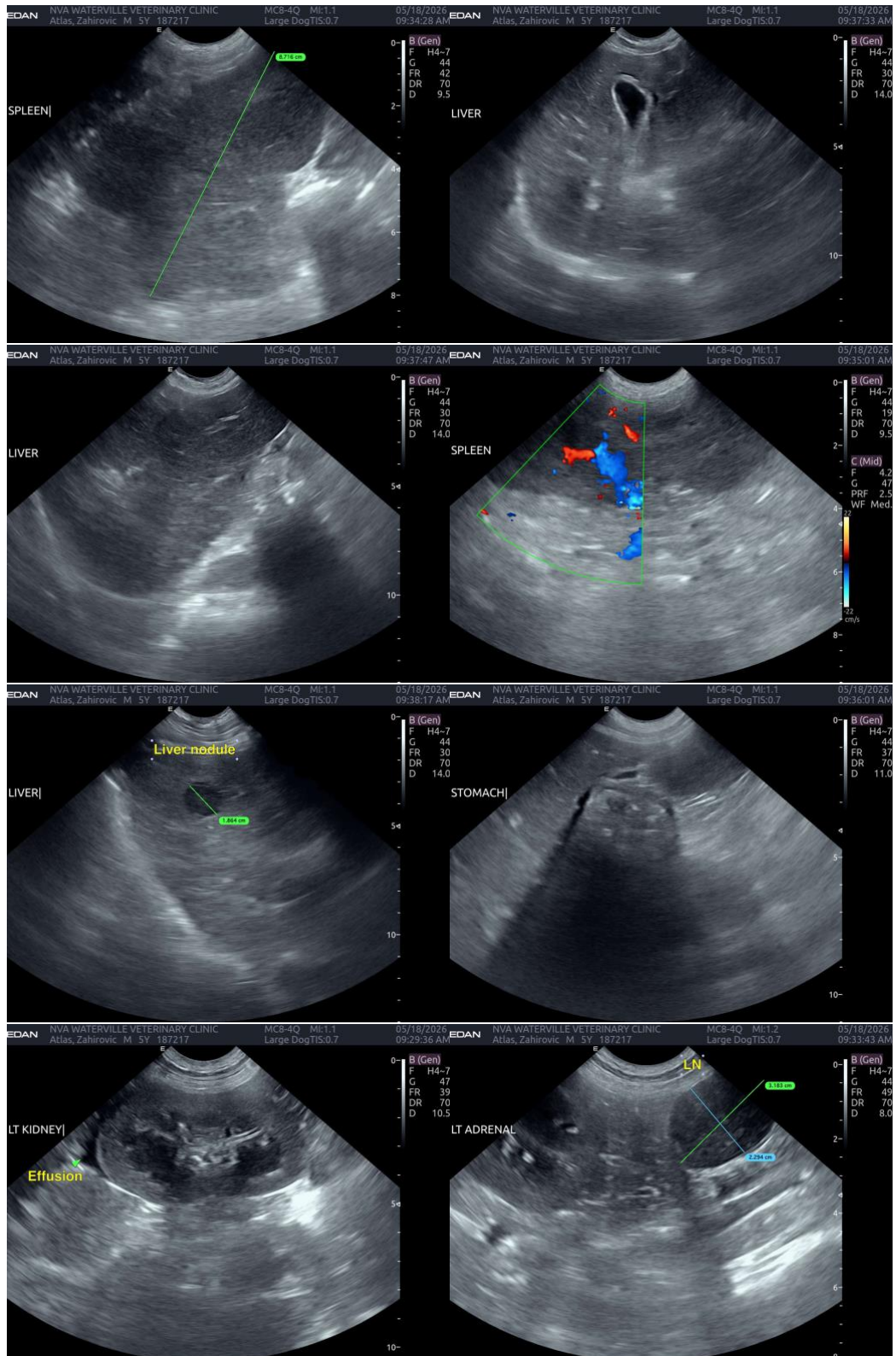
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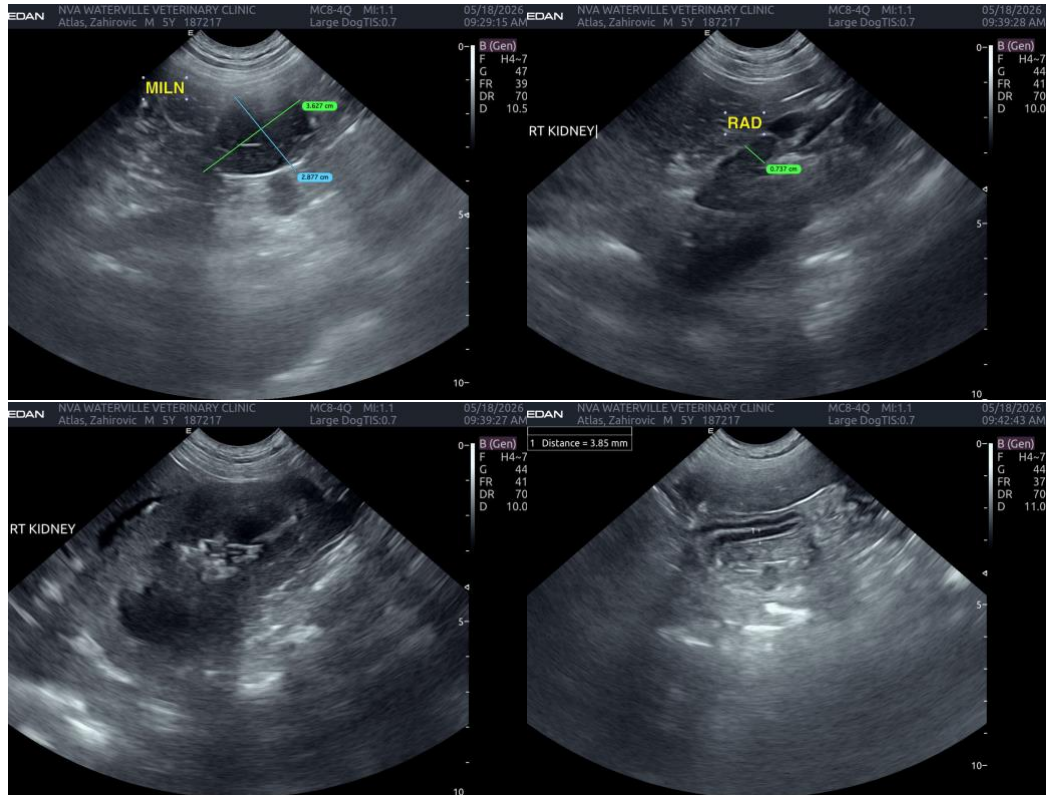
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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