



**PATIENT**

Tigger Last Resort  
Rescue

**SPECIES**

Canine

**BREED**

Mix

**SEX**

M/I

**AGE**

10 years

**WEIGHT**

53 lbs.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

VCA Blairstown AH

**REFERRING VET**

Dr. Clegg

**INVOICE**

17122

**DATE**

6/21/23

**PRESENTING CLINICAL SIGNS**

Chronic UTI, Cushingoid. Current Meds: Trilostane 90mg.  
Abnormal PE/Chem/CBC/UA Results: Elevated ALP, chronic E. Coli, USG 1.003

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder was normal in size and tone with mild generalized prominent urinary bladder wall exhibiting homogeneous mural echogenicity. No tumors were noted. Anechoic urine was present primarily with mild nondependent particulate sediment, which may indicate cellular debris / protein, crystalline debris, or mucus. No calculi were noted. The urethra exhibited normal structure and tone to a depth of 3.0 cm.

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 diameter.

The left and right testicles were normal in size exhibiting mild parenchyma heterogeneity and discreet hyperechoic nodules. The left testicle measured 3.0 cm and the right testicle measured 2.8 cm.

No evidence of pathology in the area of the aortic trifurcation.

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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation or pyelectasia was present. Focal areas of medullary mineralization were noted. The left kidney measured 7.2 cm in length. The right kidney measured 7.0 cm in length.

**Adrenal Glands**

The bilateral adrenal glands were mildly enlarged in size with minor capsule asymmetry and subtle heterogeneous parenchyma. The left adrenal gland measured 2.9 cm length x 0.87 cm width at the caudal pole. The right adrenal gland measured 2.2 cm length x 0.69 cm width at the caudal pole. No adrenal tumors were noted.

**Spleen**

The spleen was normal in size and contour with subtle parenchyma heterogeneity and a nondisruptive, heterogeneous nodule noted in the caudal spleen measuring 1.7 cm in diameter.

**Liver/ Gallbladder**

Generalized hepatomegaly was noted yet the liver primarily maintained a symmetrical hepatic capsule contour with generalized mild heterogeneous parenchyma. A heterogeneous, nondisruptive macronodule was noted in the deep mid-liver parenchyma measuring 3.3 cm in diameter. Isoechoic, mildly nonhomogeneous, focally cystic mass lesion was noted in the ventral caudal liver extending past the level of the gastric axis measuring ~7.0 cm in diameter.



**PATIENT**  
Tigger Last Resort  
Rescue

The gallbladder was non-distended in size with mild to moderate, nonorganized, hyperechoic gallbladder sediment. No evidence of inflammatory criteria was noted. The cystic and common bile ducts were normal.

**SPECIES**

***Gastrointestinal***

Canine

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

**BREED**

Mix

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.

**SEX**

M/I

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

**AGE**

10 years

***Pancreas***

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum, consistent with age-related pancreatic change and incidental. No signs of active inflammation or neoplasia.

**WEIGHT**

53 lbs.

***Free Abdomen***

No overt lymphadenopathy or peritoneal effusion was present.

**INTERPRETED BY**

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

**ULTRASONOGRAPHIC FINDINGS**

**IMAGING PERFORMED BY**

Shari Reffi, CVT

- Mild cystitis pattern
- Benign prostatic hyperplasia
- Heterogeneous splenic nodule - hyperplasia, hematopoiesis, focal splenitis, granuloma, potential for emerging nodular neoplasia, all potentials
- Enlarged nonhomogeneous liver with intraparenchymal macronodule and ventrocaudal isoechoic nonhomogeneous mass lesion - nonspecific, chronic vacuolar hepatopathy, hyperplasia, hematopoiesis, fibrosis, low-grade neoplasia possible
- Mild to moderate gallbladder sediment (non-mucocele)
- Chronic renal changes with focal medullary mineral
- Bilateral mild adrenomegaly - consistent with pituitary-dependent hyperadrenocorticism
- Mildly nonhomogeneous bilateral testicles - nonspecific

**HOSPITAL NAME**

VCA Blairstown AH

**REFERRING VET**

Dr. Clegg

**INVOICE**

17122

**DATE**

6/21/23

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Assuming normal clotting status and using a 25 gauge needle, FNA cytology of a ventrocaudal hepatic mass lesion and splenic nodule is recommended for further clarification. Recheck ACTH Stimulation test is suggested if not recently done. A higher dose / short frequency antibiotic regimen, ideally based on C/S results, i.e., Clavamox or Enrofloxacin 20.0 mg/kg PO SID for 4-5 days, given evidence of cystitis, may prove more effective at eliminating chronic UTI. Neutering, if possible, is recommended.



