



PATIENT

Max Fabiano

SPECIES

Canine

BREED

Husky

SEX

MN

AGE

8.5 years

WEIGHT

94.2 lbs.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Creditview-Eglington
Animal Hospital

REFERRING VET

Dr. Yousif

INVOICE

17265

DATE

7/18/23

PRESENTING CLINICAL SIGNS

Patient has a lump in front left leg in digit 1 . The nail is very long with a lump under nail . Owner noticed this lump around 4 months ago. Very long nail lump under nail no blood not ulcerated dog not allow to touch. X-rays were done, and the radiology referral report recommended ultrasound with fine needle aspiration to check for lump in the liver or spleen. Ultrasound was done under sedation. No meds currently.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder presented mild uniformly thickened urinary bladder wall isoechoic to the adjacent normal urinary bladder wall. The luminal margin of the thickened urinary bladder wall was mildly asymmetrical in contour. No evidence of urinary bladder tumors was noted. Mineralization or echogenic foci within the thickened areas of urinary bladder wall was not present. The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal tone to a depth of 3.0 cm. 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. The ventral urinary bladder wall measured 0.72 cm.

The residual prostate was free of pathology.

The area of the aortic trifurcation was free of pathology.

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 6.8 cm in length. The right kidney measured 6.9 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.57 cm 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 0.57 cm width at the caudal pole.

Spleen

The spleen exhibited borderline to mild enlarged subjective size with maintained symmetrical capsule contour. Mild medial folding of the cranial spleen was present. The spleen maintained a finely textured homogeneous splenic parenchyma and normal splenic vascularity.

Liver/ Gallbladder

The liver was enlarged in size primarily owing to ventrocaudal hepatic expansion past the level of the gastric axis with a small, primarily symmetrical, mildly expansive, homogeneous, focally cystic, small mass in the ventrocaudal liver measuring approximately 6.0-7.0 cm in diameter. The liver otherwise primarily maintained homogeneous hepatic parenchyma exhibiting mild coarse echotexture and normal hepatic vascular volume. The gallbladder was non-distended in size containing primarily



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anechoic content with mild nonorganized gallbladder sediment. No evidence of inflammatory criteria was noted. The cystic and common bile ducts were normal.

Gastrointestinal

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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.

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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

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.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

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ULTRASONOGRAPHIC FINDINGS

- Subjective mild cystitis pattern
- Mild splenomegaly with folding - subjectively benign
- Hepatomegaly with small mildly expansive ventrocaudal primarily homogeneous to focally cystic mass lesion
- Mild gallbladder sediment (non mucocele)

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R. McKenzie Daniel,
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The overall liver including the small ventrocaudal homogeneous focally cystic mass lesion was nonspecific and not overtly consistent with neoplastic criteria with considerations including vacuolar hepatopathy, inflammatory hepatopathy, ventrocaudal hyperplasia, hematopoiesis, small cystic hepatoma, or similar. Potential for hepatic mass lesion neoplastic or metastatic criteria cannot be excluded.

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Correlation with pending cytology is recommended. The ventrocaudal small hepatic mass lesion subjectively appears to be amendable to surgical resection pending cytology or if surgery is an indication in this case. Sonographic monitoring of the liver would be a more conservative approach.

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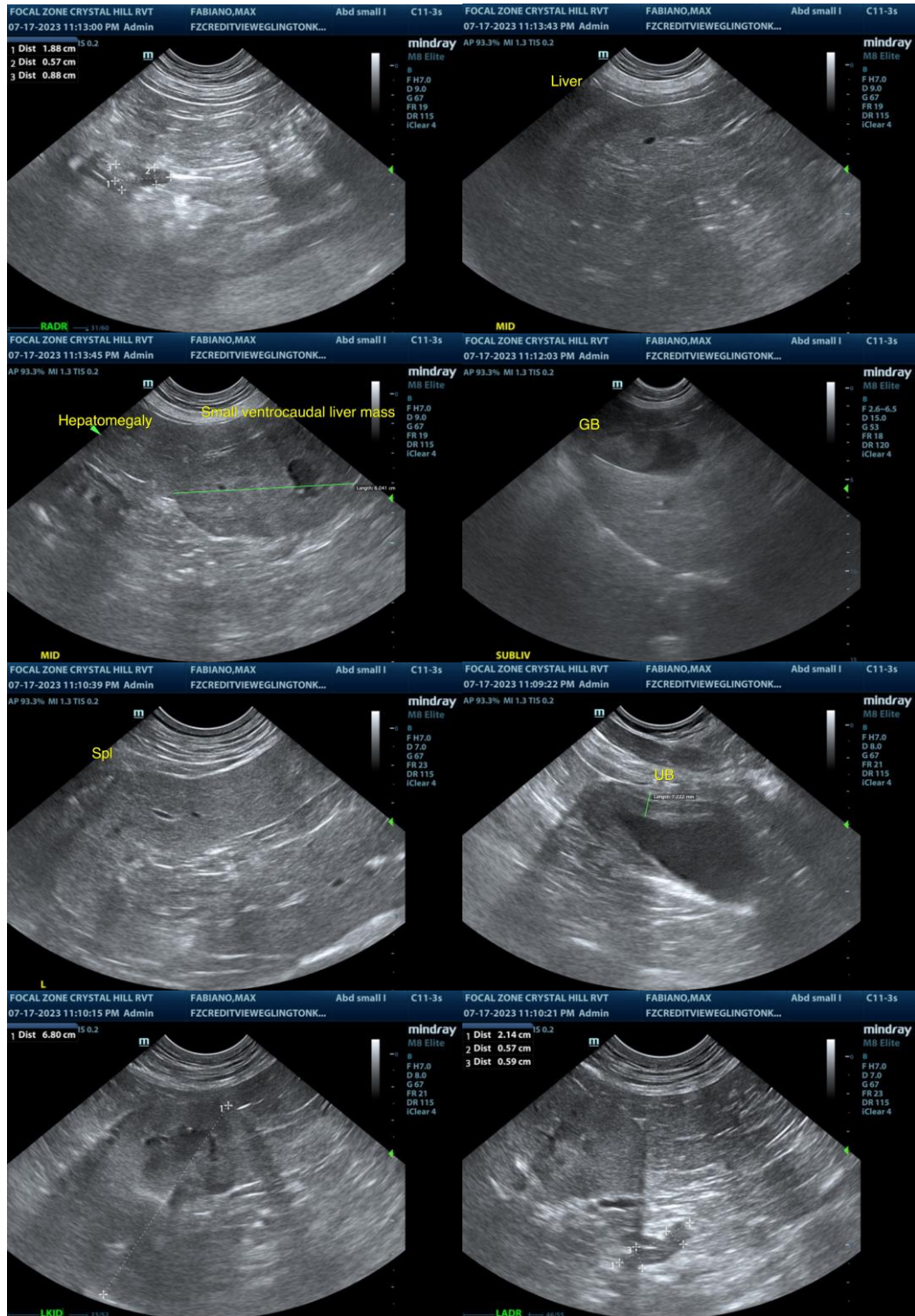
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@SonoPath.com

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