**PATIENT**

Daisy Buyno

**PRESENTING CLINICAL SIGNS**

Second opinion splenic mass  
Abnormal PE/Chem/CBC/UA Results: FNA spleen: uploaded

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm 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.

**BREED**

Beagle X

**SEX**

Spayed Female

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 6.5 cm. The right kidney measured 7.1 cm.

**AGE**

5 Years

**Adrenal Glands**

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.1 cm length x 0.50 cm at the caudal pole. The right adrenal gland measured 2.5 cm length x 0.49 cm at the caudal pole.

**WEIGHT**

48 Pounds

**Spleen**

The spleen exhibited generalized moderate to marked enlargement with asymmetrical capsule contour. Irregular to mixed echogenic parenchyma exhibiting multifocal variably sized to expansive macronodules to mass-like lesions resulting in distortion of the associated splenic capsule, yet without evidence of parenchymal escape. Subtle evidence of perisplenic hyperechoic mesentery.

**INTERPRETED BY**

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

**Liver**

The liver exhibited subjective mild enlarged. 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, containing moderate non-dependent yet non-organized, congealed, mildly hyperechoic luminal debris. No evidence of gallbladder or peripheral gallbladder inflammatory criteria. The cystic and common bile ducts were normal.

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**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.

**REFERRING VET**

Dr. Haenni

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.

**INVOICE**

41645

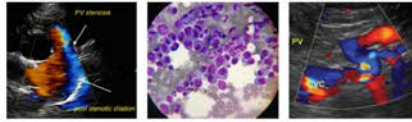
Normal visible colon wall layers were present with apparent formed feces in lumen.

**Pancreas**

The pancreas base and right pancreatic limb were normal in size with areas of minor capsule asymmetry with subtle heterogeneous to hypoechoic parenchyma compared to adjacent omentum. This may be a patient variant. Potential for minor pancreatic inflammation possible.

**DATE**

9/24/22

**PATIENT**

Daisy Buyno

**SPECIES**

Canine

**BREED**

Beagle X

**SEX**

Spayed Female

**AGE**

5 Years

**WEIGHT**

48 Pounds

**INTERPRETED BY**R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

Dr. Haenni

**INVOICE**

41645

**DATE**

9/24/22

**Free Abdomen**

Several enlarged mid abdominal mesenteric and focal mildly enlarged medial iliac lymph nodes were present. The mesenteric lymph nodes exhibited variable enlargement. Example of mesenteric lymph node measured 3.2 cm x 2.6 cm. Example of medial iliac lymph node measured 1.7 cm x 1.4 cm. These lymph nodes were homogenous, mildly hypoechoic and smoothly margined. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident.

Focal pocket of scant effusion noted between the cranial liver and diaphragm.

**PRIMARY FINDINGS**

- Diffuse irregular moderate to marked splenomegaly exhibiting multiple variably sized to expansive macronodules to mass-like lesions.
- Multifocal variably enlarged hypoechoic to swollen mesenteric and focal mild medial iliac lymphadenopathy
- Subjective mild hepatomegaly
- Mildly hypoechoic pancreas base/right pancreas

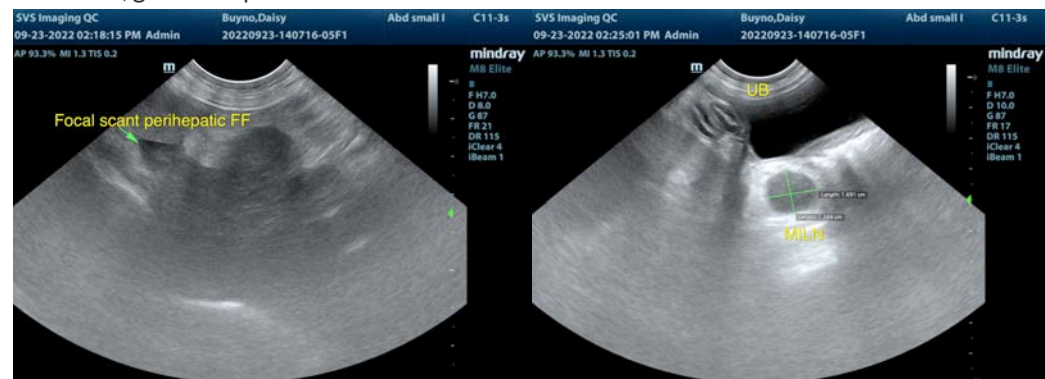
**SECONDARY FINDINGS**

- Moderate congealed gallbladder debris – possible early/emerging mucocele.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Although splenic cytology favored reactive lymphoid hyperplasia, the sonographic appearance of the spleen in conjunction with hypoechoic to swollen mesenteric and medial iliac lymphadenopathy is most suggestive of multicentric round cell neoplasia such as lymphoma, lymphoid leukemia, or other. PARR testing as mentioned on splenic cytology as well as concurrent FNA cytology of an enlarged mesenteric lymph node (if accessible) and screening hepatic FNA cytology, assuming normal clotting status, is recommended for further assessment. 3-view chest radiographs recommended if not done.

Splenectomy is not overtly indicated at this stage pending further assessment with potential for surgical/oncology consult. Multicentric round cell neoplasia is considered probable until proven otherwise, given this presentation.





