

**PATIENT**

Luna Ghelli

**SPECIES**

Canine

**BREED**

Mix

**SEX**

Spayed Female

**AGE**

3

**WEIGHT**

56

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Maniar

**INVOICE**

12093

**DATE**

8/10/21

**PRESENTING CLINICAL SIGNS**

anemia thrombocytopenia, neutropenia

**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 was noted.

No evidence of pathology was noted near the uterine stump or aortic trifurcation.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 6.7 cm in length. The right kidney measured 7.1 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.0 cm length x 0.58 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 2.9 cm length x 0.63 cm width at the caudal pole.

**Spleen**

The spleen exhibited generalized enlargement. The spleen exhibited 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. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

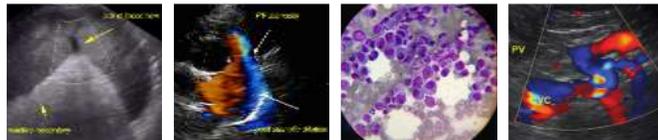
**Liver/ Gallbladder**

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 thin walls and minor gallbladder debris. The cystic and common bile ducts were normal.

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. Minor retained echogenic nonshadowing ingesta was present in the stomach. No evidence of shadowing luminal echoes was noted. The gastric body wall width measured 0.60 cm.

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. Generalized small intestinal wall width measured 0.34 cm.



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

Luna Ghelli **Pancreas**

**SPECIES** 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.

Canine

**BREED** **Free Abdomen**

Mix Small pocket of scant subjectively acellular peritoneal free fluid was noted in the caudal abdomen around the urinary bladder. No overt lymphadenopathy was noted. The omentum was of uniform echogenicity.

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Spayed Female

## ULTRASONOGRAPHIC FINDINGS

**AGE** **Primary Findings**

3

- Generalized splenomegaly with normal maintained parenchyma echogenicity and symmetrical contour - nonspecific, hematopoiesis or hyperplasia owing to anemia, splenitis, or less likely occult infiltrative neoplasia possible
- Small pocket of scant, subjectively acellular peritoneal free fluid
- Otherwise sonographically unremarkable abdomen

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The etiology of the scant peritoneal free fluid was unclear assuming normal albumin levels.

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Assuming normal clotting status, splenic FNA using a 25-ga needle may be considered for screening cytology primarily to assess for or rule out the potential for splenic neoplasia. Infectious disease serology and CBC pathology review is suggested. Potential bone marrow assessment may eventually be indicated pending additional diagnostics.

**REFERRING VET**

Dr. Maniar

Empirical Doxycycline could be considered pending infectious disease serology and CBC pathology review.

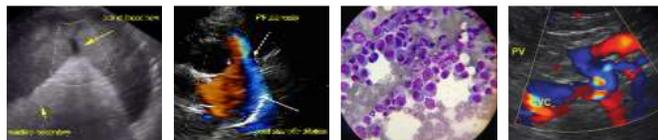
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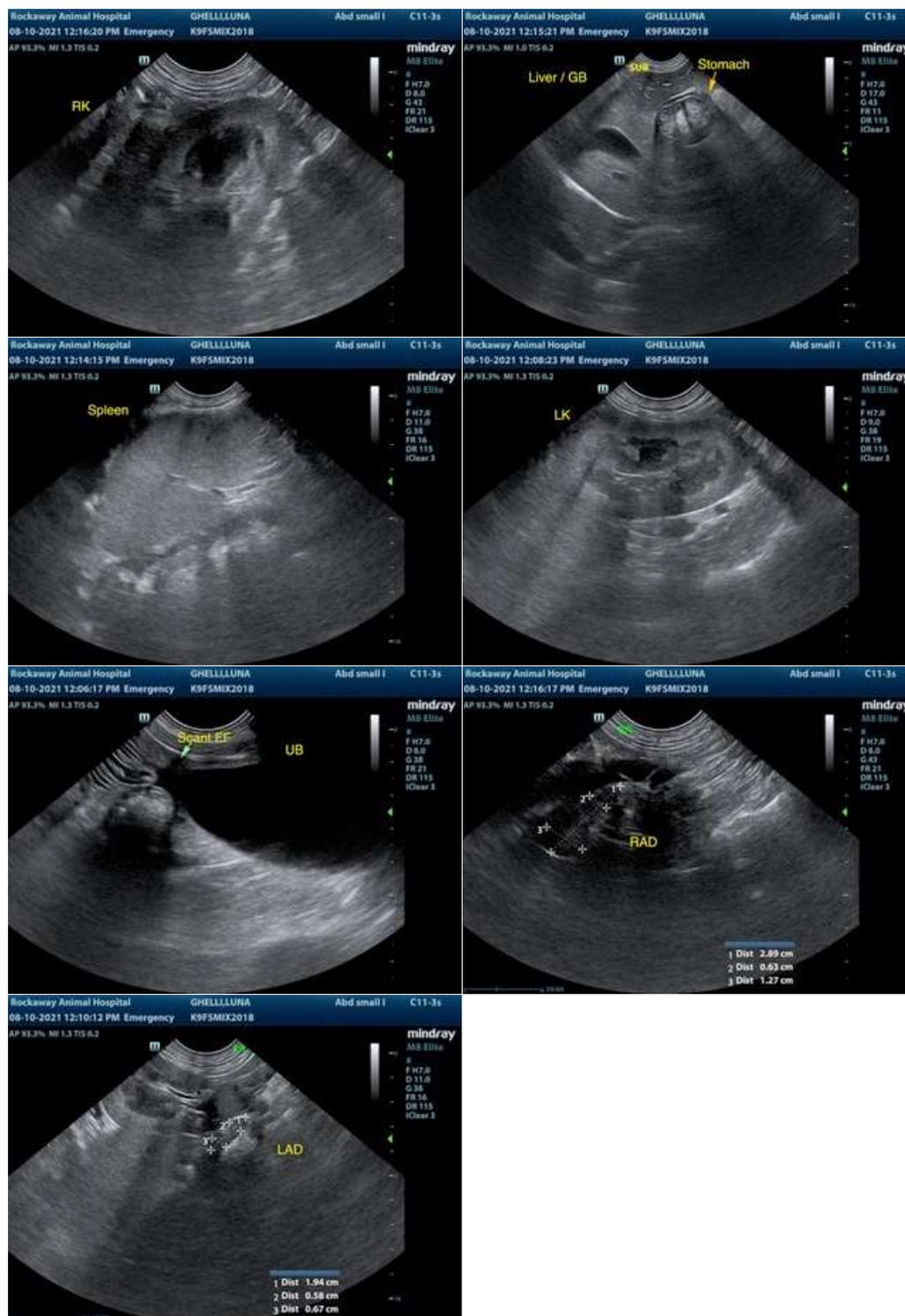
Dr. Maniar

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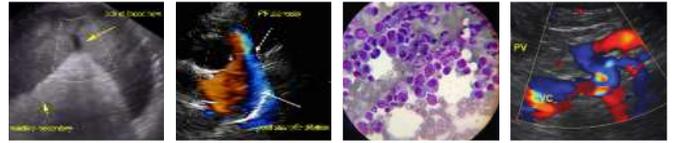
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



**PATIENT**

Luna Ghelli

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.

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**info@SonoPath.com**

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