



**PATIENT PRESENTING CLINICAL SIGNS**

Titan Morgan Painful abdomen, palpable mass, muffled heart sounds Rimadyl, Glycoflex, Fish oil, benadryl, Claro, Fortiflora

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine **Urinary System**

**BREED**

Newfoundland The urinary bladder, trigone, and cystourethral junction 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.

**SEX**

M

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 6.8 cm x 3.8 cm.

**AGE**

10 years

The area of the aortic trifurcation was free of pathology. No evidence of medial iliac or sublumbar lymphadenopathy was noted.

**WEIGHT**

107

Both testicles were overtly normal in size, contour, and overall architecture exhibiting mild nonhomogeneous parenchyma. No testicular nodules or masses were noted. This is likely consistent with age-related testicular parenchymal changes.

**INTERPRETED BY**

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

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

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
 ARDMS/RVT

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.6 cm length x 0.53 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 2.7 cm length x 0.50 cm width at the caudal pole.

**HOSPITAL NAME**

Lehigh Valley AH  
 (Bath)

**Spleen**

**REFERRING VET**

Dr. Ferrari

A solid mass with intermittent intra-mass hyperechoic nodules involving the subjective caudal spleen, without areas of cavitation, potentially emerging from the splenic tail with secondary capsule expansion and disruption was present and measured approximately 10.0 cm in diameter. No evidence of splenic mass rupture was present. No evidence of parenchymal escape or peritoneal free fluid was noted. The non-affected spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

**INVOICE**

14031

**DATE**

6/7/22



**PATIENT** *Liver/ Gallbladder*

**Titan Morgan**  
**SPECIES**  
 Canine

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 subjective mild to benign parenchymal 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.

**BREED** *Gastrointestinal*

**Newfoundland**

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

**SEX**  
 M

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.

M

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

**AGE** *Pancreas*

**10 years**

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.

**WEIGHT** *Free Abdomen*

**107**

No overt lymphadenopathy or peritoneal effusion was present.

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Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window. Obvious evidence of pleural effusion was not noted.

**ULTRASONOGRAPHIC FINDINGS**

- Solid, mildly nonhomogeneous to nodular splenic mass
- Mild hepatic parenchymal remodeling - subjectively benign
- Bilateral age-related kidneys
- Benign prostatic hyperplasia, potential for prostatitis possible yet thought less likely

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other). No overt evidence of intraabdominal or obvious cardiac metastasis was noted. Potential for non-splenic or unspecified mass impinging upon the subjective caudal spleen is considered less likely.

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Assuming no evidence of pathology on three view chest radiographs, laparotomy with expectation towards splenectomy, gross inspection of the liver, and perisplenic omentum is warranted. Sonographic monitoring of the splenic mass for evidence of progression with initial recheck in 4 weeks would be a more conservative approach.

