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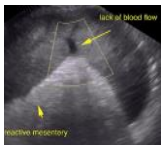
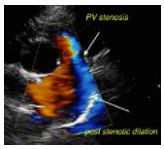
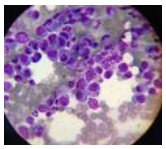
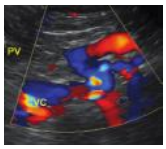





SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jackson Palmer

SPECIES

Canine

BREED

Boxer

SEX

MN

AGE

9yr

WEIGHT

29kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Callihan

HOSPITAL NAME

Animal Emergency Care

REFERRING VET

Dr. Baker

INVOICE

11338ag

DATE

08/15/2022

PRESENTING CLINICAL SIGNS

Presented on ER for 3 day history lethargy, inappetence, weakness and possibly altered mentation

Abnormal PE/Chem/CBC/UA Results

Mildly dehydrated, pale mms

CBC: Hct: 23.5 (PCV 27) and mild neutrophilia (15k), lymphopenia (0.96K) and monocytosis (1.5k)

Chem: Slightly elevated ALKP (214). Mild amylase elevation (1958).

UA: USG: 1.042, pH 6.0, quiet sediment

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 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.

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 7.6 cm in length. The right kidney measured 7.9 cm in length.

The area of the aortic trifurcation was free of pathology.

No overt pathology in the area of the residual prostate.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.48 cm width at the caudal pole and 0.48 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 0.49 cm width at the caudal pole.

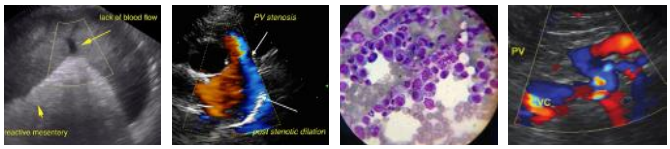
Spleen

A large to expansive mass involving the spleen with secondary capsule expansion and disruption was present and measured 13-14 cm. The parenchyma of the mass was nonhomogeneous to mixed echogenic with focal areas of mild cavitation which may indicate areas of hemorrhage or necrosis. The mass appeared to directly efface the caudal aspect of the liver. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

Liver

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 primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal



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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 segmental minor jejunal ileus and no evidence of obstruction or foreign material.

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.

Free Abdomen

Intermittent mildly prominent to enlarged mesenteric and medial iliac lymph nodes 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 measured 1.7 cm x 0.56 cm.

Scant pockets of peritoneal effusion were present in the caudal abdomen.

Mild perisplenic hyperechoic mesentery was present.

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

ULTRASONOGRAPHIC FINDINGS

- Splenic mass - measured approx. 13-14 cm.
- Mild vacuolar hepatopathy pattern - no overt metastasis
- Mild segmental enteritis pattern with intermittent, nonspecific, mild mesenteric lymphadenopathy
- Normal subjective echo

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other). Neoplastic criteria is favored.

Visualization of the stomach was limited owing to the splenic mass and/or gastric displacement. The mesenteric LNs, although nonspecific, were not overtly suggestive of neoplastic or metastatic criteria and may be secondary hyperplasia or minor lymphadenitis owing to mild SI inflammation.

If no signs of pathology on 3 view chest rads, laparotomy with splenectomy and with gross inspection of the GI tract and LNs would be warranted.

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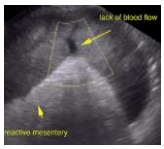
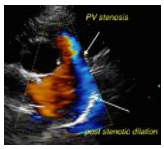
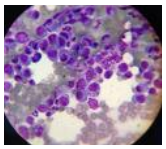
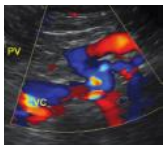

