



PATIENT

Kyla Murphy

PRESENTING CLINICAL SIGNS

Limping. ADR

Abnormal PE/Chem/CBC/UA Results: WNL

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Pit Mix

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4 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.

SEX

FS

Normal size and margination were present in the kidneys with mildly enlarged left kidney size compared to the right. Bilateral loss of corticomedullary definition was present. Potential for emerging areas of minor medullary mineral were noted. A moderately sized thinly walled medial left kidney cyst was present along with adjacent smaller cortical cysts. The larger left kidney cyst measured 2.5 cm in diameter. The left kidney measured 6.9 cm in length. The right kidney measured 5.7 cm in length.

AGE

7yr

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT

35lb

The bilateral adrenal glands were mildly enlarged in size with the right larger than the left. Primarily symmetrical capsule contour with homogenous left adrenal parenchyma and mildly non-homogenous right adrenal parenchyma was present. The left adrenal gland measured 1.0 cm width at the caudal pole and 2.8 cm length. The right adrenal gland measured 1.35 cm width at the caudal pole and 3.7 cm length.

INTERPRETED BY

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

Spleen

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.

IMAGING PERFORMED BY

Rodriguez

Liver/Gallbladder

HOSPITAL NAME

Foxfield Veterinary
Services

The liver was subjectively normal in size, structure, and contour. Overall normal parenchyma echogenicity exhibiting mild to moderate coarse echotexture was present. A concurrent thinly walled intraparenchymal cystic lesion was present in the deep mid liver measuring 2.4 cm in diameter. The cystic lesion was discernable from the gallbladder. Normal vascular volume. 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 with mild to moderate non-organized lumen sediment. Focal areas of gallbladder lumen mineral were present. The cystic and common bile ducts were normal.

REFERRING VET

Rodriguez

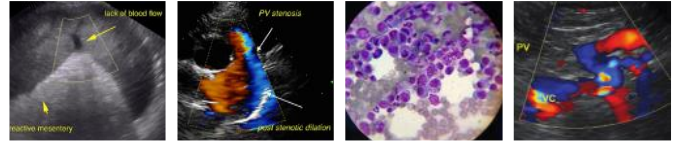
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14625ag

Gastrointestinal

DATE

08/15/2023



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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.

SPECIES

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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.

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

Pancreas

BREED

Pit Mix

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.

SEX

FS

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

AGE

7yr

ULTRASONOGRAPHIC FINDINGS

- Early to minor age related renal changes with left kidney cyst.
- Hepatic intraparenchymal cystic lesion-subjectively benign, not consistent with abscess criteria.
- Gallbladder sediment and mild non-obstructive mineral.
- Bilateral mild adrenomegaly- more prominent in the right adrenal gland.

WEIGHT

35lb

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(Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The bilateral adrenomegaly is nonspecific and of unclear clinical significance given hepatic presentation. Potential for benign adrenal hyperplasia or adenomatous change possible with emerging neoplastic adrenal criteria considered less likely yet cannot be definitively excluded. A screening BP is advised to assess for evidence of hypertension which may allude to emerging right adrenal neoplastic criteria i.e., pheochromocytoma. Sonographic monitoring of the bilateral adrenal glands for evidence of progressive enlargement would be ideal with initial recheck in 4-6 weeks.

IMAGING PERFORMED BY

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The gallbladder was not consistent with mucocele criteria in conjunction with no reported hepatic enzyme elevations. Hepatosupportive medications such as Denamarin and Ursodiol may be considered if evidence of cholestasis. A full urinary workup including UA, C/S and baseline UPC level if clinically indicated may be considered.