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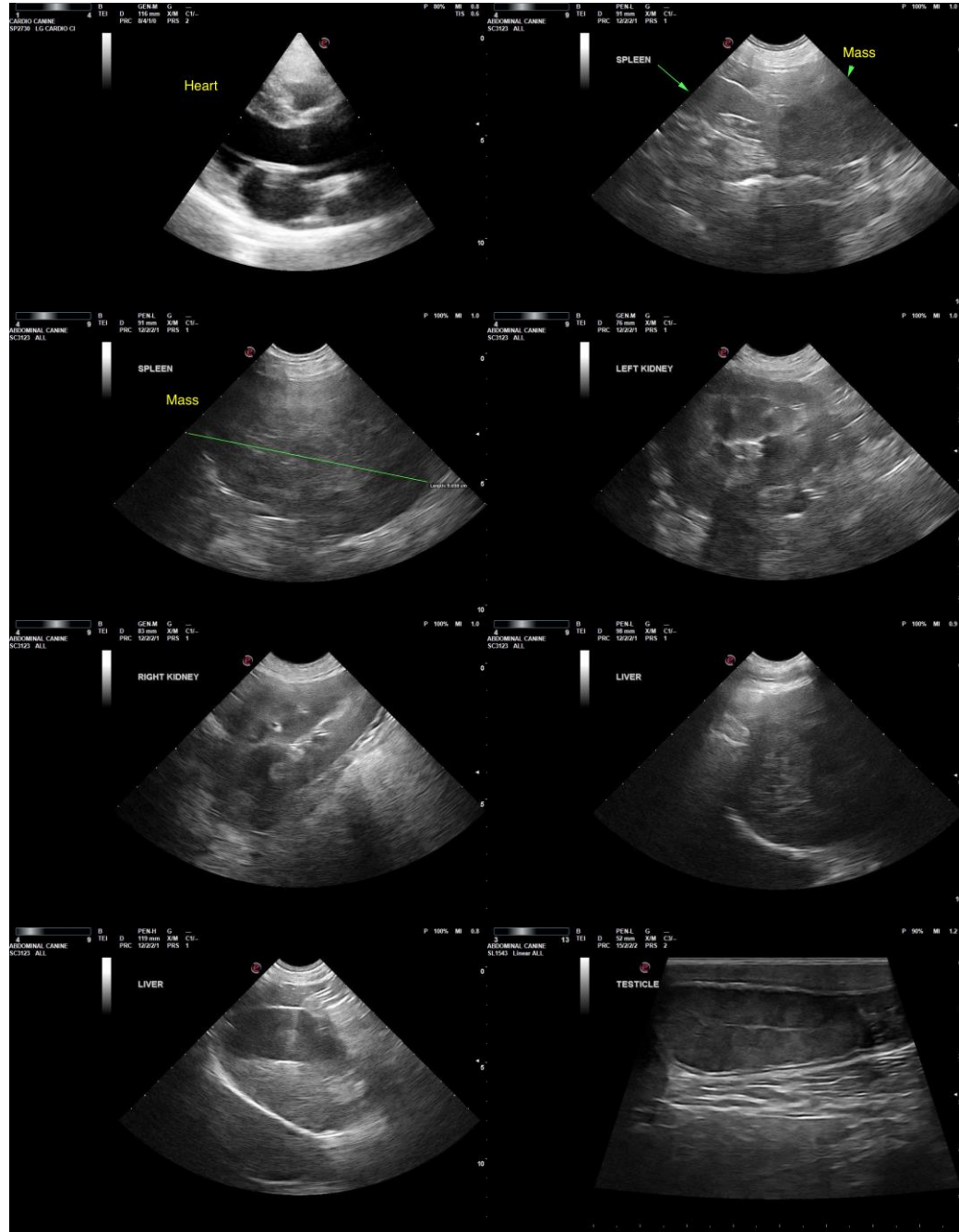
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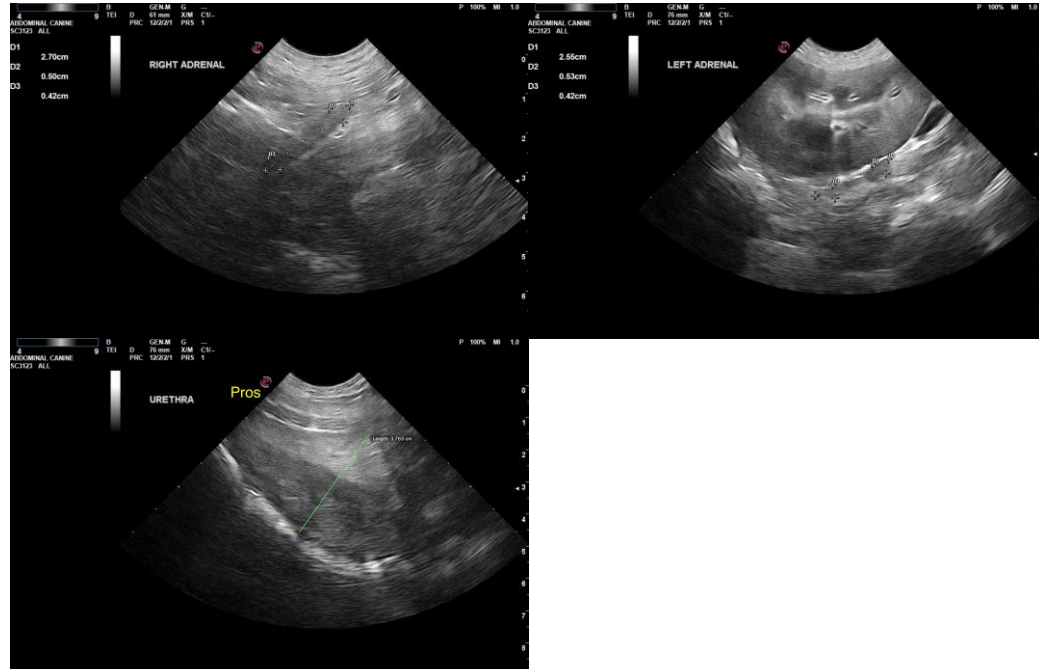
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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