

**PATIENT**

Toby Samuelson

SPECIES

Canine

BREED

Lab Mix

SEX

MN

AGE

11.5 years

WEIGHT

55.9 lbs.

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP (Canine
and Feline)**IMAGING
PERFORMED BY**

Rachel Runnells, RVT

HOSPITAL NAME

SVS Imaging KC

REFERRING VET

Dr. Meerdink

INVOICE

14465

DATE

8/2/22

PRESENTING CLINICAL SIGNS

Owner thinks dog is in pain he is not himself. pain meds not helping. Quellin and Tramadol both gave him watery diarrhea. Exam findings and abnormal lab values: Splinting in the cranial abdomen, Bouts of abdominal pain for the past few weeks. Anemia, WBC changes, low platelets, Decreased sodium and potassium, and chloride, mild increases in BUN. On radiographs, appears to have a ground glass appearance in the Cranial Abdomen.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, and cystourethral junction 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.

The area of the residual prostate was free of overt pathology.

The area of the iliac trifurcation was free of pathology including no evidence of medial Iliac or sublumbar lymphadenopathy.

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. The left kidney measured 6.2 cm in length. The right kidney measured 6.3 cm in length.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.92 cm width in the cranial pole and 0.86 cm width in the caudal pole. The right adrenal gland measured 0.81 cm width in the caudal pole.

Spleen

Mildly expansive, nonhomogeneous mass was present in the subjective mid to caudal spleen measuring approximately 5.0-6.0 cm in diameter. The mass was potentially larger in size with associated distortion of the regional splenic capsule. The spleen not Involved with the mass exhibited maintained symmetrical contour and a finely textured homogeneous parenchyma. Normal splenic vascularity was noted. Regional mildly hyperechoic perisplenic omentum was present. Potential for adhesions is possible.

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. No overt evidence of hepatic masses or nodules was noted. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. Mild hyperechoic to progressively shadowing ingesta was present.

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

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.

Free Abdomen

Moderate volume peritoneal free fluid exhibiting mild echogenic changes, suggestive of mild cellularity, was present.

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

ULTRASONOGRAPHIC FINDINGS

- Splenic mass
- Mild hepatic parenchymal remodeling - subjectively benign
- Mild age-related kidneys
- Moderate volume peritoneal free fluid exhibiting mild echogenic changes - suspect hemoabdomen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, hematoma, granuloma, and splenitis, with neoplastic criteria (sarcoma, round cell neoplasia, other) favored. No overt evidence of major organ or cardiac metastasis. However, the potential for endosonographically evident metastasis or micrometastasis, in these cases, cannot be definitively excluded. Clotting status recommended.

Assuming no evidence of pathology on three view chest radiographs and normal clotting status, laparotomy with expectation towards splenectomy, gross inspection of the liver, and perisplenic omentum could be considered. Guarded prognosis pending splenic histopathology.



