



**PATIENT PRESENTING CLINICAL SIGNS**

Solomon McCabe Decreased activity for 1 month, diarrhea for 1 week, weight loss  
WBC 12.8 with mild lymphopenia, HCT 39.8, platelet 81, Unremarkable Chemistry Panel

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine **Urinary System**

**BREED** 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.

Bernese Mtn Dog

**SEX** No overt pathology was noted in the area of the residual prostate.

MN The area of the aortic trifurcation was free of pathology including no evidence of medial Iliac or sublumbar lymphadenopathy/masses.

**AGE** 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 6.9 cm in length. The right kidney measured 7.1 cm in length.

2012

**WEIGHT**

83

**Adrenal Glands**

**INTERPRETED BY** The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.5 cm length x 0.59 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 2.0 cm length x 0.46 cm width at the caudal pole.

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

**IMAGING Spleen**

**PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

The spleen exhibited generalized enlargement with areas of mild asymmetrical lateral and medial capsule contour. Generalized heterogeneous splenic parenchyma exhibiting Intermittent subtle hypoechoic nodules was noted. Normal splenic vascularity was present.

**HOSPITAL NAME**

Maple Hills VH

**Liver/ Gallbladder**

**REFERRING VET**

Dr. Eckman

The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.

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**Gastrointestinal**

**DATE**

7/21/22

The stomach presented intact yet mildly thickening wall layering. The stomach was empty with mild luminal gas with no evidence of retained ingesta, fluid, or foreign material. The gastric body wall width measured 0.76 cm.



**PATIENT**

Solomon McCabe

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. The small Intestinal wall width measured 0.38 cm.

**SPECIES**

Canine

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

***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.

**BREED**

Bernese Mtn Dog

***Free Abdomen***

**SEX**

MN

Intermittent variably sized mesenteric lymph nodes exhibiting uniform isoechoic parenchyma compared to adjacent omentum were present. An example measured 4.0 cm in diameter. No free fluid was noted.

**AGE**

2012

Rapid view of the heart revealed no evidence of pericardial effusion or overt pericardial tumors. Potential mild thickening in the area of the right atrioventricular groove is possible yet not definitive.

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

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- Infiltrative splenomegaly exhibiting nonhomogeneous to subtly nodular parenchyma
- Nonspecific hepatomegaly
- Mildly thickened yet intact stomach walls, sonographically unremarkable small bowel
- Intermittent variably sized isoechoic mesenteric lymphadenopathy

**INTERPRETED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Although sampling is required for further assessment, the splenic presentation is most consistent with generalized infiltrative splenic round cell neoplasia such as lymphoma, histiocytic sarcoma, given the breed, or other. Potential for multicentric neoplasia given the concurrent hepatomegaly and probable mesenteric lymphadenopathy is possible.

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ARDMS/RVT

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Assuming normal clotting status, hepatosplenic FNA using a 25-gauge needle is recommended for screening cytology for further assessment and potential for an oncology consult if neoplastic process is confirmed. Three-view chest radiographs are recommended if not done. Potential for gastroenteritis without overt evidence of gastrointestinal mural pathology. As-needed gastrointestinal support is recommended. A very guarded prognosis pending sampling.

