



PATIENT

Maggie Friedman

PRESENTING CLINICAL SIGNS

History: liver enzyme elevation, episodes of seizures vs syncope. elevated Ca 2+

Abnormal PE/Chem/CBC/UA Results: Ca 2+ 13.2, ALT 170, ALKP 489, GGT 14, BUN 39

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Shih Poo

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild nondependent particulate sediment along with minor dependent hyperechoic sand. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

SEX

FS

Normal size and margination was 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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Minor medullary mineral and intermittent small cortical cysts were noted bilaterally. The left kidney measured 3.8 cm in length. The right kidney measured 4.3 cm in length.

AGE

14 years

The area of the aortic trifurcation was free of pathology.

WEIGHT

NA

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.60 cm width at the caudal pole and 1.8 cm length.

INTERPRETED BY

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

A well-defined, hyperechoic nodule was present in the cranial right adrenal gland with mild associated symmetrical capsule expansion. The nodule did not exhibit signs of mineralization or vascular invasion. The nodule measured 0.95 cm in diameter.

The right adrenal gland measured 0.46 cm width at the caudal pole and 2.0 cm length.

IMAGING PERFORMED BY

Diane McFadden

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Subtle to indistinct small hyperechoic nodules were noted in the medial parenchyma adjacent to the hilus consistent with small myelolipomas. 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

Franklin Lakes Animal
Hospital

REFERRING VET

Dr. Hudson

Liver

The liver was mildly enlarged in size with normal structure and contour. The liver parenchyma exhibited generalized remodeling with a moderate coarse echotexture. A solitary mildly expansive nonhomogeneous to cystic mass was present in the ventral aspect of the mid to left liver measuring 4.4 cm in diameter. 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 with mild congealed mobile debris. No evidence of inflammatory gallbladder criteria. The cystic and common bile ducts were normal.

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Gastrointestinal

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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained a mild amount of retained anechoic fluid with no signs of ileus, obstruction or foreign material. A focal pyloric mucosal hyperplasia to polyp measuring 1.1 cm in width was present. This area did not appear to be overtly obstructive to pyloric outflow.

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

Shih Poo

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

SEX

FS

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

Free Abdomen

AGE

14 years

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

NA

- Hepatopathy with cystic intraparenchymal mass
- Mild gallbladder debris (non-mucocele)
- Focal pyloric mucosal hyperplasia/polyp-benign
- Chronic renal changes with minor medullary mineral and cortical cysts
- Minor urinary bladder dependent mineral/sand
- Right adrenal nodule-probable adenoma

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Diane McFadden

The liver mass was nonspecific with neoplastic criteria favored although benign etiology is possible. Correlation with pending cytology is suggested.

Screening BP to assess for evidence of hypertension which may allude to a right adrenal neoplastic process is suggested.

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Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

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A gastric protectant protocol and canned diet may be considered if clinical signs consistent with gastritis are present.

Three view chest radiographs suggested if not recently done to assess for occult thoracic pathology.

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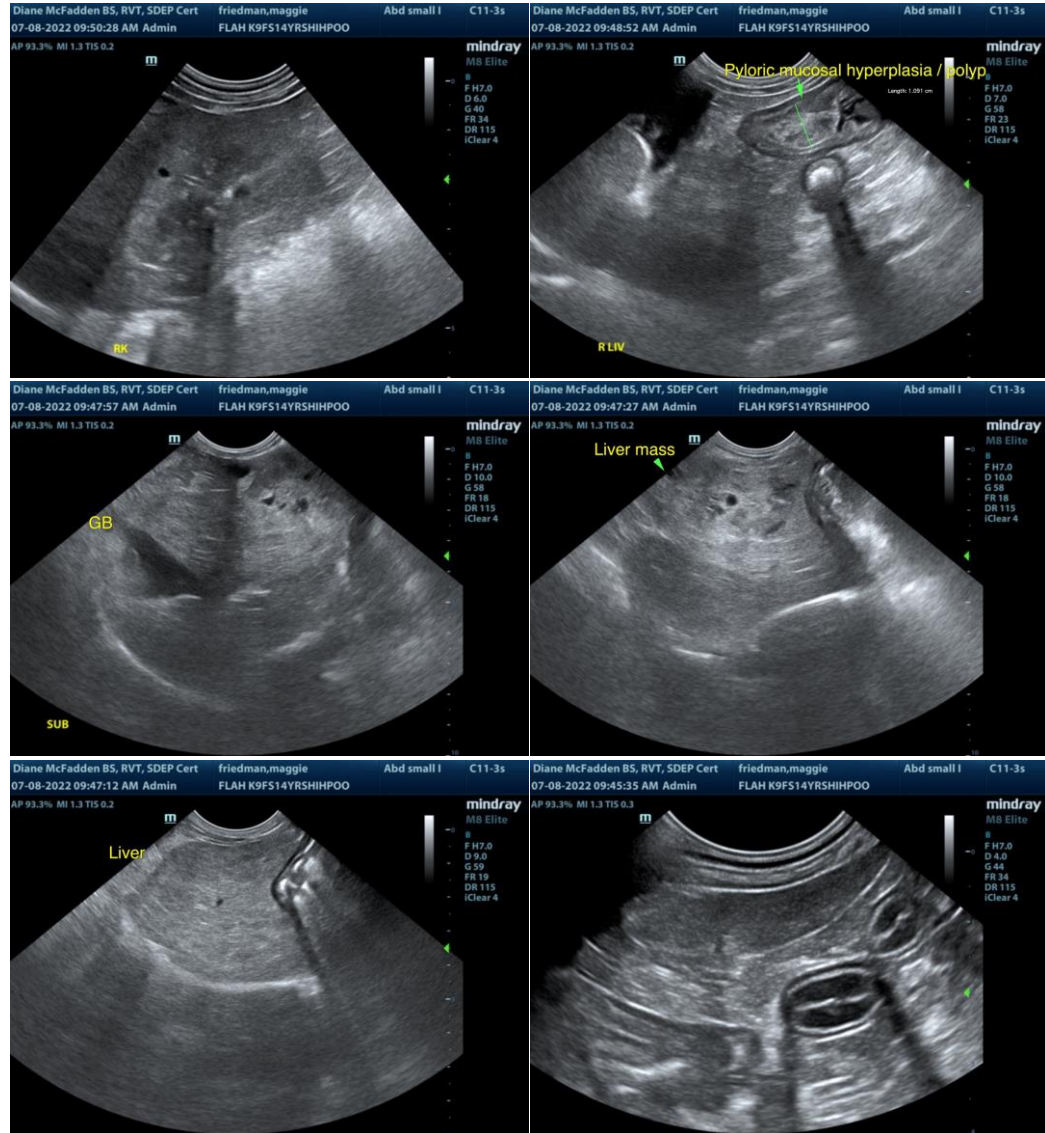
Dr. Hudson