**PATIENT**  
Tigger Last Resort  
Rescue

**SPECIES**

Canine

**BREED**

Mix

**SEX**

M/I

**AGE**

10 years

**WEIGHT**

53 lbs.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

VCA Blairstown AH

**REFERRING VET**

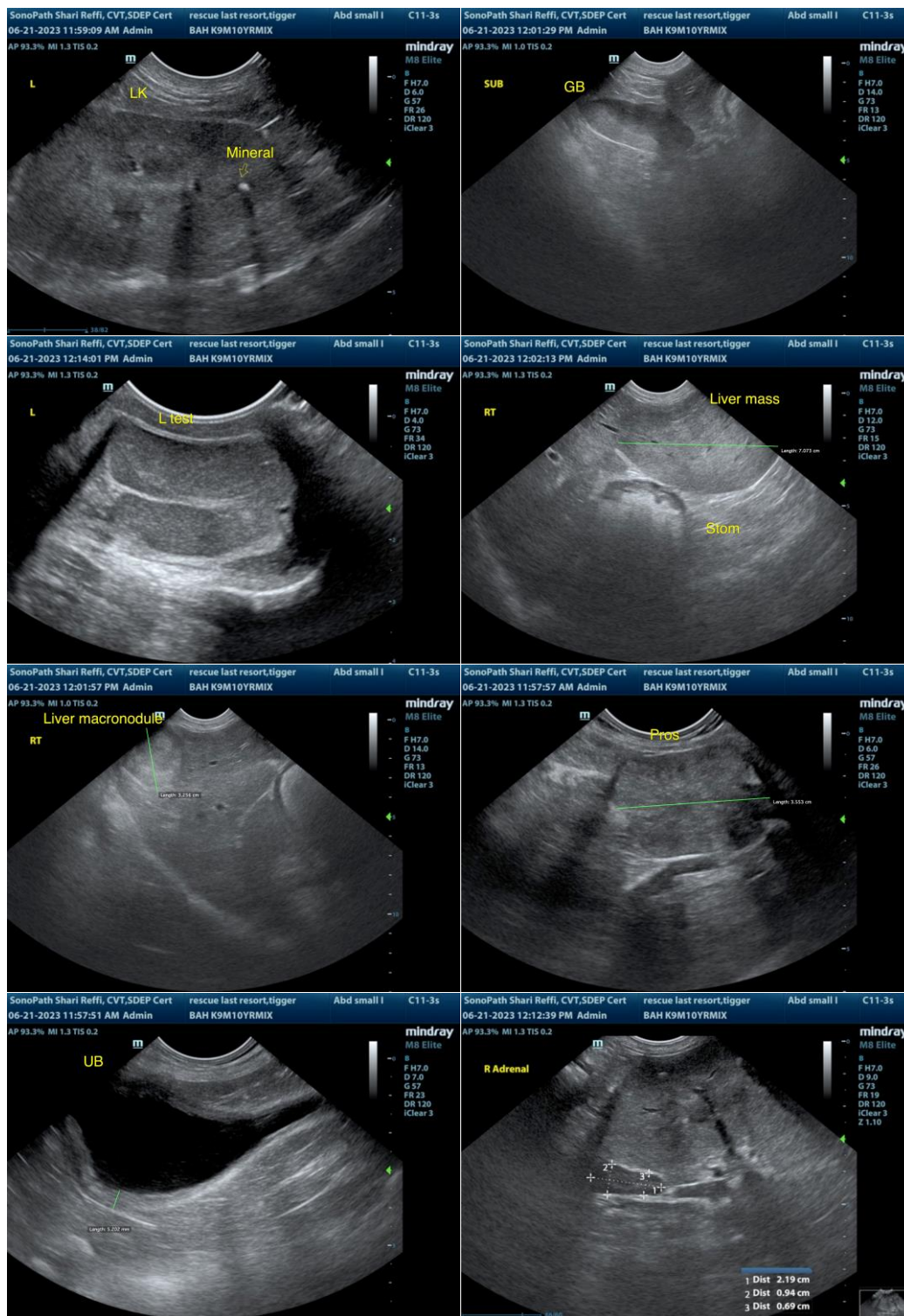
Dr. Clegg

**INVOICE**

17122

**DATE**

6/21/23





**PATIENT**

Tigger Last Resort  
Rescue

**SPECIES**

Canine

**BREED**

Mix

**SEX**

M/I

**AGE**

10 years

**WEIGHT**

53 lbs.

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

VCA Blairstown AH

**REFERRING VET**

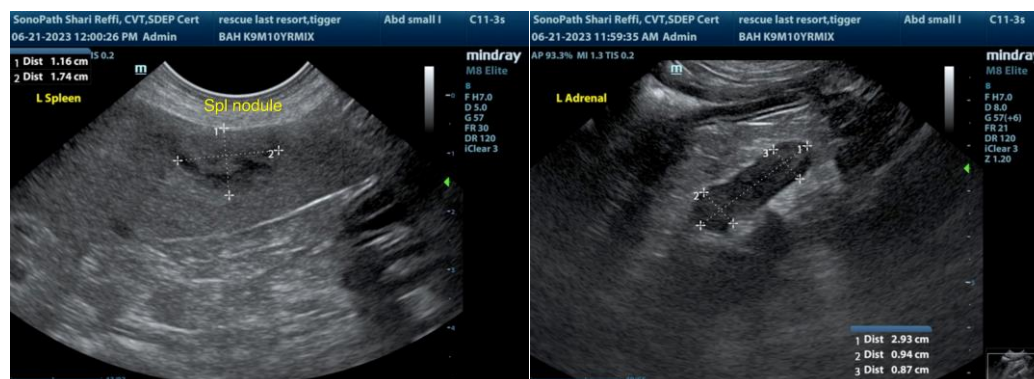
Dr. Clegg

**INVOICE**

17122

**DATE**

6/21/23



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)