

**PATIENT**

Lilly Campbell-Nelson

SPECIES

Canine

BREED

Golden

SEX

SF

AGE

12 years

WEIGHT

74 lbs.

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

Sarah Pender, CVT

HOSPITAL NAME

SVS Imaging QC

REFERRING VET

Bock-Vanaria

INVOICE

14489

DATE

8/3/22

PRESENTING CLINICAL SIGNS

P was referred by other veterinarian for abnormal abdominal palpation. X-rays were suspicious for mass effect with displacement of the colon and intestines.

Abnormal PE/Chem/CBC/UA Results: Abdomen is pendulous on exam, soft, nonpainful, unable to palpate a mass

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Mild asymmetrical luminal surface to micropolyloid changes were present likely associated with age-related mural changes. Anechoic urine was present in the lumen with no calculi or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

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

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 exhibited a solitary cortical cyst. The right kidney exhibited a focal area of nonobstructive medullary mineral. The left kidney measured 6.1 cm in length. The right kidney measured 7.2 cm in length.

Adrenal Glands

Bilateral symmetrical adrenal gland mild prominent size with uniformly hypoechoic parenchyma was present. The left adrenal gland measured 3.0 cm length x 0.70 cm width at the caudal pole. The right adrenal gland measured 3.6 cm length x 0.88 cm width at the caudal pole.

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, hyperechoic nodules were present throughout the medial parenchyma and adjacent to the medial capsule. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas. No splenic masses were noted.

Liver/ Gallbladder

The liver exhibited subjective enlargement with maintained symmetrical capsule contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Intermittent, nondisruptive, discrete hypoechoic intraparenchymal nodules were present with an example measuring 3.6 cm in diameter. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was mildly distended in size containing anechoic content primarily with mild

**PATIENT**

Lilly Campbell-Nelson

nondependent mildly hyperechoic debris. Subtle dilation of the cystic biliary duct was noted. The common bile duct was normal. No evidence of post hepatic obstructive criteria was noted.

Gastrointestinal**SPECIES**

Canine

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate ingesta / chyme most consistent with post prandial presentation without signs of ileus, obstruction or foreign material. The stomach was otherwise normal. No evidence of obstructive pyloric mural pathology was noted.

BREED

Golden

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.

SEX

SF

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

Pancreas**AGE**

12 years

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia. This is likely consistent with age-related pancreatic changes and considered incidental.

Free Abdomen**WEIGHT**

74 lbs.

No omental masses or peritoneal effusion were noted. A solitary, mid to cranial abdominal mesenteric lymph node was present adjacent to the cranial right kidney measuring 3.3 cm x 1.1 cm. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

INTERPRETED BY

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

IMAGING PERFORMED BY

Sarah Pender, CVT

HOSPITAL NAME

SVS Imaging QC

REFERRING VET

Bock-Vanaria

ULTRASONOGRAPHIC FINDINGS

- Mild hepatomegaly exhibiting parenchymal remodeling with intermittent discrete hypoechoic intraparenchymal nodules
- Mild gallbladder debris (non-mucocele)
- Mild chronic renal changes
- Benign splenic nodules - consistent with probable benign myelolipomas or areas of medial capsule fibrosis
- Subjective mildly prominent bilateral adrenal glands - nonspecific
- Solitary nonspecific yet subjectively benign mesenteric lymph node

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of intraabdominal masses was noted.

INVOICE

14489

The liver presentation may indicate vacuolar hepatopathy with intermittent discrete areas of hyperplasia or hematopoiesis. Potential for hepatic neoplastic criteria cannot be excluded yet is considered less likely. Correlation with hepatic enzymes is recommended.

DATE

8/3/22

IMAGING PERFORMED BY

svsmobileimaging.com 309-737-3070



PATIENT

Lilly Campbell-Nelson

Assuming normal clotting status and using a 25-gauge needle, screening hepatic cytology for further assessment could be considered. Hepatosupportive medications are recommended if hepatic enzyme elevations or evidence of cholestasis.

SPECIES

Canine

The subjective prominent bilateral adrenal glands may indicate a normal patient variant without evidence of adrenal neoplastic criteria. Adrenal workup could be considered if clinical signs consistent with adrenal hyperfunction i.e., PU/PD, Polyphagia, etc., are present.

