



PATIENT PRESENTING CLINICAL SIGNS

Daisy Mormo History: Obese, vomiting for several weeks
 Medication: Proin, Cerenia, Pepcid

SPECIES
 Canine Unremarkable CBC and Chemistry Panel

BREED **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Urinary System

GSD Mix The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. The potential for mild decreased proximal urethra tone, consistent with incontinence, was present. 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.

SEX
 FS

The area of the aortic trifurcation was free of pathology.

AGE
 6 years

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 7.1 cm in length. The right kidney measured 7.8 cm in length.

WEIGHT
 93 #

Adrenal Glands

INTERPRETED BY

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

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

The right adrenal gland was enlarged with asymmetrical contour including mild protuberance in the area of the phrenicoabdominal vein. The right adrenal gland exhibited nonhomogeneous parenchyma without overt evidence of mineralization. The right adrenal gland measured 4.0 cm length x 1.7 cm width at the caudal pole and 2.6 cm width at the cranial pole.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

Spleen

HOSPITAL NAME

Pocono Peak VC

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. A solitary, nonspecific, subtly hypoechoic cranial splenic nodule was present, measuring 0.65 cm in diameter. 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.

REFERRING VET

Dr. Coyle

Liver/ Gallbladder

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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 minor echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

DATE

9.10.2021



PATIENT

Gastrointestinal

Daisy Mormo

The stomach exhibited intact yet subjective mild prominent wall layering. The lumen of the stomach was empty without evidence of retained ingesta, fluid, or foreign material. The gastric body wall width measured up to 0.69 cm.

SPECIES

Canine

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.

BREED

GSD Mix

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

SEX

FS

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.

AGE

6 years

Free Abdomen

A subjective increased amount of omental fat was present.

WEIGHT

93 #

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Enlarged right adrenal gland with possible early phrenicoabdominal vein invasion
- Probable mild gastritis
- Solitary, nonspecific, non-expansive cranial splenic nodule

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Secondary Findings

- Mild gallbladder debris - incidental

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The solitary splenic nodule is nonspecific with considerations including suspected focal lymphoid hyperplasia, hematopoiesis, or granuloma. The possibility of early primary vs. metastatic splenic neoplasia cannot be definitively excluded, yet is considered less likely given the solitary, non-expansive appearance of the nodule.

HOSPITAL NAME

Pocono Peak VC

Potential considerations for the enlarged right adrenal gland may include; functional vs. nonfunctional adenomatous change, hyperplasia, with concern for early neoplasia such as pheochromocytoma, adenocarcinoma, or other. The potential for early phrenicoabdominal vein invasion is not definitive, yet suspicious with potential for nonvascular invasion and focal noninvasive parenchymal expansion.

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Monitoring of systemic blood pressure, urine catecholamine levels, and further assessment and possible surgical planning with CT may be considered. Sonographic monitoring of the right adrenal gland and cranial splenic nodule with initial recheck in 4 weeks would be a more conservative approach. Continued as-needed gastrointestinal support is indicated.

