



PATIENT

Jordie Andres

PRESENTING CLINICAL SIGNS

History: Not eating for 2 days. Low hematocrit. Free fluid seen on AXR

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 were noted.

BREED

Terrier Mix

No overt pathology in the area of the residual prostate. The residual prostate measured 0.62 cm.

SEX

Aortic trifurcation was normal.

Neutered Male

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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint areas of medullary mineral noted. The left kidney measured 4.6 cm in length. The right kidney measured 4.6 cm in length.

AGE

11 years

Adrenal Glands

No over pathology in the area of the left and right adrenal glands.

WEIGHT

7.3 kg

Spleen

A moderately sized to expansive splenic mass was present with asymmetrical margination. The parenchyma was nonhomogeneous. Regional hyperechoic perisplenic mesentery was noted, which may indicate reactively inflammation. The possibility of omental adhesions cannot be definitively excluded. The mass measured approximately 10.0 cm in diameter. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

INTERPRETED BY

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

Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. A solitary, well-demarcated, spherical non-disruptive, intraparenchymal nodule was present in the mid ventral liver, measuring 0.88 cm in diameter.

IMAGING PERFORMED BY

Dave Stasiuk RDMS,
RDCS

The gallbladder was non distended in size with dependent to mildly nondependent yet nonorganized gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammation noted. The cystic duct and common bile ducts were normal without evidence of dilation.

HOSPITAL NAME

Resolution Vet
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REFERRING VET

Dr. Mike Sweet

Gastrointestinal

The stomach presented intact and sonographically unremarkable wall layering. Potential for mild gastric hypomotility possible. The ventral gastric body wall measured 0.26 cm.

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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.

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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

Scant to mild volume peritoneal free fluid was present. No overt lymphadenopathy noted.

BREED

Terrier Mix

Other

A rapid view of the heart was normal.

SEX

Neutered Male

ULTRASONOGRAPHIC FINDINGS

- Non-homogenous splenic mass
- Nonspecific, yet suspect benign, solitary hepatic nodule
- Gall bladder (non-mucocele)
- Bilateral, chronic renal changes with pinpoint medullary mineral
- Scant to mild volume peritoneal free fluid

AGE

11 years

WEIGHT

7.3 kg

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). Neoplastic criteria is favored.

INTERPRETED BY

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DVM, DABVP
(Canine and Feline)

The solitary, nondisruptive hepatic nodule, although nonspecific, is suggestive of a benign nodule such as lipogranuloma, focal nodular to regenerative hyperplasia, or similar. Technically, the possibility of focal hepatic metastases cannot be definitively excluded. Likewise, potential for regional omental seeding cannot be definitively excluded in these cases. However, evidence of overt intra-abdominal metastasis was not definitively evident.

IMAGING PERFORMED BY

Dave Stasiuk RDMS,
RDCS

Assuming there is no evidence of thoracic pathology or metastatic criteria on three-view chest radiographs, an exploratory laparotomy with expectation toward splenectomy, gross inspection of the liver and perisplenic omentum +/- biopsy of the hepatic nodule, if visualized, is recommended.

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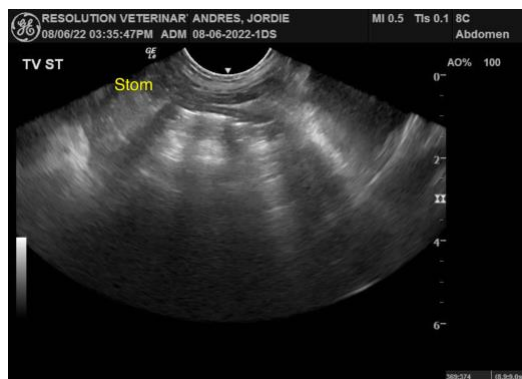
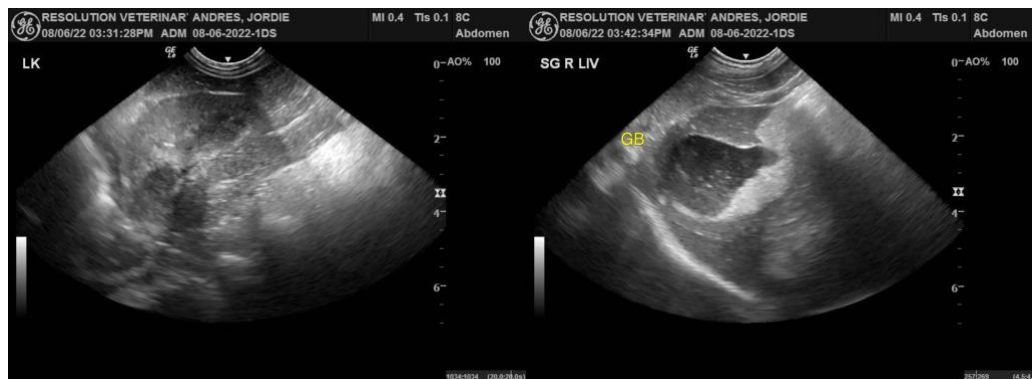
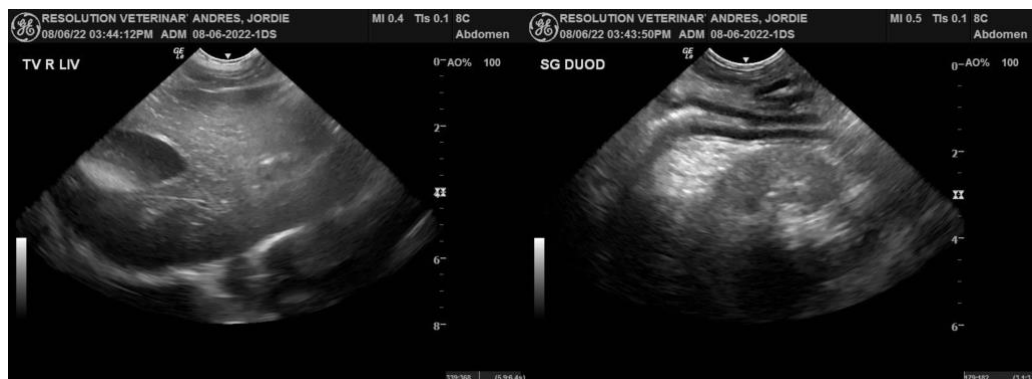
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The information and recommendations provided are based on the images presented by the referring



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veterinarian. 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.

SPECIES

Canine

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

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SEX

Neutered Male

AGE

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