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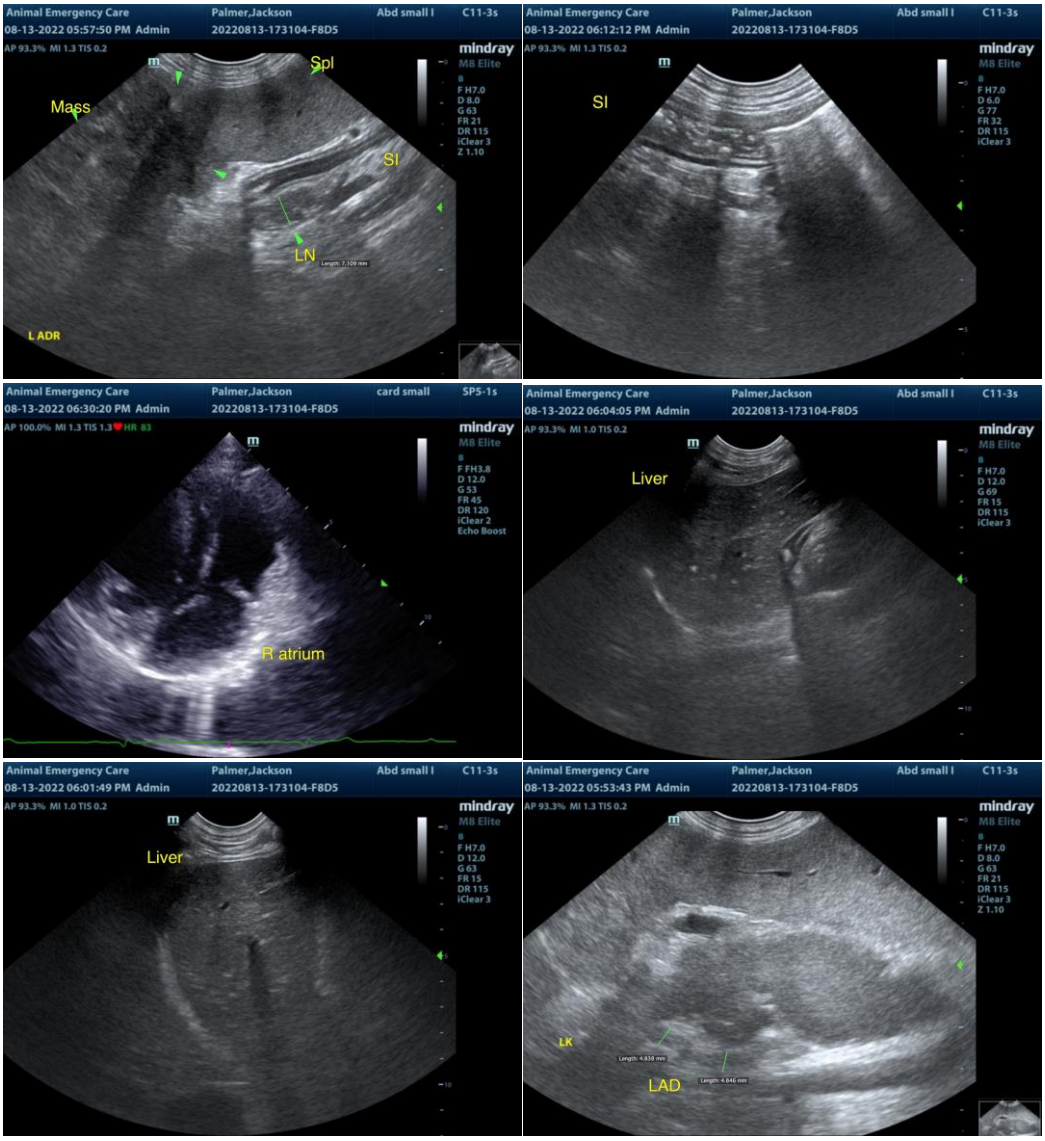

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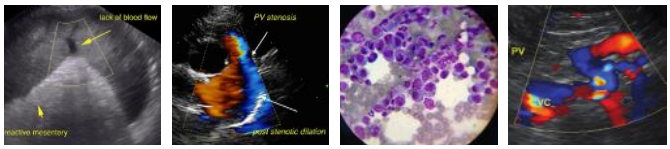

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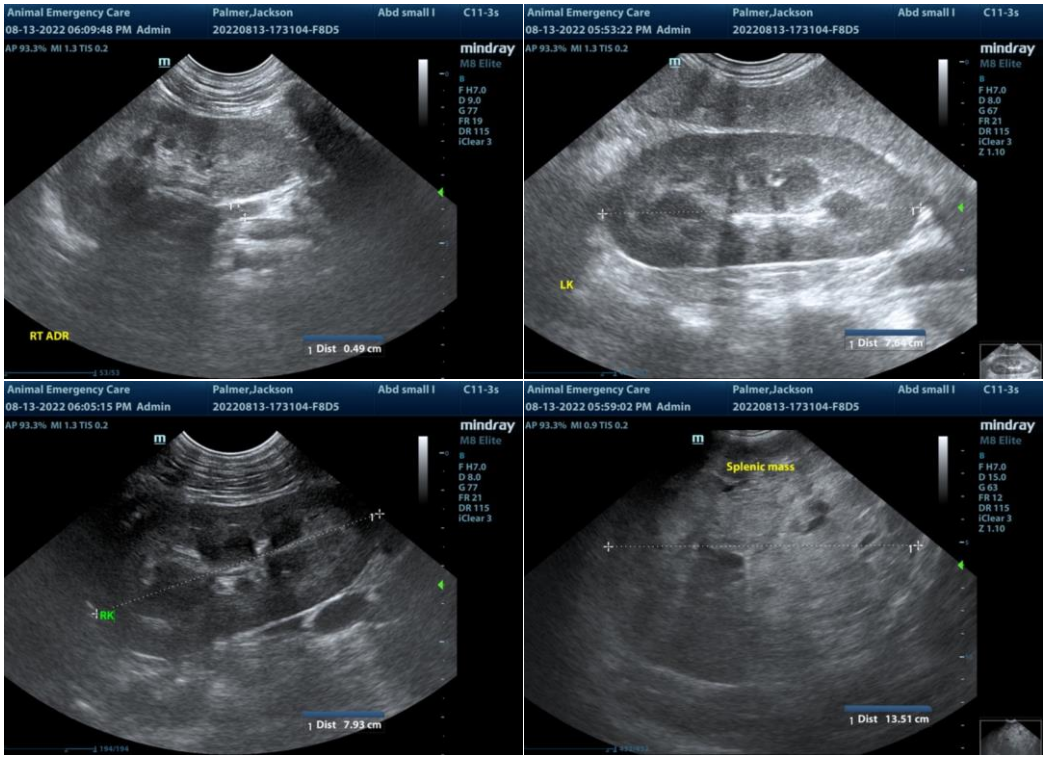

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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