



PATIENT

K2 Klotz

PRESENTING CLINICAL SIGNS

Lethargic, not eating, not moving, loose stools, FUO, Partially responsive to treatments, dehydrated.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: decreased platelets, Increased ALP 257

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Cane Corso

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 were noted.

SEX

M

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 7.8 cm in length. The right kidney measured 8.0 cm in length.

AGE

1yr

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

98

The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.

Spleen

INTERPRETED BY

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

The spleen exhibited moderate to significant generalized enlargement with symmetrical contour and a primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The regional cranial spleen exhibited mild non-homogenous to irregular parenchyma with capsule distortion measuring 6.0 cm in diameter. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

IMAGING PERFORMED BY

Hope Brossman

Liver/Gallbladder

The liver presented subjectively mildly enlarged in size. The hepatic parenchyma revealed diffuse reduced echogenicity compared to the spleen and renal cortical parenchyma with a mild coarse echotexture. Increased portal vein prominence was evident. The capsule of the liver was normal in margination. Distinct masses or nodules were not evident. Normal vascular volume. The hepatic and portal vasculature were normal in appearance. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.

HOSPITAL NAME

Animal Mansion
Veterinary Hospital

REFERRING VET

Shelley Parker DVM

Gastrointestinal

The stomach was indistinctly visualized.

INVOICE

14258ag

The visualized segments of 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 semi formed to soft feces in lumen.

DATE

06/30/2023

Pancreas



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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.

SPECIES

Canine

Free Abdomen

No omental masses or overt/significant lymphadenopathy was present.

Scant to minor volume perihepatic/perisplenic free fluid was present.

BREED

Cane Corso

ULTRASONOGRAPHIC FINDINGS

- Moderate to significant generalized splenomegaly with potential indistinct cranial mass like lesion-marked hyperplasia, hematopoiesis, splenitis, congestion, infiltrative neoplasia possible.
- Hepatomegaly exhibiting parenchyma hypoechoogenicity-acute hepatitis, congestion, occult infiltrative neoplasia possible.
- Scant to minor volume perisplenic/perihepatic free fluid.
- Overtly visualized GI tract with soft feces in colon.

SEX

M

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

1yr

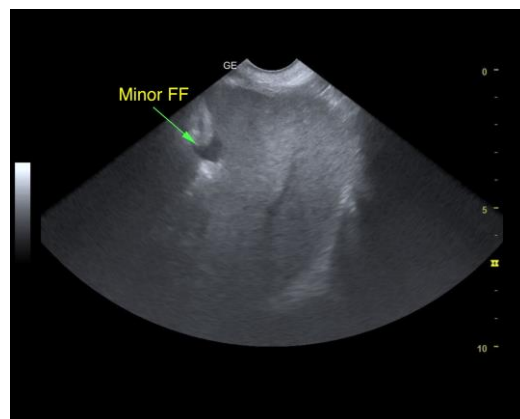
Although sampling is required for further clarification, primary concern for multicentric infiltrative hepatosplenic neoplasia is warranted. Assuming normal clotting status and dependent on degree of thrombocytopenia, a hepatosplenic FNA for screening cytology using a 25g needle and with Benadryl premed is warranted for further assessment and potential oncology consult. Infectious disease serology and leptospirosis titer/PCR may be considered if clinically indicated or if potential exposure/endemic to the area. A very guarded prognosis is indicated.

WEIGHT

98

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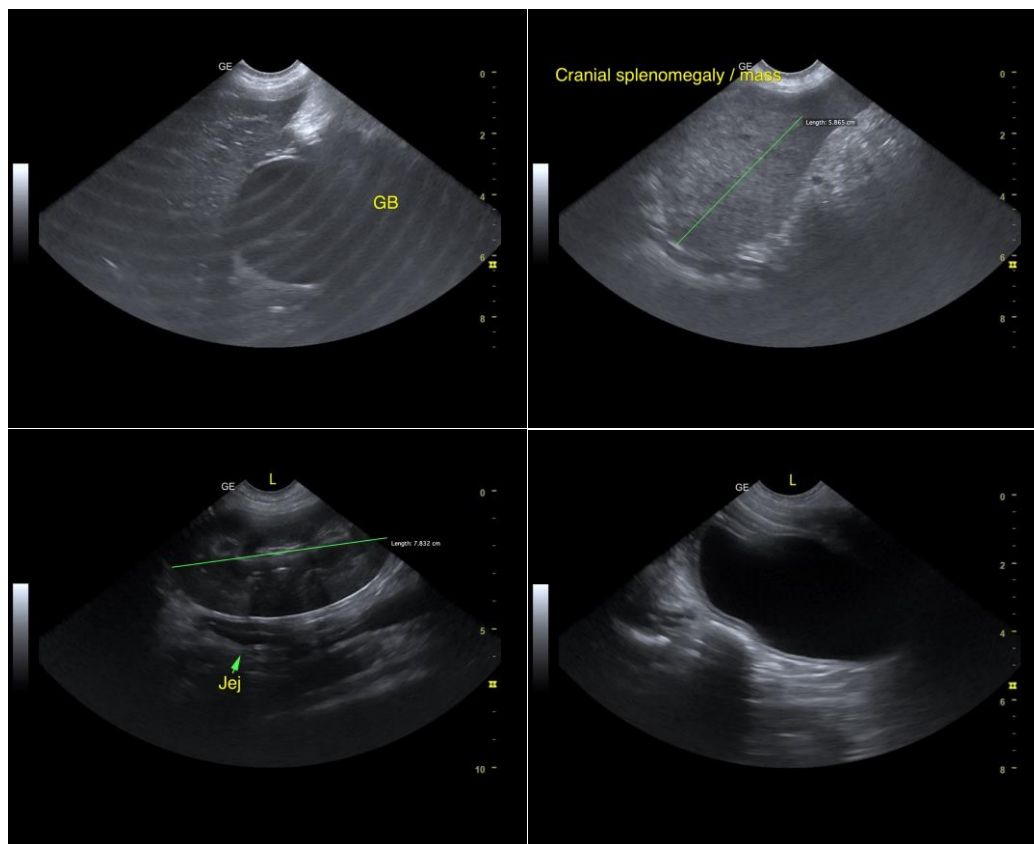
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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