**PATIENT**

Daisy Buyno

**SPECIES**

Canine

**BREED**

Beagle X

**SEX**

Spayed Female

**AGE**

5 Years

**WEIGHT**

48 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

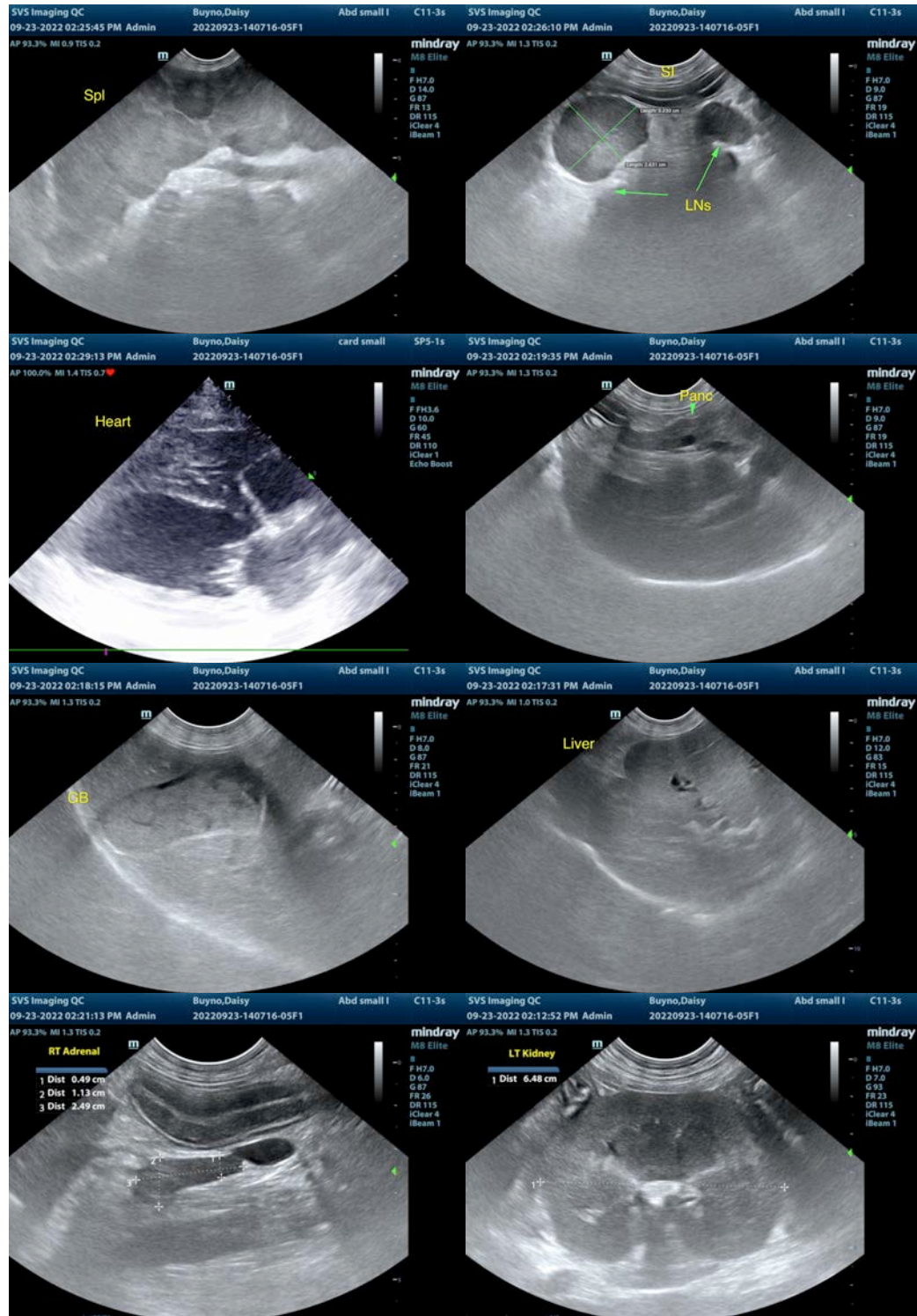
Dr. Haenni

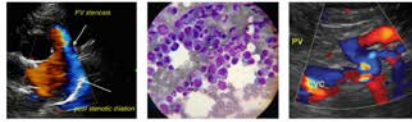
**INVOICE**

41645

**DATE**

9/24/22





**PATIENT**

Daisy Buyno

**SPECIES**

Canine

**BREED**

Beagle X

**SEX**

Spayed Female

**AGE**

5 Years

**WEIGHT**

48 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

SVS Imaging QC

**REFERRING VET**

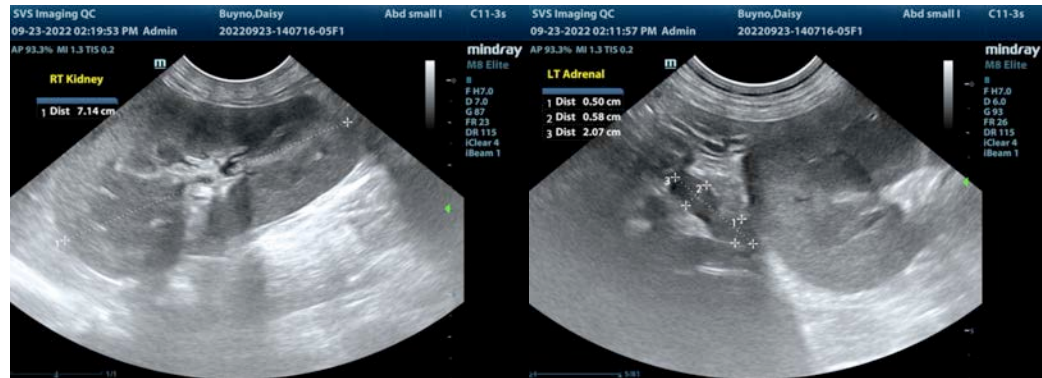
Dr. Haenni

**INVOICE**

41645

**DATE**

9/24/22



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