



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Jordee Rapp
SPECIES Canine
13 yo MN multi-poo BW 12.9 History of chronic nausea, inappetence, occasional vomiting, weakness, wobbly, semi formed stools. Episodes of weakness, vomiting mitigated with metronidazole. Episodes began 2 months ago. Blood work done at another clinic and according to owner was WNL. Cranial abdominal mass palpable, moveable, not tender. PE otherwise WNL

Urinary System

BREED Maltipoo
The urinary bladder exhibited subnormal size owing to lack of urine distention. Full evaluation of the urinary bladder walls was limited. No overt evidence of neoplastic criteria was noted. The potential for mild cystitis is possible. The urinary bladder wall measured 0.42 cm.

SEX The area of the aortic trifurcation was free of pathology.

MN 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 4.0 cm in length. The right kidney measured 4.5 cm in length.

Adrenal Glands

WEIGHT 12.9 lbs.
The normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.32 cm width in the cranial pole and 0.51 cm width in the caudal pole.

INTERPRETED BY

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

The right adrenal gland was Indistinctly visualized with subjective age-related changes, subjectively measuring 0.63 cm width in the caudal pole.

Spleen

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

A large, expansive mass involving the spleen with secondary asymmetrical capsule expansion and disruption was present and measured approximately 5.5 cm x 5.0 cm, but potentially larger. The parenchyma of the mass was heterogeneous to mixed echogenic with areas of cavitation. The non-affected spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

HOSPITAL NAME

Sierra Animal Wellness
Center

Liver/ Gallbladder

REFERRING VET

Dr. Peggy Roberts

The liver presented mildly enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with mild to moderate, nondependent yet nonorganized gallbladder debris. The cystic and common bile ducts were normal.

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PATIENT ***Gastrointestinal***

Jordee Rapp The stomach presented mild wall thickening secondary to mild echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. Mild gastric distension with a mild amount of retained anechoic fluid was present. The gastric body wall width measured 0.50 cm.

SPECIES

Canine The duodenum presented intact yet subjective mild prominent wall layering with mild duodenal ileus. The duodenum wall width measured 0.5 cm. The jejunum to the ileum was sonographically unremarkable. The jejunum wall measured 0.35 cm.

BREED

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

Pancreas

SEX

Sonographic assessment of the pancreas was somewhat limited owing to peripancreatic omental artifact and peritoneal free fluid.

MN

Free Abdomen

AGE

13y

Significant mildly cellular peritoneal free fluid was present with generalized reactive mesentery primarily around the spleen was present. No overt lymphadenopathy was noted.

Rapid view of the heart (SDEP 3 position) revealed subjectively normal function without pathology in the right auricle or pericardium.

WEIGHT

12.9 lbs.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Large, nonhomogeneous to cavitated splenic mass
- Associated perisplenic reactive mesentery and likely hemoabdomen
- Mild vacuolar hepatopathy pattern with moderate gallbladder debris (non-mucocele)
- Gastroduodenitis, possible generalized gastroenteropathy

Secondary Findings

- Bilateral mild chronic renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although histopathology is required for definitive diagnosis, the splenic mass is most suggestive of neoplasia such as sarcoma or other. Benign pathologies are possible, yet considered less likely. Overt evidence of abdominal or pericardial metastasis was not evident yet potential for non-visualized or micrometastasis cannot be excluded in these cases.

Assuming no evidence of thoracic pathology on three view radiographs, laparotomy with splenectomy, gross inspection of the liver and perisplenic omentum, +/- GI biopsies given the gastrointestinal signs may be considered. However, a very guarded to potentially unfavorable long-term prognosis is indicated.