BREED

Golden

SEX

SF

AGE

12 years

WEIGHT

74 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Sarah Pender, CVT

HOSPITAL NAME

SVS Imaging QC

REFERRING VET

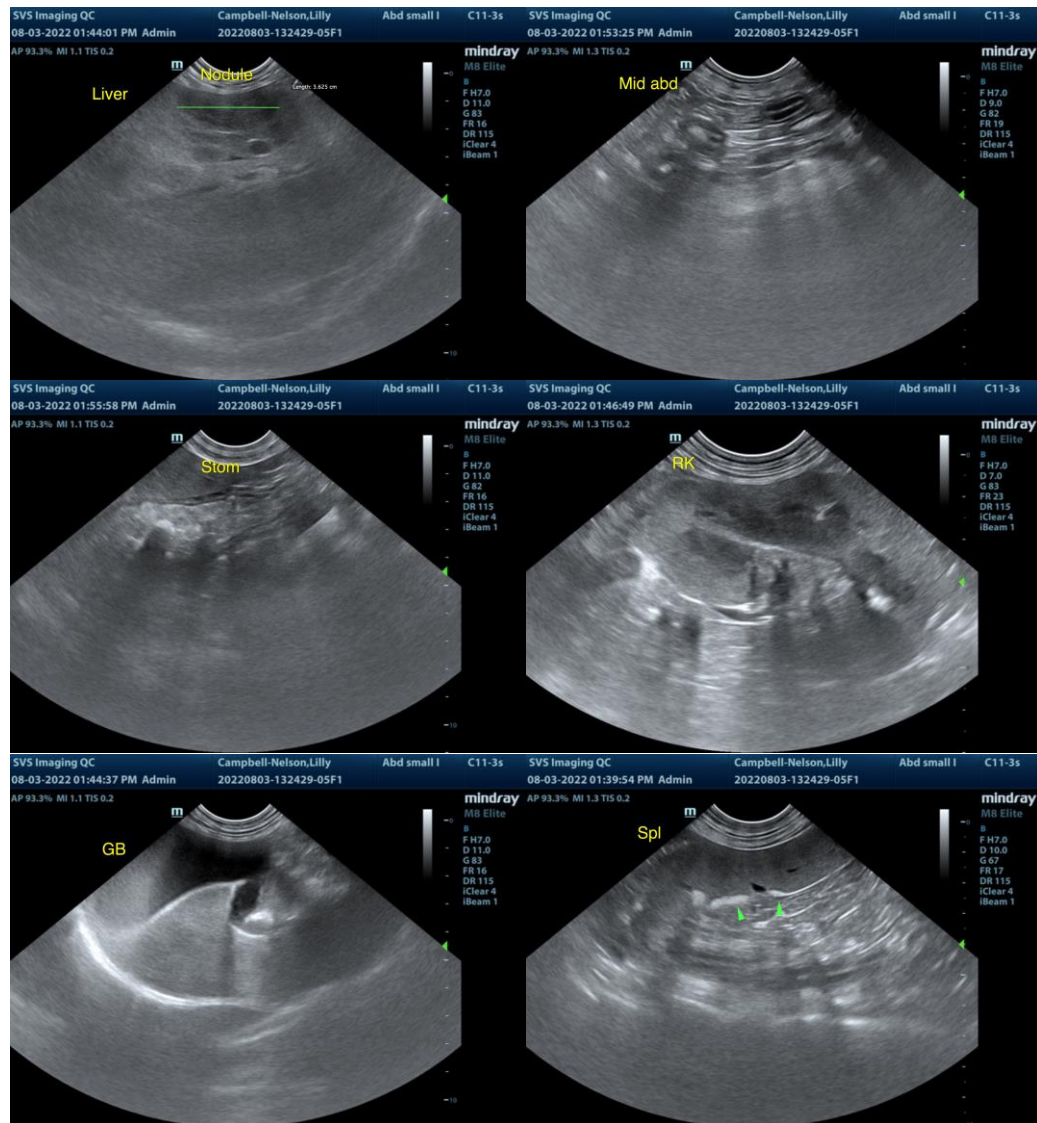
Bock-Vanaria

INVOICE

14489

DATE

8/3/22





PATIENT

Lilly Campbell-Nelson

SPECIES

Canine

