



PATIENT PRESENTING CLINICAL SIGNS

Heidi Chuckra Polkiuria, hematuria, mass effect cranial abdomen.

SPECIES Medication: Clavamox, ursodial, thyroxine

Canine APL 797, ALT 150, GGT 77

BREED **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Urinary System

The urinary bladder was mildly distended with normal tone and normal urinary bladder wall without evidence of inflammatory criteria or tumors. Anechoic urine was present primarily with minor, non-dependent, particulate sediment. The urethra exhibited normal structure and tone to a depth of 3.0 cm.

SEX FS No evidence of pathology was noted In the area of the uterine remnant.

AGE The area of the aortic trifurcation was free of pathology.

2014 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 or pyelectasia was present. The left kidney measured 6.1 cm in length. The right kidney measured 6.2 cm in length.

WEIGHT

49

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.9 cm length x 0.62 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 1.9 cm length x 0.53 cm width at the caudal pole.

INTERPRETED BY

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

Spleen

The spleen exhibited subjective mild enlargement with a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. 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. Normal vascularity was present with no splenic masses or nodules visualized. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

Liver/ Gallbladder

The liver exhibited generalized enlargement with primarily symmetrical capsule contour and variably heterogeneous to remodeled parenchyma, most notable in the mid-right liver. A symmetrical, homogeneous mass was present in the area of the ventrocaudal mid-right liver measuring ~8.0 cm in diameter. The mass exhibited similar echogenicity to adjacent liver. The gallbladder was non-distended in size containing primarily anechoic content with mild nonorganized gallbladder sediment. No evidence of inflammatory criteria was noted. The cystic and common bile ducts were normal.

HOSPITAL NAME

White Haven VH

REFERRING VET

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PATIENT *Gastrointestinal*

Heidi Chuckra 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.

SPECIES 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.

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

BREED *Pancreas*

Beagle The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum, consistent with age-related pancreatic changes. No signs of active inflammation or neoplasia.

SEX *Free Abdomen*

FS No overt lymphadenopathy or peritoneal effusion was present.

AGE **ULTRASONOGRAPHIC FINDINGS**

- 2014
- Minor urinary bladder sediment
 - Mild chronic renal changes
 - Subjective mild splenomegaly - subjectively benign
 - Enlarged variably nonhomogeneous liver with ventrocaudal hepatoma-like mass
 - Mild gallbladder sediment (non mucocele)

WEIGHT
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A definitive cause of the reported hematuria was not obvious without overt evidence of upper or lower urinary tract pathology. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

Assuming normal clotting status, hepatic parenchyma and hepatoma-like mass FNA cytology is warranted for further assessment. Potential for low-grade hepatic neoplasia cannot be excluded. If persistent splenomegaly is noted, concurrent screening splenic FNA cytology using a 25-gauge needle may be considered primarily to make sure only benign splenic changes are present or if evidence of weight loss. Continued empirical hepatosupportive medications are suggested.

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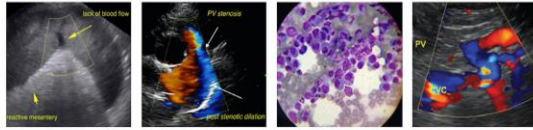
Sonographically, the hepatoma-like mass appears to be amendable to surgical resection if surgery is indicated.

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Beagle

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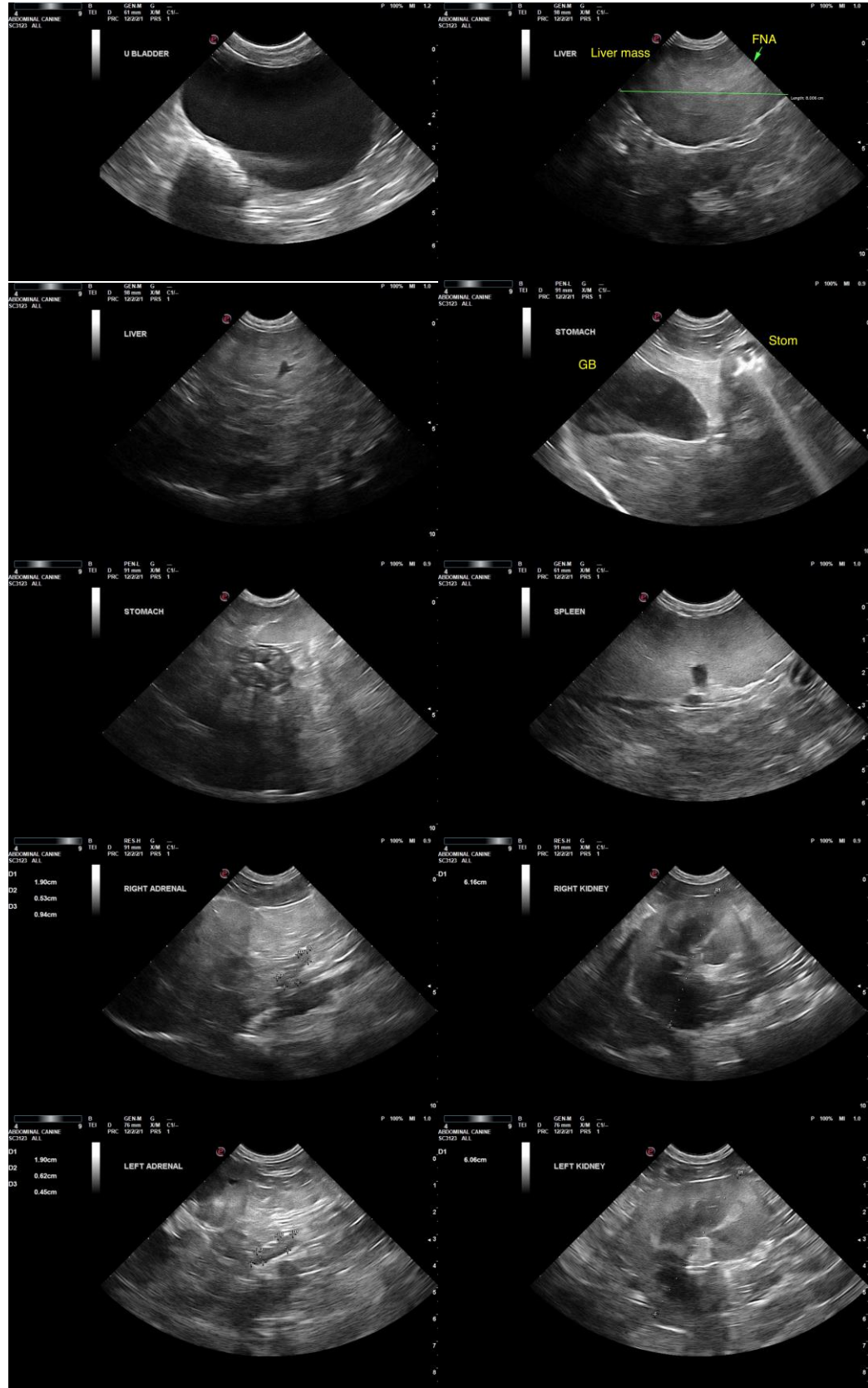
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PATIENT

Heidi Chuckra

SPECIES

Canine

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.

BREED

Beagle

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.

SEX

FS

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