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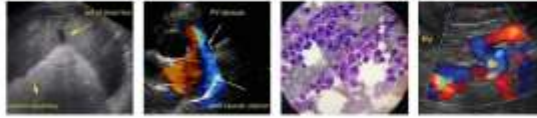
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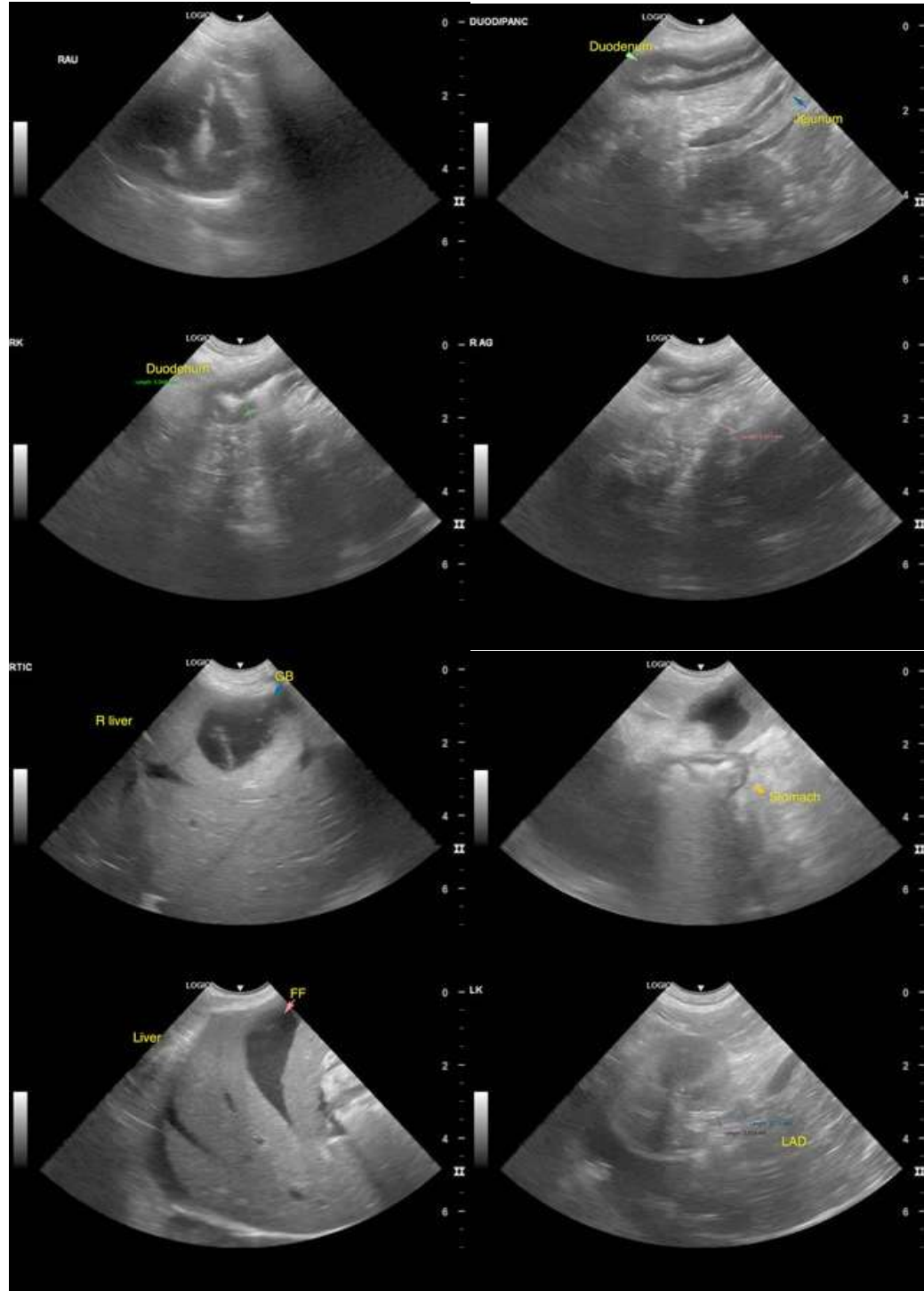
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Maltipoo

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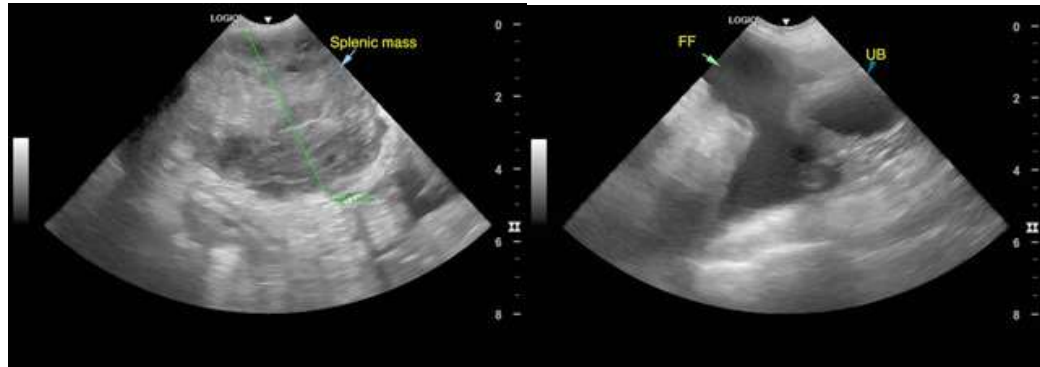
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AGE

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WEIGHT

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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.

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

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