

**PATIENT**

Harry Iannone

PRESENTING CLINICAL SIGNS

Lethargic, pale, bloated belly

Abnormal PE/Chem/CBC/UA Results: Splenic Mass suspected on ultrasound ran in house

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder was subnormal in size owing to lack of urine distention which prohibited full evaluation of the urinary bladder walls. No overt evidence of inflammatory or neoplastic urinary bladder criteria. Minimal anechoic urine was present with no sediment or calculi. The urethra exhibited normal structure and tone to a depth of 4.0 cm.

BREED

Golden

The residual prostate was free of pathology, measuring 1.0 cm in diameter.

SEX

NM

The area of the aortic trifurcation was free of pathology and without evidence of medial iliac or sublumbar lymphadenopathy / masses.

AGE

10 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 7.5 cm in length. The right kidney measured 7.9 cm in length.

WEIGHT

64 lbs.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 2.8 cm length x 0.34 cm width in the caudal pole. The right adrenal gland measured 3.2 cm length x 0.72 cm width in the caudal pole.

INTERPRETED BY

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

Spleen

The spleen was not definitively visualized potentially owing to overlying marked hepatomegaly, volume contraction or potential displacement secondary to moderate to significant volume peritoneal free fluid.

IMAGING PERFORMED BY

Sarah Pender, CVT

Liver/ Gallbladder

The liver exhibited marked enlargement, asymmetrical contour, and generalized heterogeneous to nonuniform hepatic parenchyma exhibiting multifocal, variably sized, nonhomogeneous, variably expansive, intraparenchymal nodules to nodular masses. An example of a liver nodule to nodular mass measured approximately 3.0 cm in diameter. Subjective normal hepatic vascular volume was present. The ventral liver extended caudally past the level of the gastric axis. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

HOSPITAL NAME

SVS Imaging QC

REFERRING VET

Dr. Mulch

INVOICE

14206

Gastrointestinal

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.

DATE

7/5/22

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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.

SPECIES

Canine

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

Golden

Free Abdomen

Moderate to significant volume peritoneal free fluid exhibiting mild echogenic changes suggestive of cellularity was present. Perihepatic mildly nonuniform to hyperechoic mesentery was noted. No overt evidence of significant intraabdominal lymphadenopathy was evident, although mildly prominent isoechoic to mildly hypoechoic mesenteric lymph nodes are possible.

SEX

NM

AGE

10 years

ULTRASONOGRAPHIC FINDINGS

- Marked nonhomogeneous irregular to hepatomegaly exhibiting multifocal variably sized to expansive nodules to nodular masses
- Moderate to significant volume peritoneal free fluid exhibiting echogenic changes

WEIGHT

64 lbs.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The primary finding of the marked hepatomegaly exhibiting nonhomogeneous parenchyma with multifocal nodules to nodular masses is most consistent with infiltrative neoplastic criteria, although sampling is required for further assessment.

The effusion in this case may be owing to significant hepatic disease, i.e., portal hypertension, although the possibility of intraabdominal hemorrhage secondary to hepatic pathology i.e., neoplasia, could be possible. Abdominocentesis for further assessment is suggested.

The potential for concurrent splenic pathology can neither be confirmed to excluded. Regardless, the degree of hepatic pathology precludes surgical options in this case. Three view chest radiographs +/- hepatic sampling for further assessment and potential for oncology consult could be considered. Unfortunately, an unfavorable prognosis is indicated.

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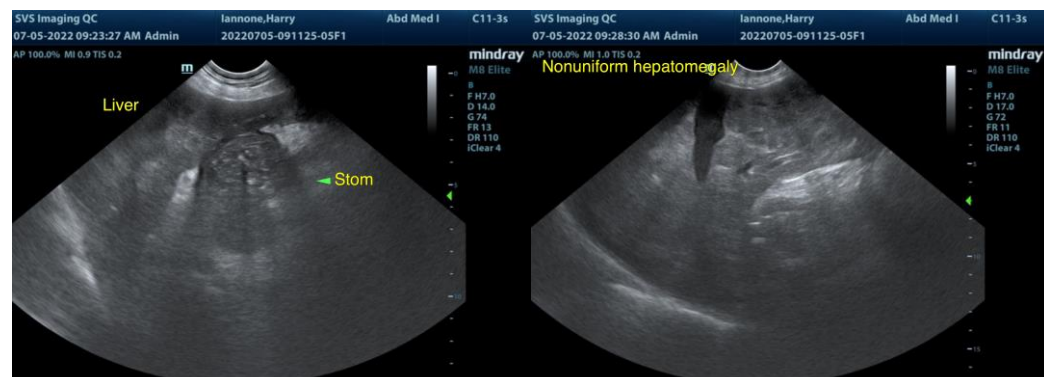
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svsmobileimaging.com 309-737-3070



