

PATIENT

Bella Moore

PRESENTING CLINICAL SIGNS

Multiple firm mammary masses. AUS as part of pre-surgery/neoplasia workup.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 were noted.

BREED

Dachshund

The uterus and ovaries were sonographically unremarkable.

SEX

Intact Female

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 4.7 cm in length. The right kidney measured 5.4 cm in length.

AGE

9 years

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 0.47 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.47 cm width at the caudal pole and 0.40 cm width at the cranial pole.

WEIGHT

18.9 lbs.

INTERPRETED BY

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

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present. Subtle medial folding of the caudal spleen was present. A solitary, non-expansive, hypoechoic nodule was noted cranial to the splenic hilus, measuring 0.37 cm in diameter. 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.

**IMAGING
PERFORMED BY**

Pamela Harrigan, RDCS

HOSPITAL NAME

Greenwich Bay AH

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with minor, echogenic, nonorganized, primarily nondependent biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

REFERRING VET

Johathan Chyten, DVM

INVOICE

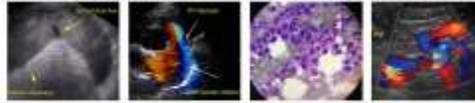
12104

Gastrointestinal

DATE

8/10/21

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. The pylorus wall width measured 0.39 cm.



PATIENT

Bella Moore

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 duodenum wall width measured 0.42 cm. The jejunum wall width measured 0.36 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 was evident.

BREED

Dachshund

Free Abdomen

SEX

Intact Female

Focal, visualized, mesenteric, and medial Iliac lymphadenopathy adjacent to the hilus were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of a mesenteric lymph node measured 0.35 cm width. An example of a medial iliac lymph node measured 0.41 cm width.

AGE

9 years

No effusion was noted.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

18.9 lbs.

Primary Findings

- Nonspecific, non-expansive, solitary splenic nodule
- Mild age-related renal changes
- Minor gallbladder debris (non-mucocele)
- Intermittent, mildly prominent, likely incidental mesenteric and medial iliac lymphadenopathy

INTERPRETED BY

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

IMAGING

PERFORMED BY

Pamela Harrigan, RDCS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Greenwich Bay AH

No overt evidence of intraabdominal metastasis owing to mammary masses.

REFERRING VET

Johathan Chyten, DVM

The solitary, non-expansive splenic nodule may suggest focal area of hematopoiesis or lymphoid hyperplasia. The potential for focal emerging splenic neoplastic or metastatic nodule is considered unlikely. However, sonographic monitoring of the splenic nodule with initial recheck in 4 weeks would be ideal and is recommended.

INVOICE

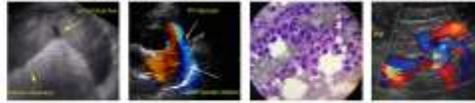
12104

The focal visualized mesenteric and medial iliac lymph nodes were not overtly consistent with inflammatory or neoplastic criteria with potential for minor lymphoid hyperplasia and considered incidental.

DATE

8/10/21

Reassessment of these lymph nodes would also be appropriate at the time of splenic nodule sonographic reassessment.



PATIENT

Bella Moore

SPECIES

Canine

BREED

Dachshund

SEX

Intact Female

AGE

9 years

WEIGHT

18.9 lbs.