BREED

Golden

SEX

SF

AGE

12 years

WEIGHT

74 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Sarah Pender, CVT

HOSPITAL NAME

SVS Imaging QC

REFERRING VET

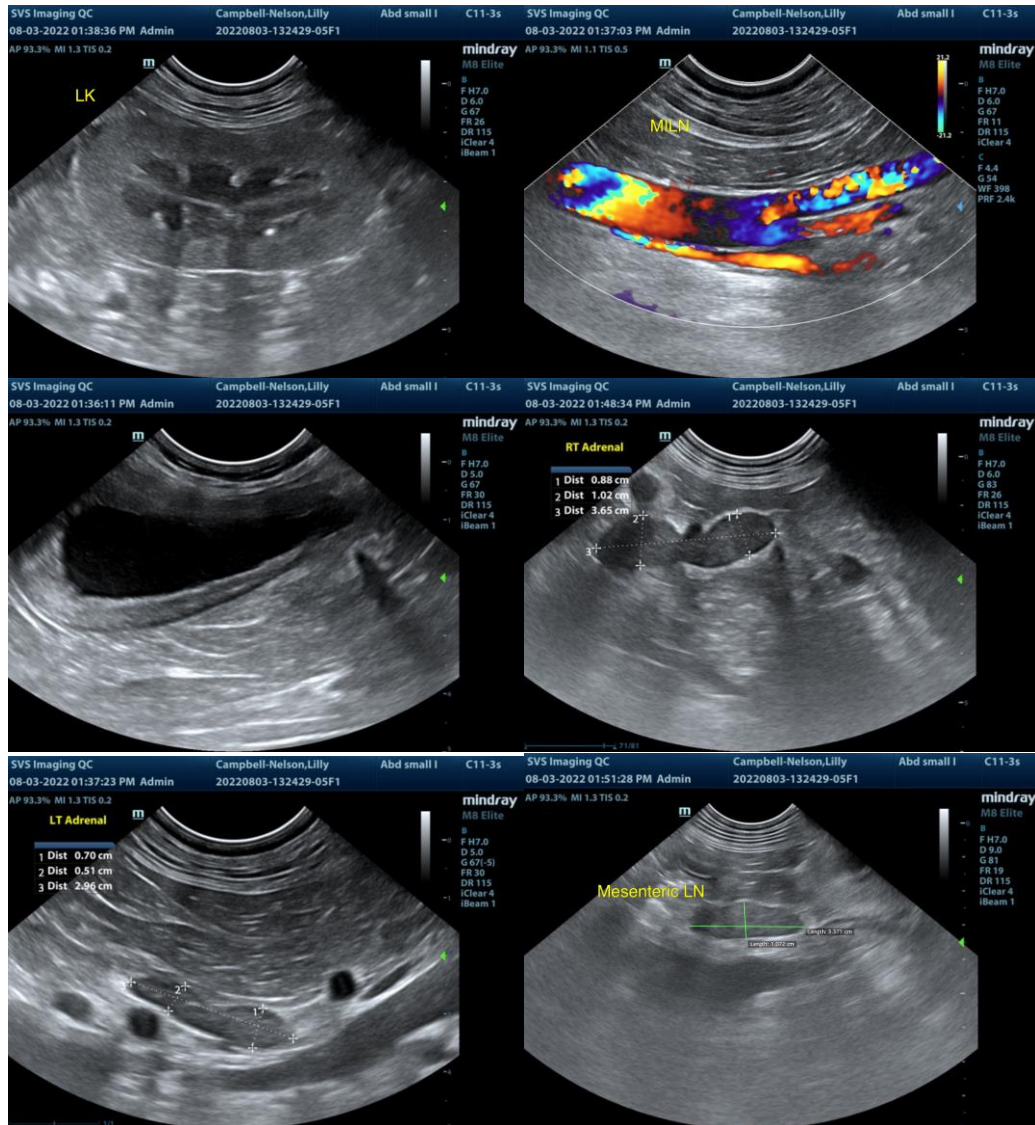
Bock-Vanaria

INVOICE

14489

DATE

8/3/22



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