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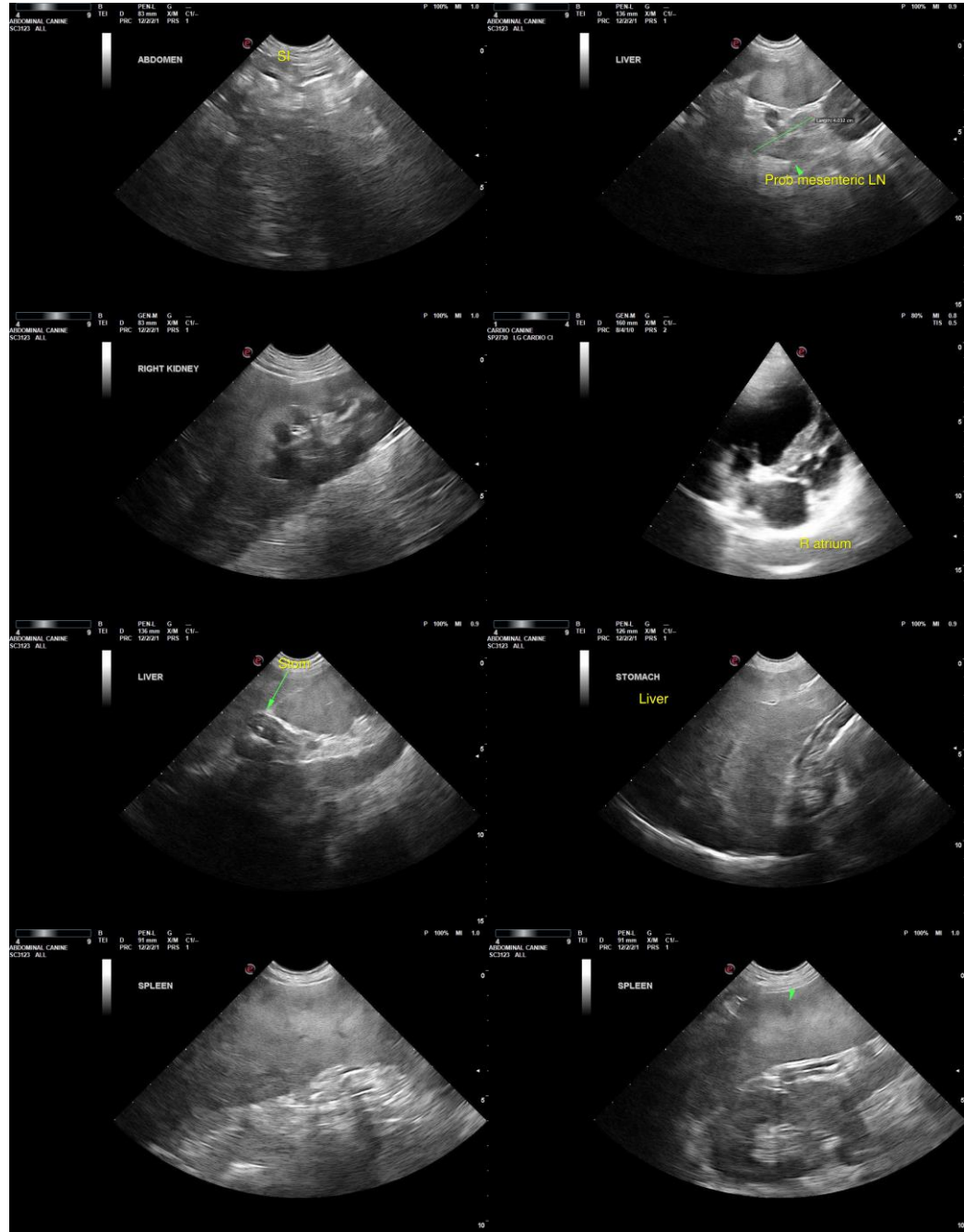
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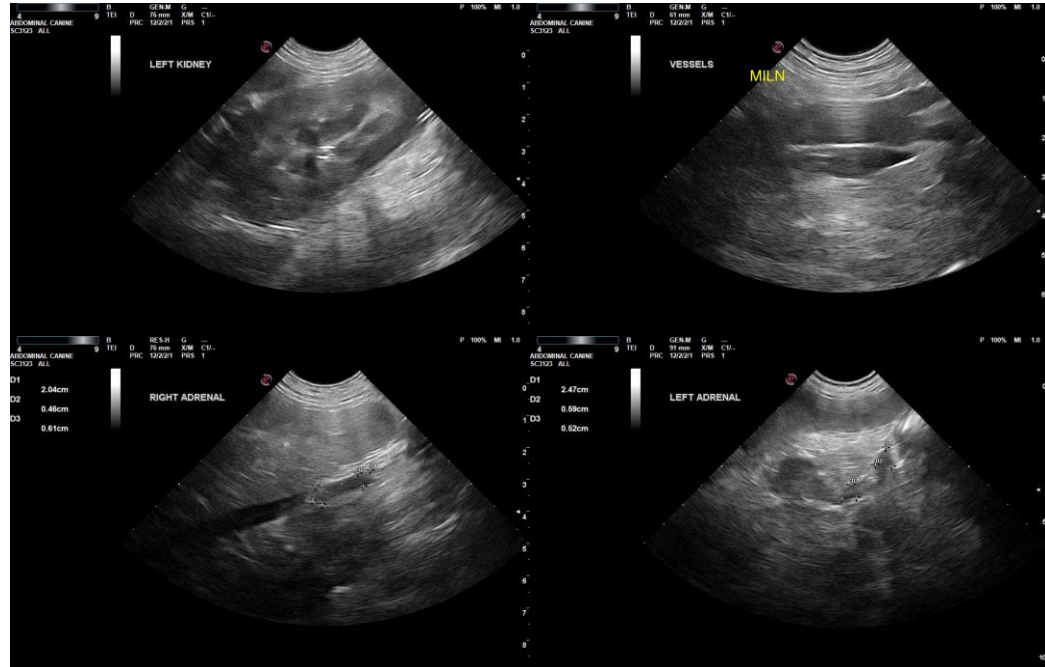
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**The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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.

**R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)**

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