



**PATIENT**

Tiny Glover

**SPECIES**

Canine

**BREED**

Maltese / Yorkie Poo

**SEX**

M

**AGE**

5yr

**WEIGHT**

15 lbs

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

Ridge Road AH

**REFERRING VET**

Dr. Pathak

**INVOICE**

14570

**DATE**

8/11/22

**PRESENTING CLINICAL SIGNS**

Ascites, abdominal mass. P presented yesterday for V/D, anorexia, distended abd. Removed 580mls fluid from abdomen. Grade III/VI heart murmur. No current meds.

Abnormal PE/Chem/CBC/UA Results: SDMA 20, Bun 44, Phos 6.6, Alb 2.1

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder was subnormal in size owing to lack of urine distention. Full evaluation of the urinary bladder walls was limited owing to lack of urine distention. Mild particulate sediment was present in minimal luminal urine.

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured 2.4 cm in diameter.

The area of the aortic trifurcation was free of pathology.

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 4.2 cm in length. The right kidney measured 4.9 cm in length.

**Adrenal Glands**

The left and right adrenal glands were not definitively visualized owing to regional periadrenal artifact and free fluid.

**Spleen**

A moderately sized, solid to primarily uniform splenic mass measuring approximately 7.2 cm in diameter occupying the subjective mid to caudal spleen was present.

**Liver/ Gallbladder**

The liver was normal in size and overall contour. Moderate coarse parenchyma echotexture with multiple, variably sized to discrete, hypoechoic intraparenchymal nodules were present. An example of a liver nodule measured 1.7 cm in diameter. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**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.

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.



**PATIENT**

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

Tiny Glover

**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**

Maltese / Yorkie Poo

Generalized nonuniform to hypoechoic nodular omentum was present. Moderate volume peritoneal free fluid exhibiting mild echogenic changes, suggestive of minor cellularity, was present.

**SEX**

Rapid view of the heart revealed no obvious evidence of pericardial free fluid or overt masses in the visible window. Potential for very scant pleural free fluid is possible yet not definitive.

M

**AGE**

**ULTRASONOGRAPHIC FINDINGS**

5yr

**Primary Findings**

**WEIGHT**

- Splenic mass
- Intermittent to multifocal discrete hypoechoic hepatic intraparenchymal nodules
- Generalized nonuniform to nodular omentum - potential for ill-defined infiltrative mesenteric mass
- Moderate volume peritoneal free fluid

15 lbs

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**Secondary Findings**

- Benign prostatic hyperplasia

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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Unfortunately, and although sampling is required for further assessment, the splenic mass, hepatic nodules, and omentum presentation with potential for ill-defined infiltrative mesenteric mass are most consistent with multicentric neoplastic criteria such as lymphomatosis, carcinomatosis, or sarcomatosis or similar.

**REFERRING VET**

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Ultrasound-guided FNA of the splenic mass, abnormal omentum, as well as effusion analysis and cytology could be considered for further assessment. However, surgical options appear to be unfortunately precluded. An unfavorable prognosis is indicated.

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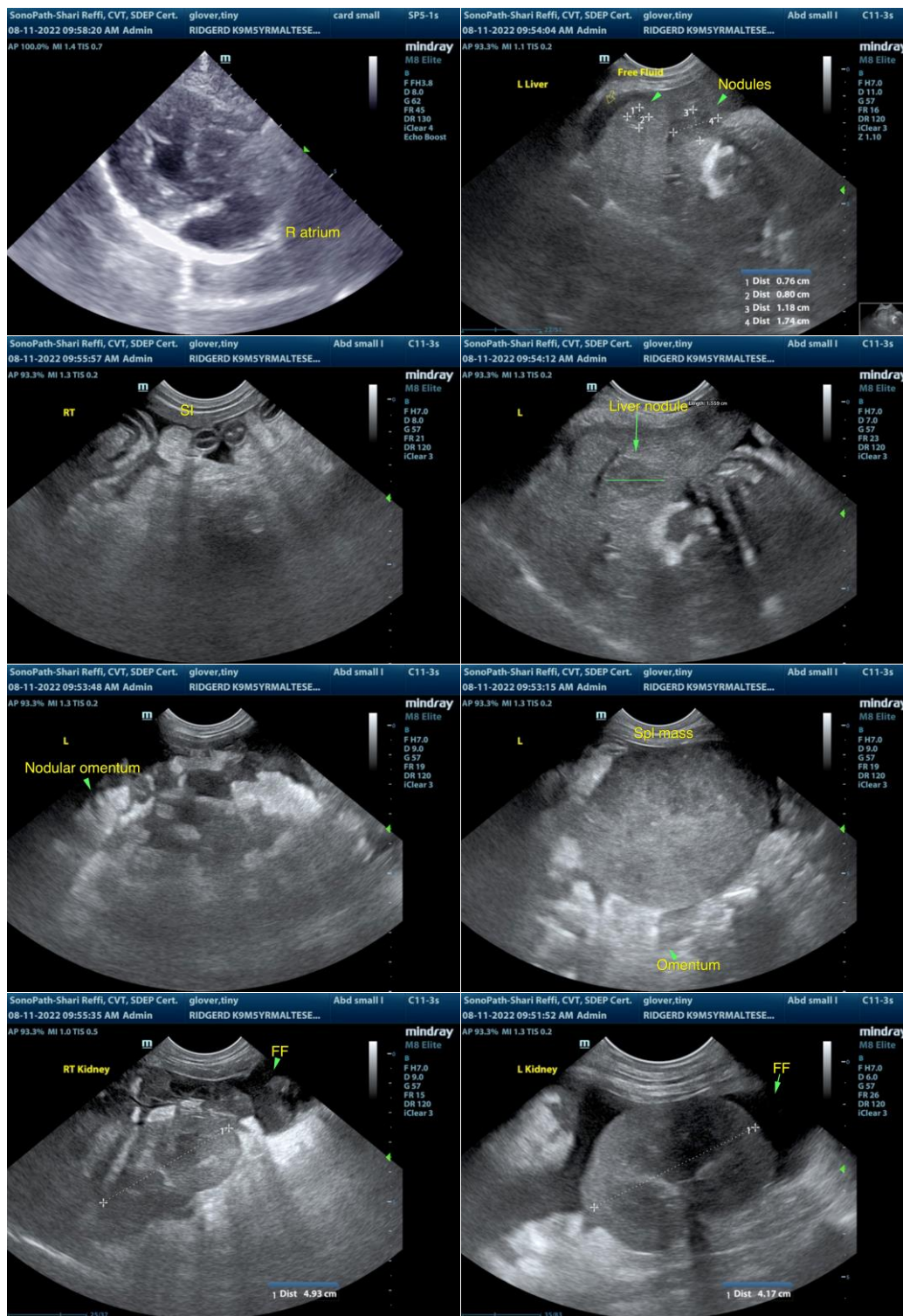
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)**  
info@SonoPath.com