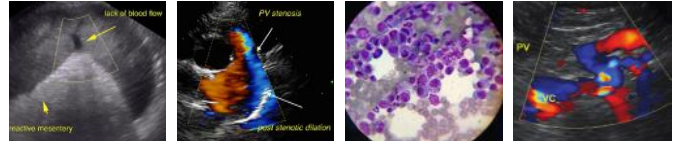
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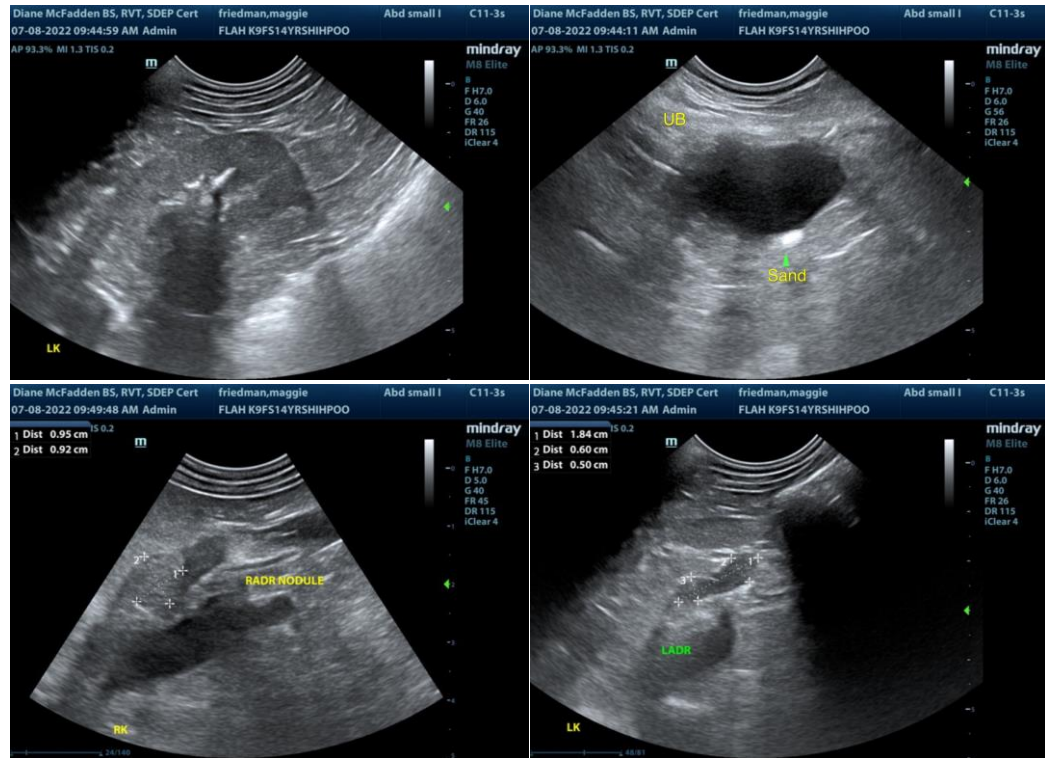
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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