



PATIENT PRESENTING CLINICAL SIGNS

Lina Kistler Lethargy, walking slow Baytril

HCT 19.6, WBC 32.1 with neutrophilia and monocytosis, ALP 1744, Globulin 7.8, BUN 44

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Jack Russell Terrier

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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 was noted.

SEX

FS

The area of the aortic trifurcation was free of pathology.

AGE

2010

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. A small caudal cortical cyst was present in the right kidney. The left kidney measured 4.2 cm in length. The right kidney measured 4.7 cm in length.

WEIGHT

17

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.9 cm length x 0.40 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 2.3 cm length x 0.45 cm width at the caudal pole.

INTERPRETED BY

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

Spleen

A large spherical mixed echogenic mass was present in the area of the cranial spleen measuring approximately 6.0-7.0 cm in diameter. A concurrent separate mildly expansive similar-appearing nodule was present in the caudal spleen measuring 2.0 cm in diameter. The splenic parenchyma not involved with either the mass or the nodule exhibited primarily homogeneous parenchyma and normal splenic vascularity.

IMAGING PERFORMED BY
 Rebekah Jakum, CVT
 ARDMS/RVT

HOSPITAL NAME

Blue Ridge VC

Liver/ Gallbladder

The liver exhibited normal to potential minor enlargement. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.

REFERRING VET

Dr. Filchner

INVOICE

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The gallbladder was non-distended in size. The gallbladder walls were mildly prominent to hyperechoic. Mild, primarily dependent mineral, along with anechoic content was present within the gallbladder. The cystic and common bile ducts were normal.

DATE

8/17/22



PATIENT *Gastrointestinal*

Lina Kistler 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 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.

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

BREED *Pancreas*

Jack Russell Terrier 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.

SEX *Free Abdomen*
 FS

AGE No evidence of omental lymphadenopathy, peritoneal effusion, or hemoabdomen was noted. No concurrent omental masses were present.

2010 Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

WEIGHT **ULTRASONOGRAPHIC FINDINGS**

17 *Primary Findings*

- Mixed echogenic splenic mass with concurrent similar-appearing separate mildly expansive splenic nodule
- Vacuolar hepatopathy pattern - subjectively benign
- Moderate gallbladder mineral / cholelithiasis, potential chronic cholecystitis

INTERPRETED BY

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 (Canine and Feline)

Secondary Findings

- Mild chronic renal changes with right kidney cortical cyst

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Blue Ridge VC

The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other). Neoplastic criteria is favored. No overt evidence of intraabdominal or cardiac metastasis was evident. However, potential for non-sonographically evident metastasis / micrometastasis cannot be definitively excluded.

REFERRING VET

Dr. Filchner

Assuming no evidence of pathology on three view chest radiographs, splenectomy with gross inspection of the liver and gallbladder +/- hepatic biopsies and/or cholecystectomy, if clinically indicated, could be considered. Empirical hepatosupportive medications may prove beneficial.

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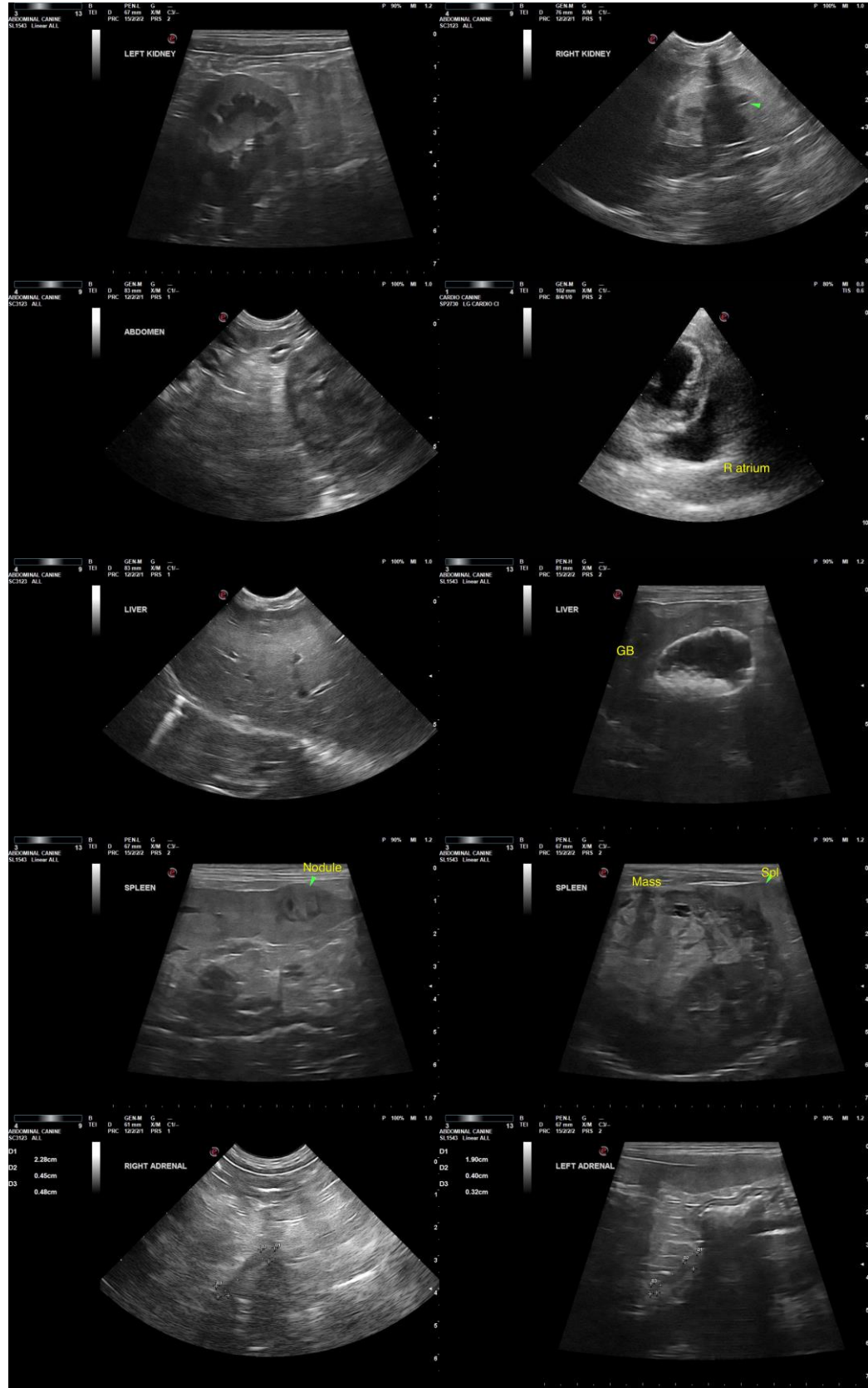
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PATIENT

Lina Kistler

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.

SPECIES

Canine

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.

BREED

Jack Russell Terrier

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