

PATIENT PRESENTING CLINICAL SIGNS

Molly McGuire 5# weight loss noted on routine exam, 'slowing down', large palpable abdominal mass Rimadyl, Denamarin

SPECIES HCT- 37.3, WBC 14.2, ALP 646, ALT 141,

Canine **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

BREED *Urinary System*

Lab Mix 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 was noted.

SEX FS No overt pathology was noted In the area of the iliac trifurcation including no evidence of medial iliac or sublumbar lymphadenopathy / masses.

AGE 14 years 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 7.0 cm in length.

WEIGHT 46.4 *Adrenal Glands*

INTERPRETED BY The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 3.2 cm length x 0.92 cm width at the caudal pole. The right adrenal gland was not definitively visualized.

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

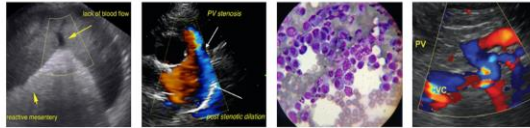
IMAGING PERFORMED BY The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

HOSPITAL NAME Lehigh Valley AH (Bath) *Liver/ Gallbladder*

REFERRING VET 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.

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DATE 7/20/22



PATIENT

Gastrointestinal

Molly McGuire

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild, variably echogenic, ingesta/chyme most consistent with post prandial presentation without signs of ileus, obstruction or foreign material.

SPECIES

Canine

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.

BREED

Lab Mix

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

SEX

FS

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

AGE

14 years

Free Abdomen

A large mid to cranial abdominal nonhomogeneous mixed echogenic mass measuring at least 12.0-13.0 cm in diameter but potentially larger as the entire mass would not fit into a single viewing window was present. The mass was noted adjacent to yet not overtly connected to the cranial spleen and directly effacing the caudal aspect of the liver. Mild volume echogenic peritoneal free fluid was present.

WEIGHT

46.4

Rapid view of the heart revealed no overt evidence of cardiac or pericardial masses. No overt evidence of pericardial free fluid was noted. Subjective mild volume pleural effusion was present in the visible window.

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Large intraabdominal mass - most likely hepatic origin
- Mild heterogeneous spleen - no evidence of splenic masses / nodules
- Mild volume echogenic peritoneal effusion
- Concurrent subjectively non-cardiogenic pleural effusion

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

Secondary Findings

- Mild chronic renal changes

HOSPITAL NAME

Lehigh Valley AH
 (Bath)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Ferrari

The confirmed mass within the mid to cranial abdomen appears to be hepatic in origin with non-hepatic origin i.e., nonobvious splenic, omental, or lymphatic origin is possible yet thought less likely. The concurrent presence of subjective non-cardiogenic pleural effusion is suggestive of bicavitary neoplastic criteria.

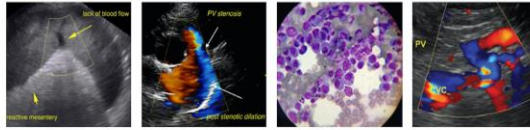
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Ultrasound guided FNA of the intraabdominal mass, as well as pleural effusion analysis and cytology, could be considered for further assessment. However, unfortunately, an unfavorable prognosis is likely indicated.

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Lab Mix

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ARDMS/RVT

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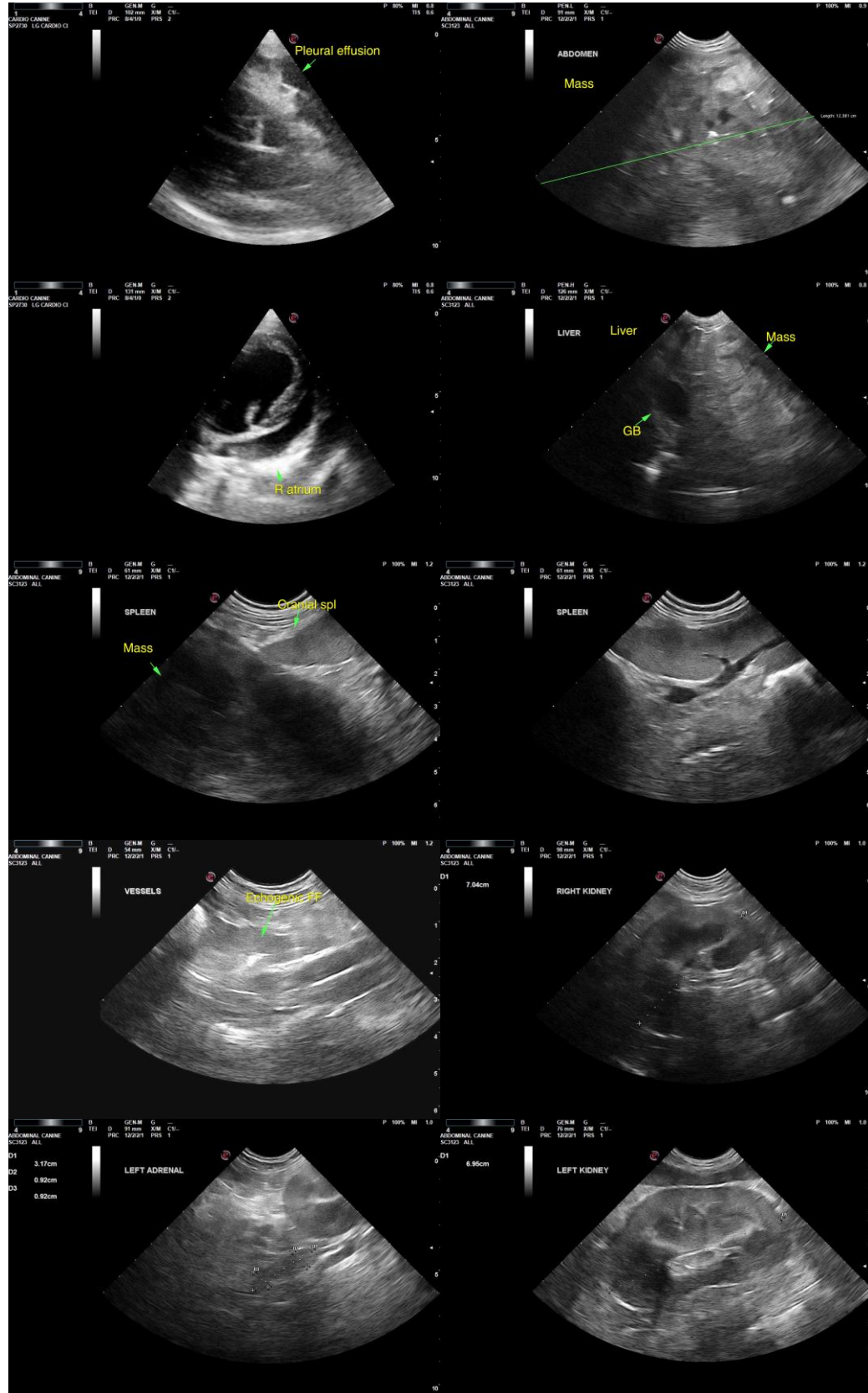
Dr. Ferrari

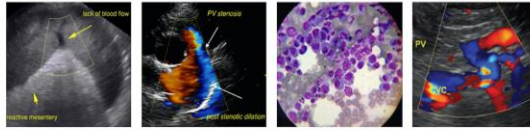
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PATIENT

Molly McGuire

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.

SPECIES

Canine

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.

BREED

Lab Mix

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
mac.daniel@sonopath.com

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