Clinical Sonography & Telectyology

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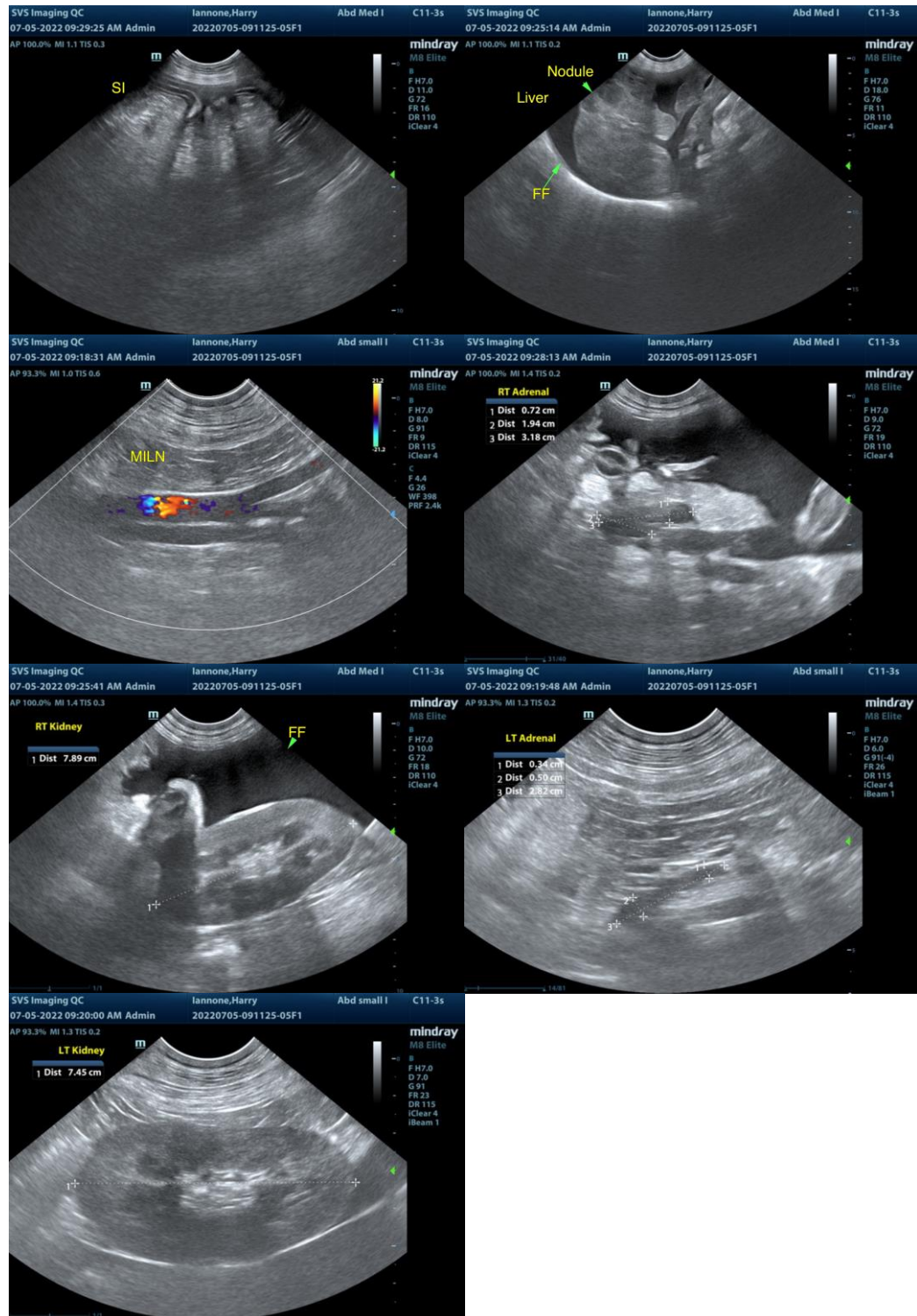
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology



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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)
info@SonoPath.com