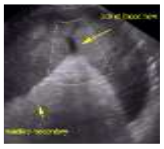
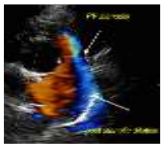
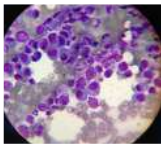
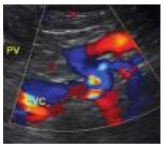
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jackson Canny

SPECIES

Canine

BREED

Corgi

SEX

Intact Male

AGE

2 years

WEIGHT

30 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Trae Cutchin

HOSPITAL NAME

Friendship Springs VC

REFERRING VET

Dr. Trae Cutchin

INVOICE

12251

DATE

9/17/21

PRESENTING CLINICAL SIGNS

Patient has had an ongoing lameness left forelimb for about 8 weeks. Diagnosis has been uncertain. The lameness is intermittent, mild, weight bearing, and difficult to localize. Radiographs of the elbow, shoulder, and cervical spine are unrevealing. Referral for ortho/neuro consultation had been recommended, but the owner has not wanted to do this yet. Today, pt was reported as wnl this morning until shortly after breakfast when he became acutely lethargic and uninterested in his lunch (normally he is fed several small meals several times a day).
Abnormal PE/Chem/CBC/UA Results: On examination today at presentation he exhibited mild to moderate mucosal pallor (still pink but tending towards white) and a mass was detected in the mid-abdomen. Radiographs suggested the mass is probably splenic. Hematocrit is 36%, blood pressure was normal. Other labs are pending. Pt has been started on yunnan baiyoo.

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.

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured 3.2 cm x 2.8 cm.

The area of the aortic trifurcation was free of pathology.

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 4.9 cm in length. The right kidney measured 4.9 cm in length.

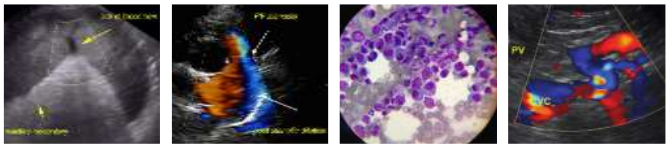
Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.29 cm width at the caudal pole and 0.33 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 0.54 cm width at the caudal pole and 0.52 cm width at the cranial pole.

Spleen

A mass subjectively in the mid to cranial spleen with secondary capsule expansion and disruption was present and measured approximately 6.0 cm in diameter. The parenchyma of the mass was heterogeneous to mixed echogenic without areas of cavitation. The mid to caudal spleen was sonographically unremarkable. Mid-regional perisplenic reactive mesentery was present. The potential

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jackson Canny

SPECIES

Canine

BREED

Corgi

SEX

Intact Male

AGE

2 years

WEIGHT

30 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Trae Cutchin

HOSPITAL NAME

Friendship Springs VC

REFERRING VET

Dr. Trae Cutchin

INVOICE

12251

DATE

9/17/21

for associated perisplenic free fluid vs. hypoechoic areas of the mass were noted. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

Liver/ Gallbladder

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.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild, echogenic, nonshadowing ingesta. This is likely consistent with recent meal ingestion. Some degree of possible gastric hypomotility may be possible if documented NPO.

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.

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.

Free Abdomen

Definitive mild effusion was noted in the lateral to caudal abdomen. No overt lymphadenopathy was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Splenic mass with regional mild perisplenic reactive mesentery
- Perisplenic to peritoneal effusion - suspect associated hemoabdomen
- Mild prostatomegaly

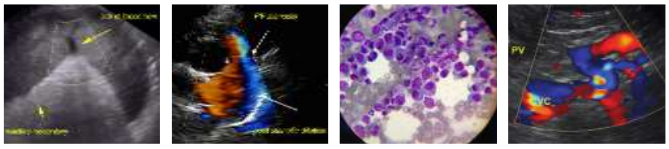
Secondary Findings

-

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other). No overt evidence of intraabdominal metastasis If a splenic neoplastic process is present, yet potential for non-visualized or micrometastasis cannot be definitively excluded.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jackson Canny

