



PATIENT PRESENTING CLINICAL SIGNS

JD Horoski 5# weight loss in 2 months, PD, pytalism, vomiting/regurgitation, decreased appetite

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN AND LIMITED HEART

SPECIES

Canine

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.

BREED

Lab Mix

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 6.1 cm in length. The right kidney measured 5.2 cm in length.

SEX

MN

The area of the aortic trifurcation was free of pathology.

AGE

2012

The residual prostate was free of pathology.

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

WEIGHT

49

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.60 cm width at the caudal pole and 2.6 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 0.58 cm width at the caudal pole and 2.4 cm width at the cranial pole.

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

Rebekah Jakum, CVT
ARDMS/RVT

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.

HOSPITAL NAME

Alburtis Animal
Hospital

REFERRING VET

Dr. Smith

Gastrointestinal

INVOICE

11456ag

The stomach presented intact wall layering with a normal wall layer ratio. Mild to moderate gas distention was present potentially indicative of aerophagia. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

DATE

08/22/2022

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.

JD Horoski **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.

SPECIES

Canine

Free Abdomen

BREED

No overt lymphadenopathy or peritoneal effusion was present.

Lab Mix

Cardiac

SEX

Overtly normal cardiac structure and function. A moderately sized hypoechoic mass present in the cranial thorax measuring ~ 5.0 cm in diameter. Potential for focal reverberation artefact associated with the lesion which may indicate adjacent lung or potential air entrapment was observed. No evidence of plural effusion.

MN

AGE

ULTRASONOGRAPHIC FINDINGS

2012

- Sonographically unremarkable abdomen
- Overtly normal cardiac structure and function
- Cranial thoracic/mediastinal mass

WEIGHT

49

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

The primary finding in this study is the hypoechoic cranial thorax/mediastinum mass. Potential for primary pulmonary pathology cannot be excluded. Assuming normal clotting status and using a 25g needle a thoracic mass FNA is recommended for screening cytology. Thoracic CT may be required for further assessment and diagnosis.

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

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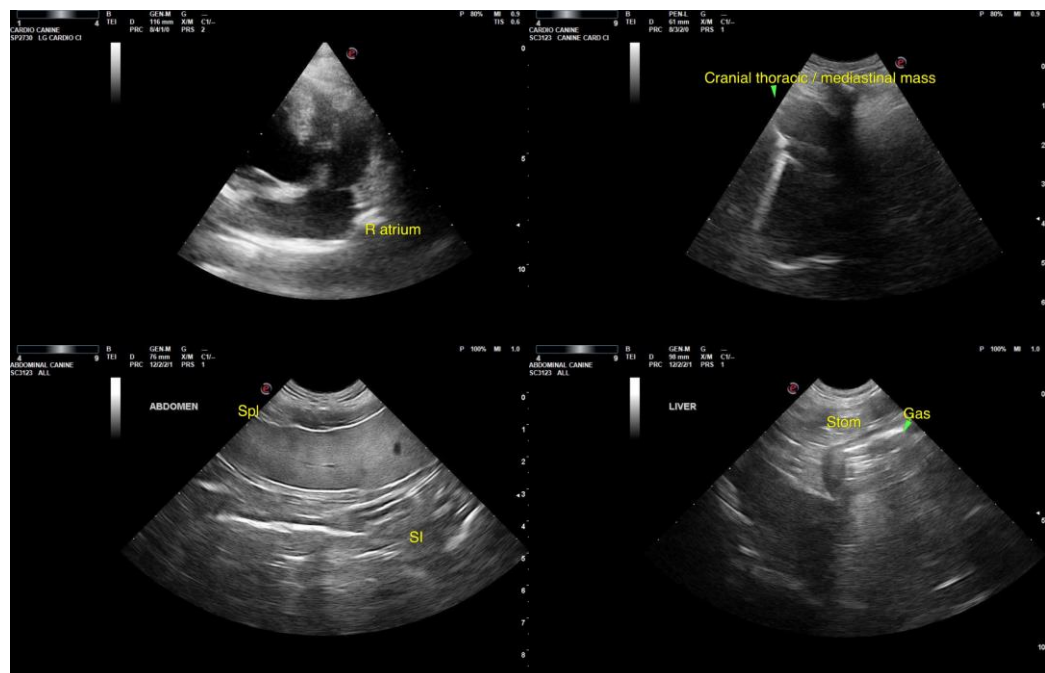
Dr. Smith

