



**PATIENT**

Melody Bexte

**SPECIES**

Canine

**BREED**

Standard Poodle

**SEX**

F/S

**AGE**

10

**WEIGHT**

16 kg

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Belan

**HOSPITAL NAME**

Healing Traditions  
VC

**REFERRING VET**

Dr. Gerrow

**INVOICE**

14802

**DATE**

8/3/23

**PRESENTING CLINICAL SIGNS**

Chronic history of intermittent diarrhea weight loss -ADR, Treated with metronidazole and had a temporary improvement. Symptoms have returned

Abnormal PE/Chem/CBC/UA Results: Severe neutrophilia in March now moderate neutrophilia July 22  
Chemistry normal

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, and cystourethral junction 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.

No evidence of pathology in the area of the aortic trifurcation.

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 5.6 cm in length. The right kidney measured 5.5 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.47 cm width at the caudal pole and 0.37 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 0.48 cm width at the caudal pole and 0.36 cm width at the cranial pole.

**Spleen**

The spleen exhibited generalized enlargement primarily owing to at least two moderately sized to expansive, nonhomogeneous, hypoechoic masses with an example of a mass measuring 7.0-8.0 cm in diameter. Concurrent non-disruptive, hypoechoic intermittent splenic nodules were present, which were separate from the splenic masses. An example of a splenic nodule measured 0.85 cm in diameter.

**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 parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. There were no overtly visualized hepatic intraparenchymal masses or nodules. The gallbladder was non-distended in size containing primarily anechoic content with mild gallbladder sediment. The cystic and common bile ducts were normal.

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained echogenic, nonshadowing ingesta without signs of obstruction or foreign material.



<b>PATIENT</b>	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.
Melody Bexte	
<b>SPECIES</b>	Normal visible colon wall layers were present with semi-formed to soft fecal matter.
Canine	<b>Pancreas</b>
<b>BREED</b>	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
Standard Poodle	<b>Free Abdomen</b>
<b>SEX</b>	No overt lymphadenopathy was present. An intermittent, scant pocket of peritoneal free fluid was present with regional mildly hyperechoic peri splenic omentum. Potential for omental adhesions to the spleen is possible although not definitive.
F/S	
<b>AGE</b>	Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.
10	
<b>WEIGHT</b>	<b>ULTRASONOGRAPHIC FINDINGS</b>
16 kg	<ul style="list-style-type: none"> <li>• Enlarged to expansive, nonhomogeneous, hypoechoic splenic masses and concurrent nondisruptive splenic nodules</li> <li>• Mild hepatic parenchymal remodeling - overtly benign</li> <li>• Mild gallbladder sediment (non mucocele)</li> <li>• Mild heterogeneous remodeled pancreas - patient / age-related variant or remodeling, potential for low-grade chronic pancreatitis</li> <li>• Structurally unremarkable gastrointestinal tract with mild gastric ingesta - ingesta sonographically suggestive of food</li> </ul>
<b>INTERPRETED BY</b>	<b>INTERPRETATION OF THE FINDINGS &amp; FURTHER RECOMMENDATIONS</b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Although splenic sampling or histopathology is required for further assessment, the splenic masses and concurrent nodules are sonographically suggestive of neoplastic criteria such as sarcoma, round cell neoplasia, or other. Benign etiologies i.e., hyperplasia, hematopoiesis, etc., are possible yet thought less likely. There is no overt sonographic evidence of definitive intrabdominal or cardiac metastasis.
<b>IMAGING PERFORMED BY</b>	
Dr. Belan	
<b>HOSPITAL NAME</b>	
Healing Traditions VC	
<b>REFERRING VET</b>	
Dr. Gerrow	Given the chronic gastrointestinal signs without evidence of gastrointestinal pathology, a GI panel to include PLI/TLI/Cobalamin/Folate and screening resting cortisol level are warranted. Assuming no evidence of pathology on three-view chest radiographs, splenectomy with gross inspection of the liver and gastrointestinal biopsies is warranted. A guarded to possible very guarded long-term prognosis is indicated, pending splenic histopathology.
<b>INVOICE</b>	
14802	
<b>DATE</b>	
8/3/23	