SPECIES

Canine

BREED

Corgi

SEX

Intact Male

AGE

2 years

WEIGHT

30 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Trae Cutchin

HOSPITAL NAME

Friendship Springs VC

REFERRING VET

Dr. Trae Cutchin

INVOICE

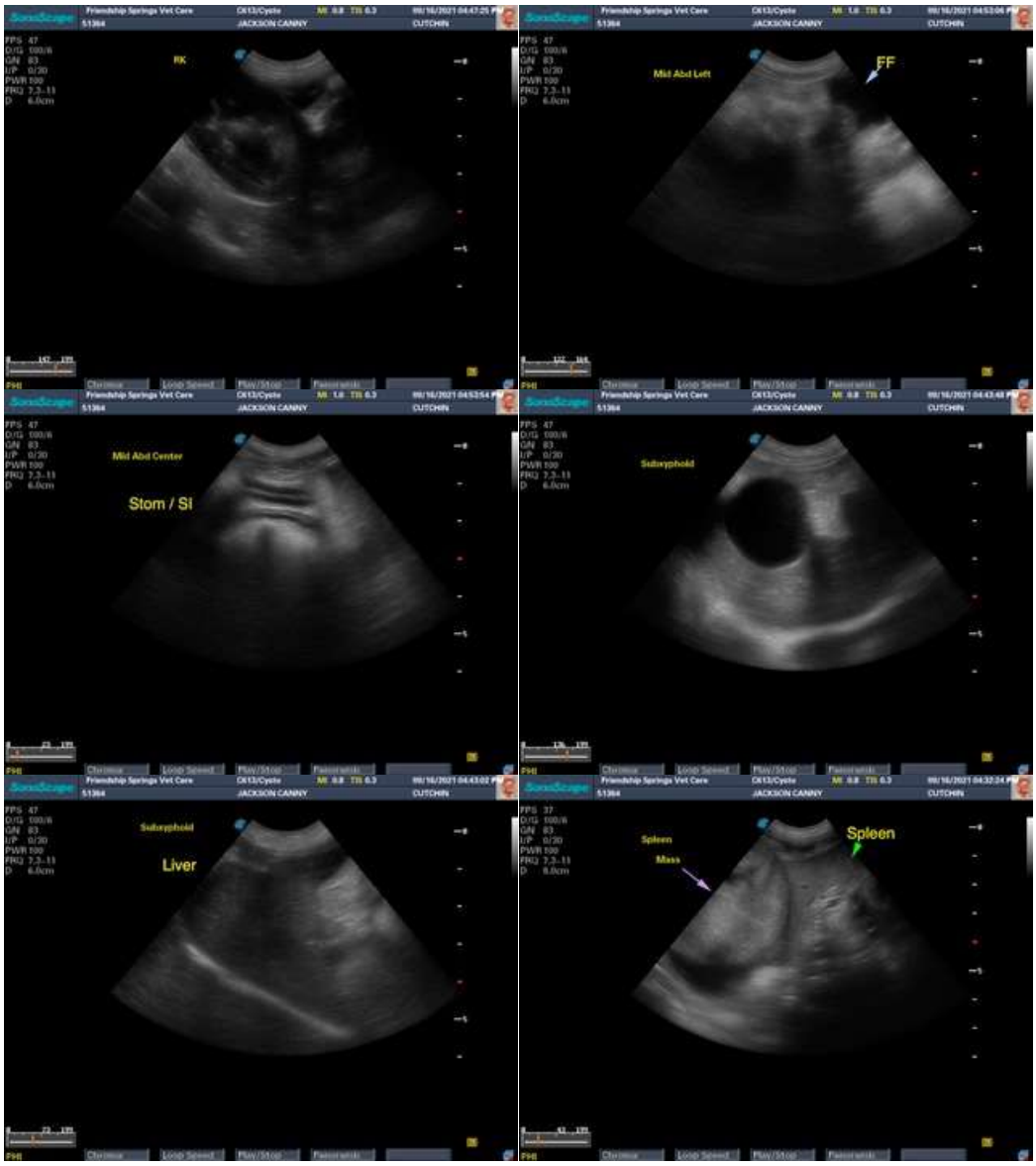
12251

DATE

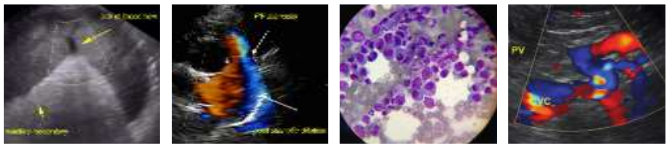
9/17/21

The prostatic presentation sonographically consistent with prostatic hyperplasia is unusual for a neutered male. If the patient was mislabeled as neutered, the prostatic presentation would be relatively normal for an intact male. However, if truly neutered, potential for possible retained testicle may be considered if clinically indicated.

Assuming no evidence of thoracic metastasis and normal cardiopulmonary status on three view chest radiographs, splenectomy with gross inspection of the generalized peritoneal cavity, as well as gross inspection of the prostate is recommended.



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jackson Canny

SPECIES

Canine

BREED

Corgi

SEX

Intact Male

AGE

2 years

WEIGHT

30 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Trae Cutchin

HOSPITAL NAME

Friendship Springs VC

REFERRING VET

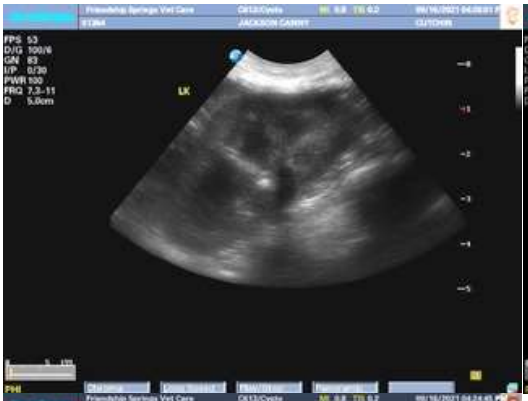
Dr. Trae Cutchin

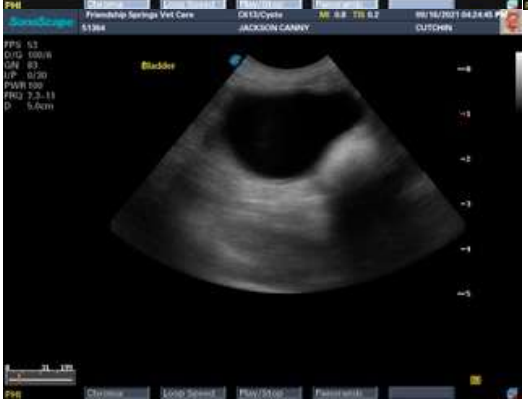
INVOICE

12251

DATE

9/17/21





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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com