



PATIENT

Sherman Lloyd

PRESENTING CLINICAL SIGNS

History: Presented for aural hematoma and is pure IC. AFAST saw suspect splenic mass

Abnormal PE/Chem/CBC/UA Results: Mild elevation of liver enzymes

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

PitBull

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

SEX

MN

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 6.5 cm in length.

AGE

5

The area of the aortic trifurcation was free of pathology.

WEIGHT

30kg

The residual prostate exhibited mild prominent size measuring 1.7 cm in diameter. This is suspected to indicate normal patient variant.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.57 cm width at the caudal pole and 0.58 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 0.60 cm width at the caudal pole and 0.65 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

Dr. Belan

Liver

The liver was enlarged in size with areas of capsule asymmetry and regional nonhomogeneous to irregular parenchyma subjectively involving the mid to left liver with intermittent spherical hyperechoic nodules in the right lateral and caudate liver. The area of atypical parenchyma measured approximately 8 cm in diameter.

HOSPITAL NAME

McKnight Animal
Hospital

REFERRING VET

Dr. Gray

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with mild to moderate congealed hyperechoic luminal debris extending into the cystic biliary duct. The cystic and common bile ducts were normal.

INVOICE

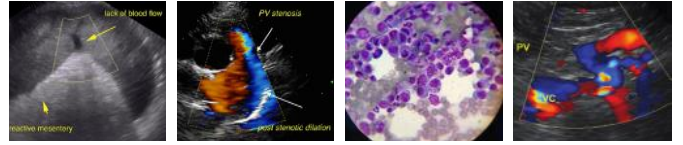
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Gastrointestinal

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.

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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.

SPECIES

Canine

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.

BREED

PitBull

Free Abdomen

No peritoneal effusion was present.

SEX

MN

Focal, mildly prominent to enlarged mesenteric nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example measured 1.6 cm x 0.6 cm.

AGE

5

ULTRASONOGRAPHIC FINDINGS

- Regional nodular to irregular hepatic parenchyma
- Mild to moderate gallbladder debris (non-mucocele)
- Intermittent nonspecific prominent mesenteric lymph nodes-subjectively benign/reactive

WEIGHT

30kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The regional hepatic changes are non-specific. Assuming normal clotting status FNA of the atypical hepatic parenchyma is recommended for cytology. Potential core surgical biopsy is likely required for definitive diagnosis and potential guidance of therapy. Hepatosupportive medications including Denamarin and Ursodiol are recommended. Three view chest radiographs suggested if not done to assess for thoracic pathology.