INTERPRETED BY

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

IMAGING

PERFORMED BY

Pamela Harrigan, RDCS

HOSPITAL NAME

Greenwich Bay AH

REFERRING VET

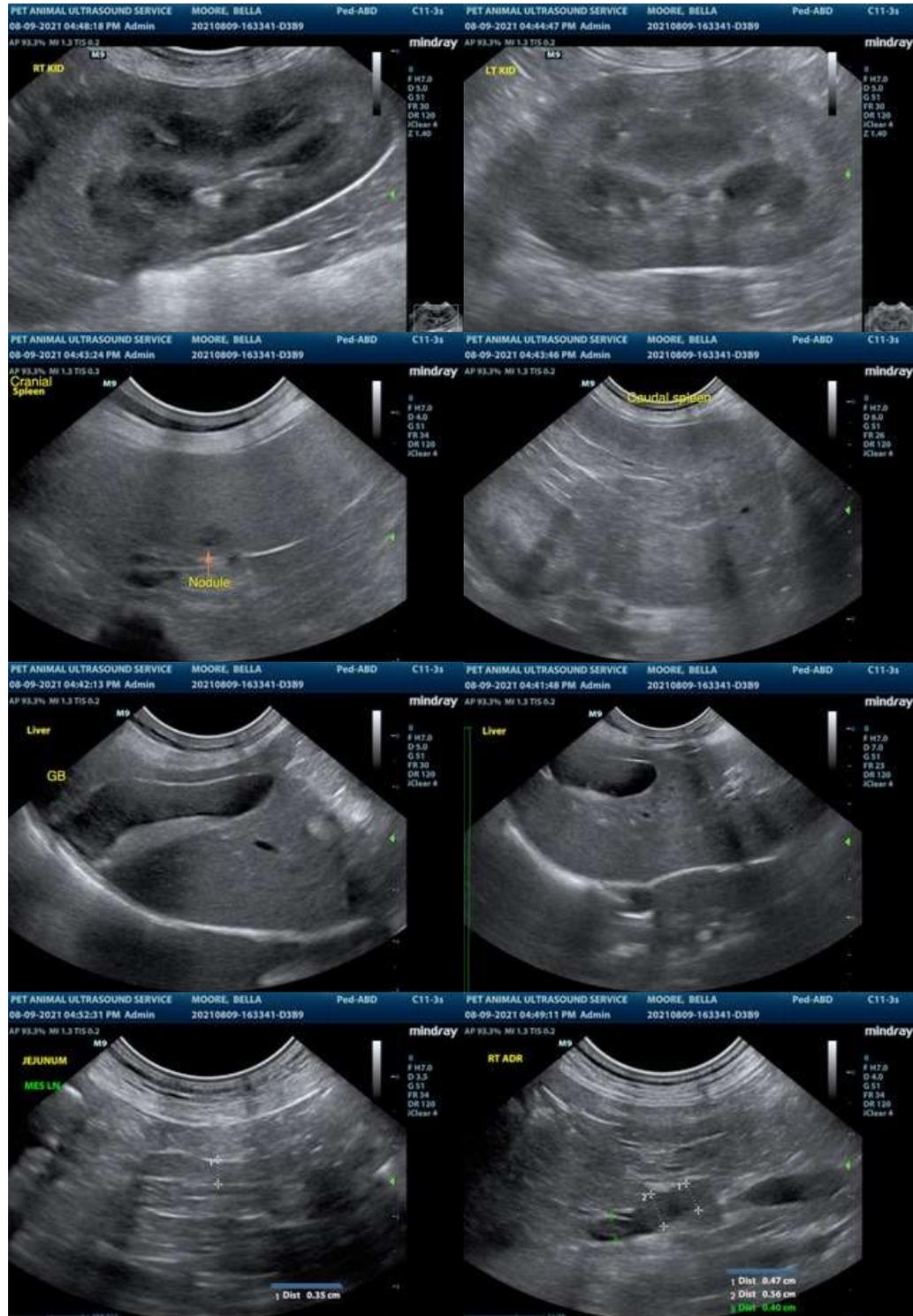
Johathan Chyten, DVM

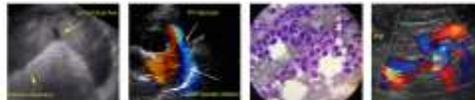
INVOICE

12104

DATE

8/10/21





PATIENT

Bella Moore

SPECIES

Canine

BREED

Dachshund

SEX

Intact Female

AGE

9 years

WEIGHT

18.9 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan, RDMS

HOSPITAL NAME

Greenwich Bay AH

REFERRING VET

Johathan Chyten, DVM

INVOICE

12104

DATE

8/10/21



The information and recommendations provided are based on the images presented by the referring veterinarian. 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)
info@SonoPath.com