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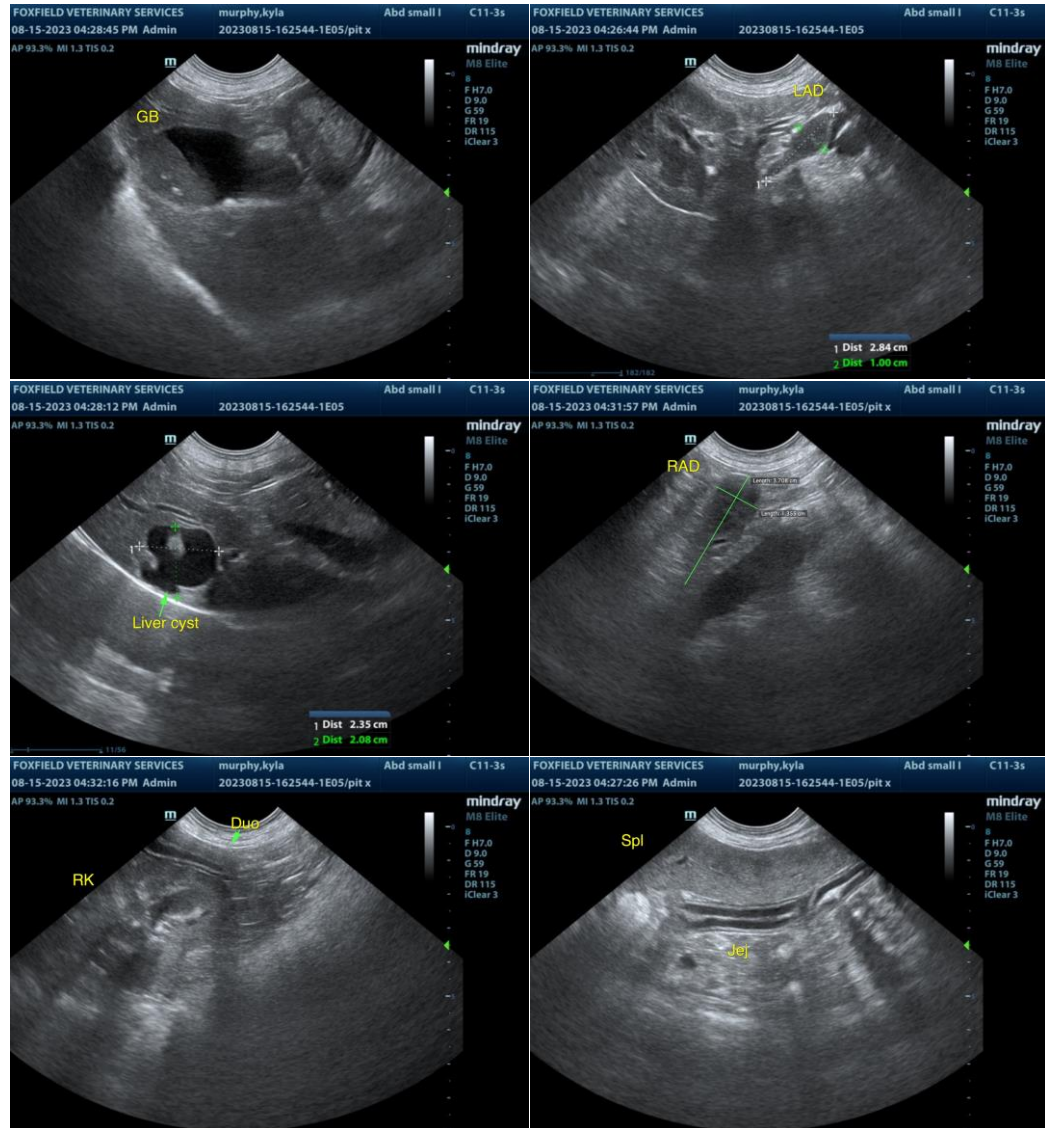
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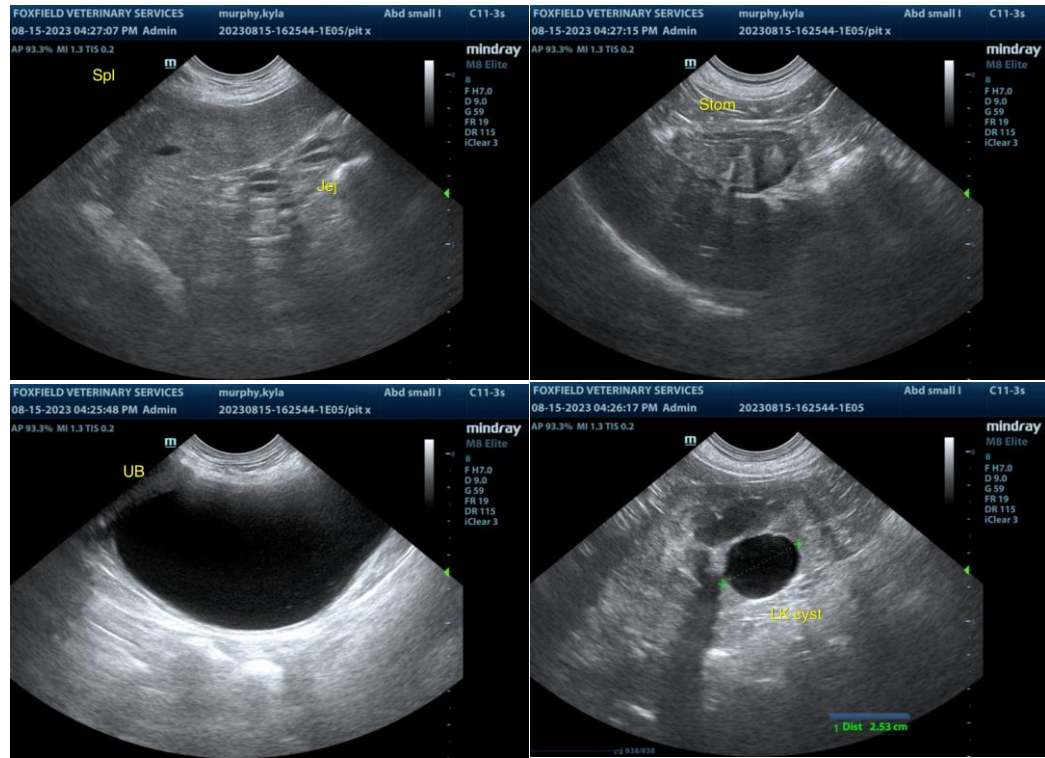
FS

AGE

7yr

WEIGHT

35lb



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.

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(Canine and Feline)

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.

IMAGING PERFORMED BY

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