**PATIENT**

Melody Bexte

**SPECIES**

Canine

**BREED**

Standard Poodle

**SEX**

F/S

**AGE**

10

**WEIGHT**

16 kg

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Belan

**HOSPITAL NAME**

Healing Traditions  
VC

**REFERRING VET**

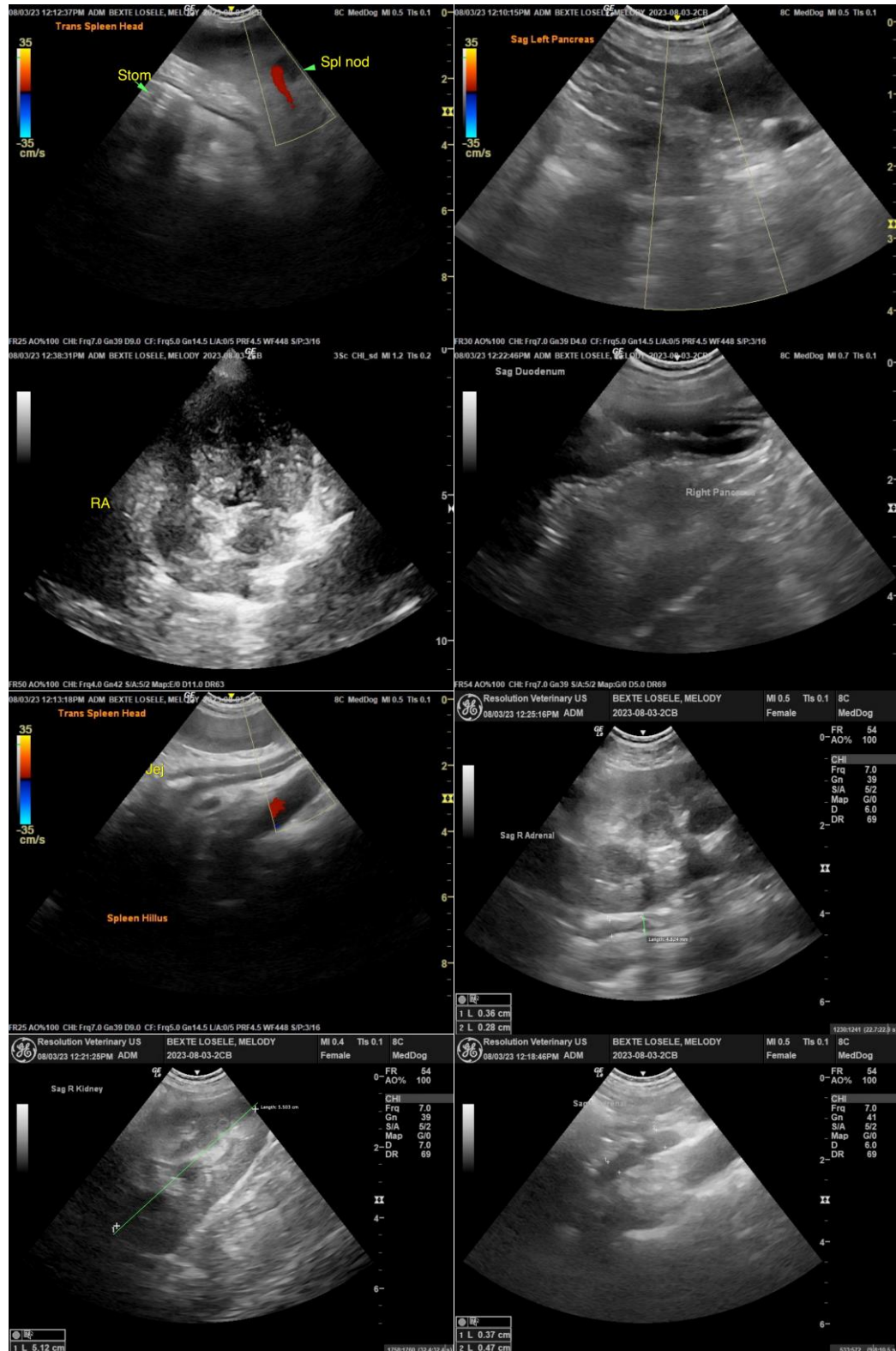
Dr. Gerrow

**INVOICE**

14802

**DATE**

8/3/23





## PATIENT

Melody Bexte

## SPECIES

Canine

## BREED

Standard Poodle

## SEX

F/S

## AGE

10

## WEIGHT

16 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Belan

## HOSPITAL NAME

Healing Traditions  
VC

## REFERRING VET

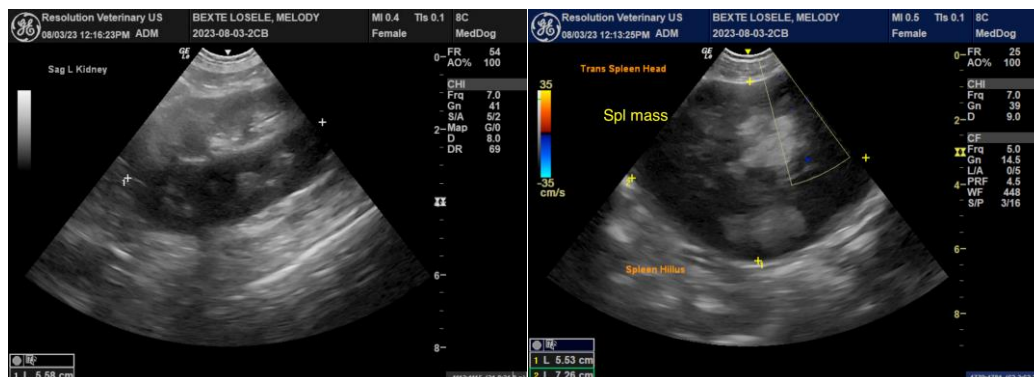
Dr. Gerrow

## INVOICE

14802

## DATE

8/3/23



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](mailto:info@sonopath.com)