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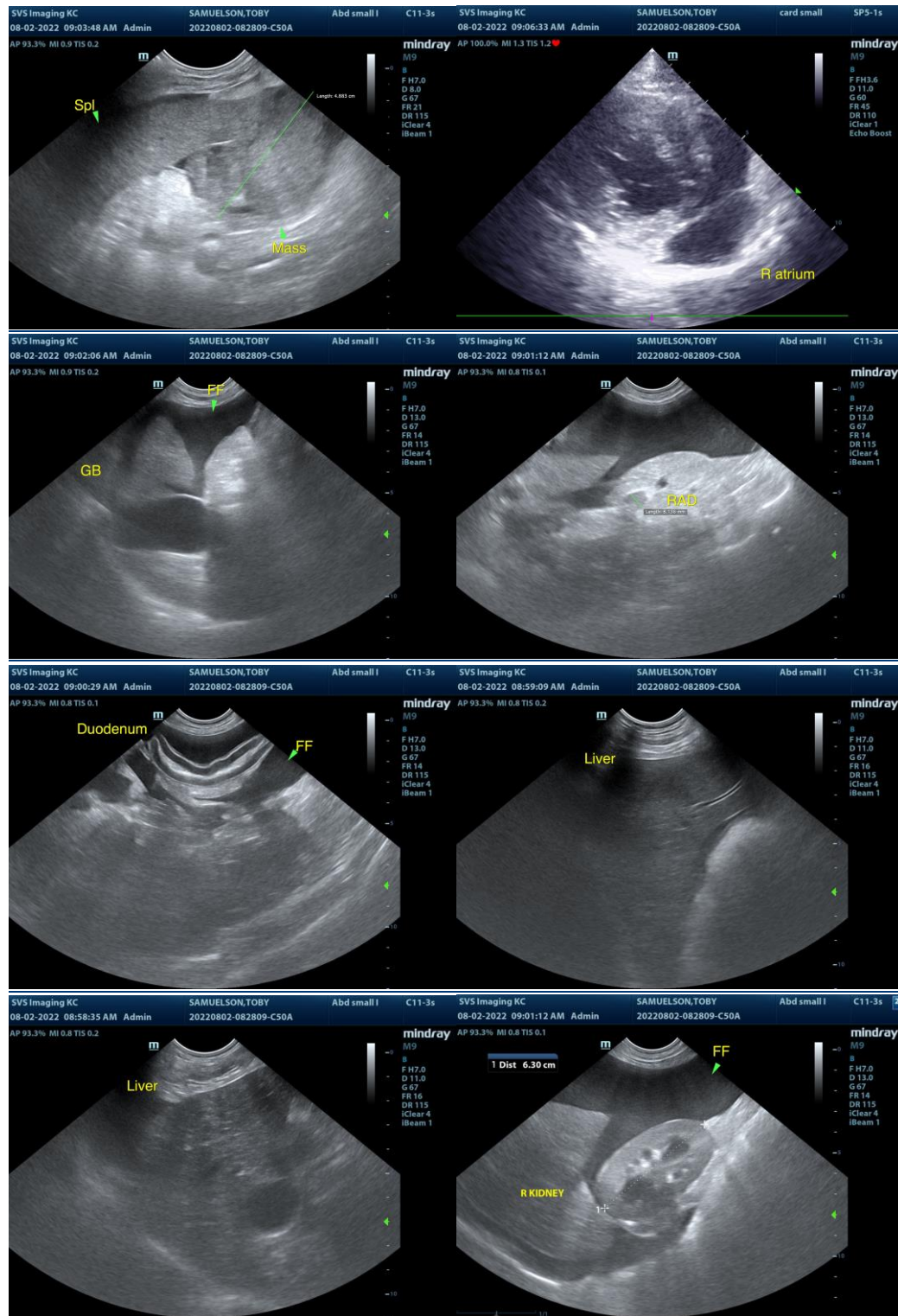
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Clinical Sonography & Telectology

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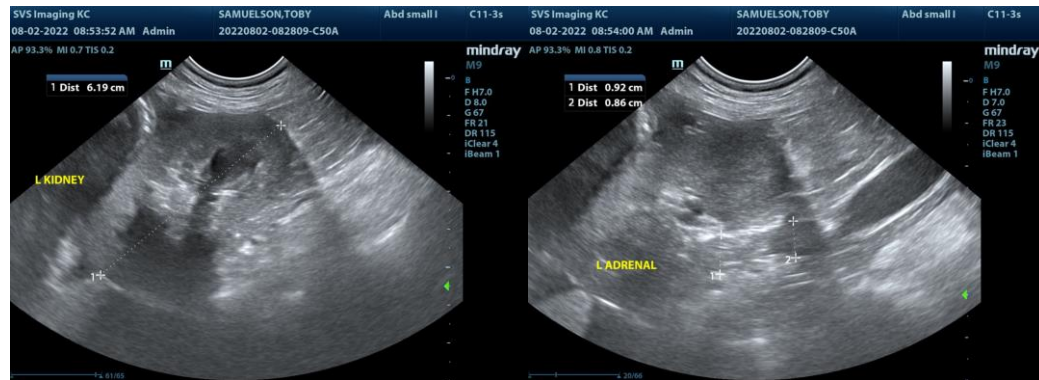
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@SonoPath.com