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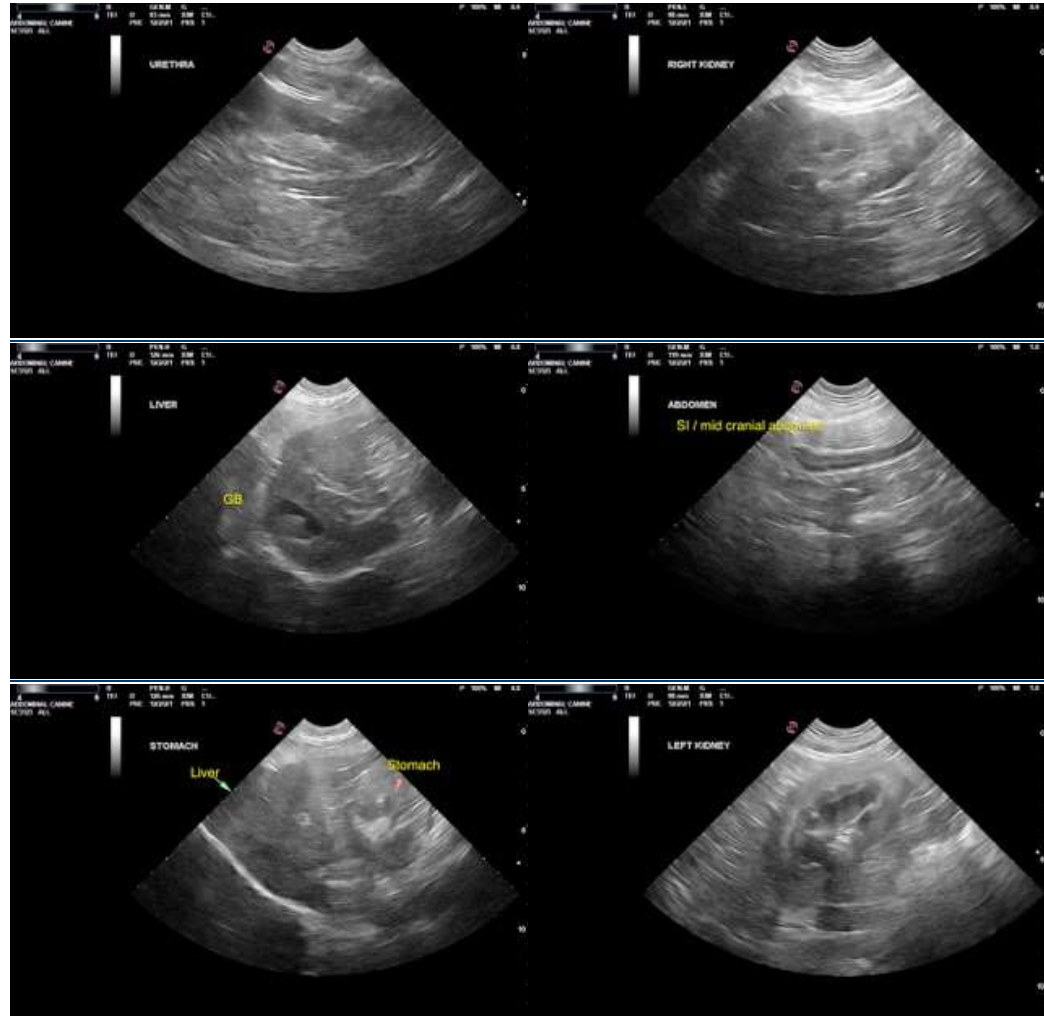
Dr. Coyle

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PATIENT

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SPECIES

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BREED

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SEX

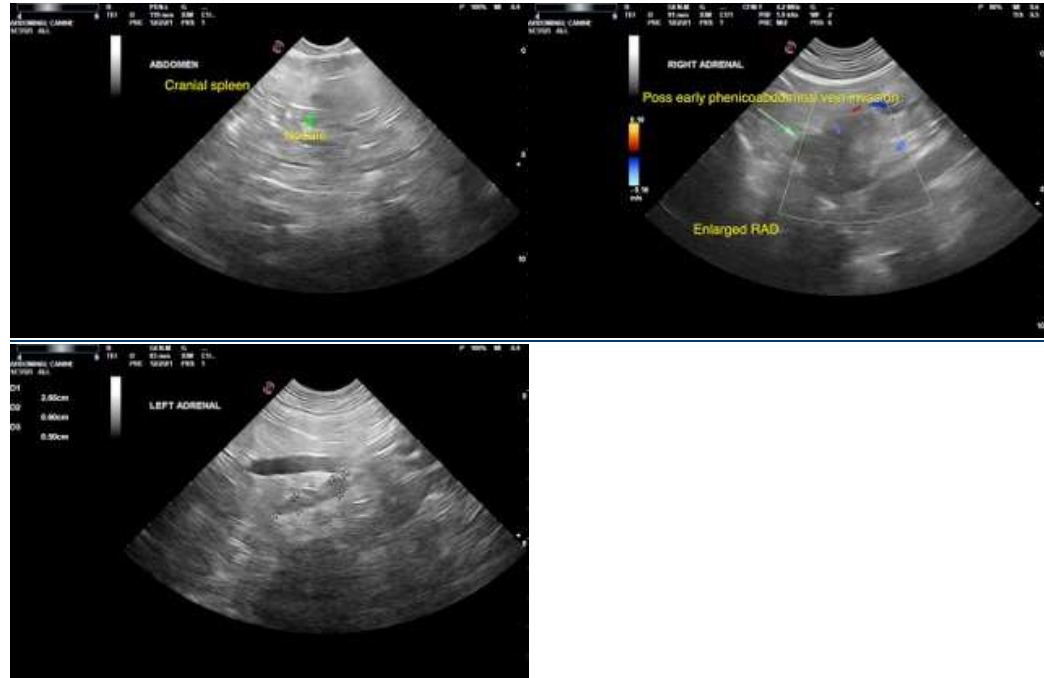
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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