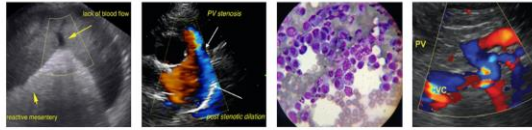
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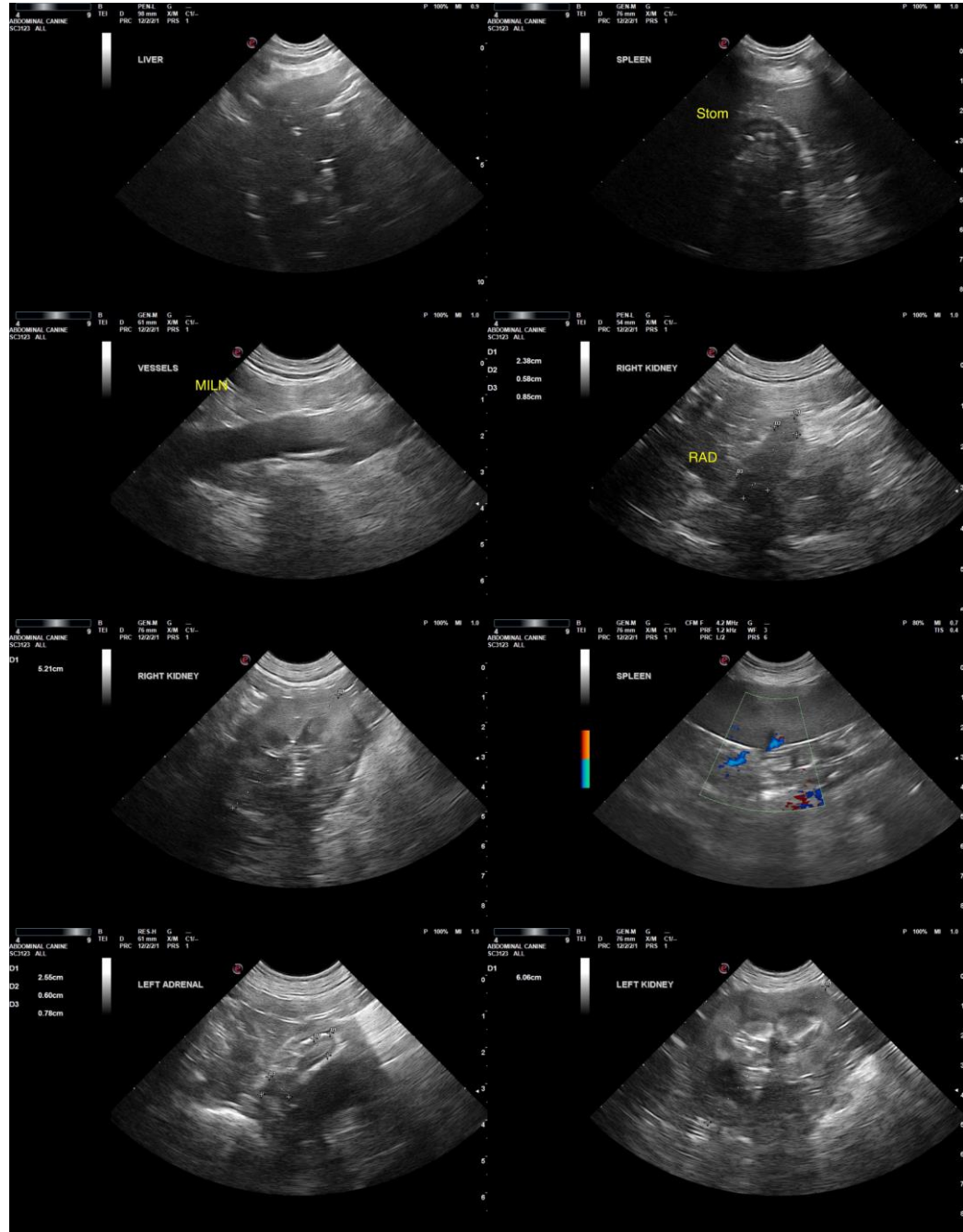
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
mac.daniel@sonopath.com



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