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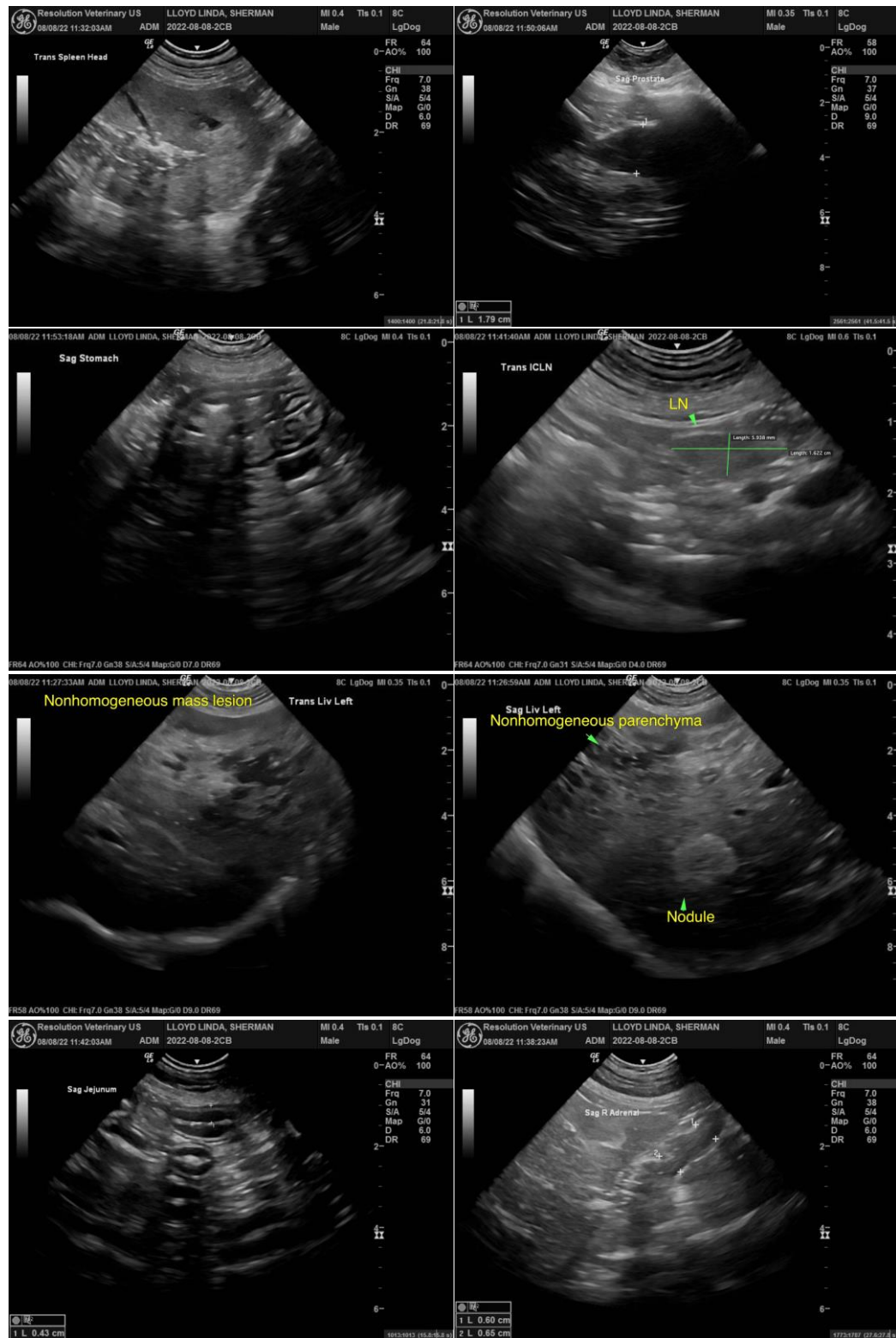
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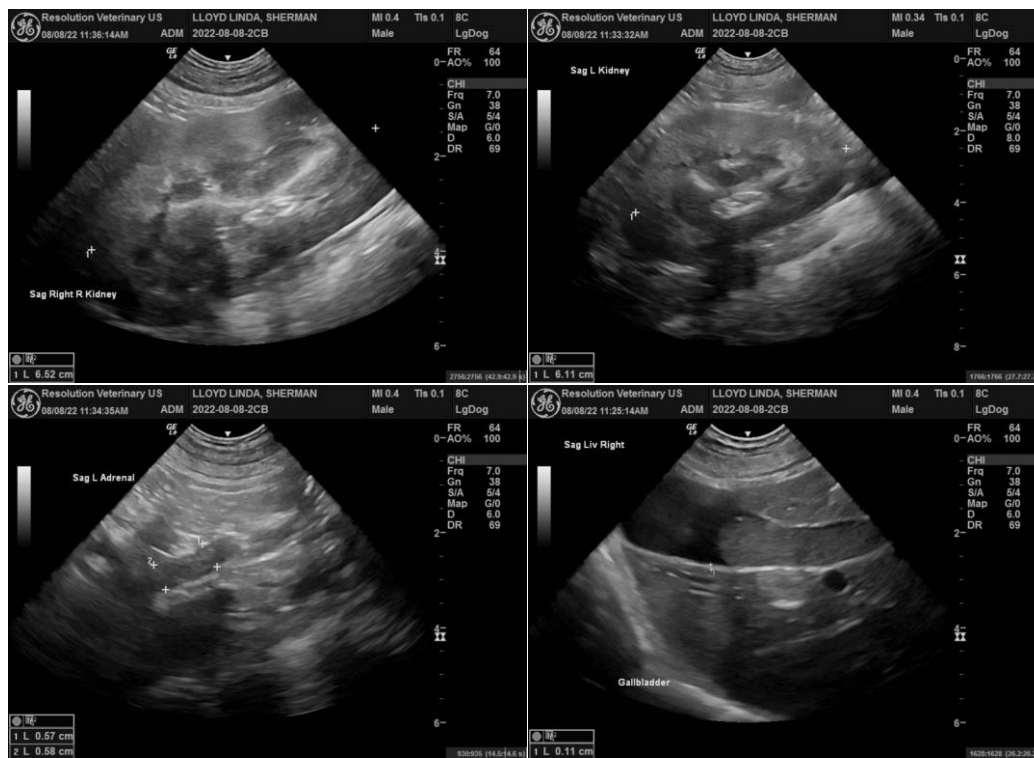
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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