



## PATIENT

Valentine Martinelli

## PRESENTING CLINICAL SIGNS

## SPECIES

Canine

Abdominal Re-check for regrowth of tumor in bladder (this animal was previously scanned by you) Recently presented for anorexia, probably related to meloxicam. Taking meloxicam for luxated hip (can not be put back into place) xrays also show significant IV disc compression. Probably UTI. On amoxicillin 50mg/ml 4 cc bid

## BREED

Shih Tzu

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder was overtly normal in overall size and tone. Anechoic urine present. No sediment or calculi. The urethra presented overtly normal structure and tone to a depth of 2.0 cm.

## SEX

Spayed Female

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. Mild pyelectasia noted in the left kidney. The left kidney measured 4.1 cm. The right kidney measured 4.7 cm.

## AGE

10 Years

### Adrenal Glands

No overt pathology in the area of the left and right adrenal glands.

## WEIGHT

9.25 kg

### Spleen

The spleen was normal in size and contour with primarily finely textured homogeneous parenchyma. A solitary previously noted static nodule was noted with minor associated lateral symmetrical capsule distortion. The splenic nodule measured 0.64 cm in diameter.

## INTERPRETED BY

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

### Liver

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 mild dependent mildly hyperechoic debris. The cystic duct and common bile ducts were normal without evidence of dilation.

## IMAGING BY

Loetitia Saint-Jacques,  
LVT

### 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.

## HOSPITAL NAME

Roundhill AH

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.

## REFERRING VET

Dr. Carl Kelly

### Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum, likely consistent with age related changes or remodeling, and incidental. No signs of active inflammation or neoplasia.

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### Free Abdomen

## DATE

9/24/22



## PATIENT

Valentine Martinelli Focal, mildly prominent to enlarged medial iliac node was present, measuring 1.6 cm x 0.44 cm. This lymph node was not overtly or sonographically suggestive of an inflammatory or neoplastic criteria. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

## SPECIES

Canine

An unspecified, non-homogeneous to mixed echogenic mass was present in the area of the dorsal urinary bladder with potential impingement upon the dorsal urinary bladder wall as well as directly adjacent to the ventral aspect of the distal colon and within the area of the uterine remnant. The mass measured approximately 4.1 cm x 3.5 cm. The mass was similar to previous measurement.

## BREED

Shih Tzu

No overt intraabdominal lymphadenopathy, omental masses, or evidence of peritoneal free fluid.

## SEX

Spayed Female

- Unspecified non-homogeneous to irregular mass in the area of the dorsal urinary bladder, distal colon, and uterine remnant – subjectively static in size.

## AGE

10 Years

- Subjective static mild medial iliac lymphadenopathy
- Bilateral chronic renal changes with minor left kidney pyelectasia

## WEIGHT

9.25 kg

- Static non-specific yet subjective benign splenic nodule – hyperplasia, hematopoiesis, cyst, or similar suspected.
- Minor gallbladder debris – incidental assuming no evidence of cholestasis.

## INTERPRETED BY

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DVM, DABVP  
(Canine and Feline)

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although previous sonographic assessment of primary urinary bladder tumor is applicable, the possibility of non-urinary bladder origin of the mass (i.e., uterine stump origin or less likely colonic origin) may be possible with impingement upon the dorsal urinary bladder wall. The mass did not overtly appear to invade the urinary bladder lumen in this study.

## IMAGING BY

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LVT

Regardless, neoplastic criteria is likely. Assuming normal clotting status, and if accessible, ultrasound guided FNA of the mass could be considered for screening cytology with potential for oncology consult. No obvious evidence of regional metastasis, although continued sonographic monitoring of the mass as well as medial iliac/sublumbar lymphadenopathy is advised. Further assessment may include an abdominal CT, if possible.

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## REFERRING VET

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**SPECIES**

Canine

**BREED**

Shih Tzu

**SEX**

Spayed Female

**AGE**

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**WEIGHT**

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**REFERRING VET**

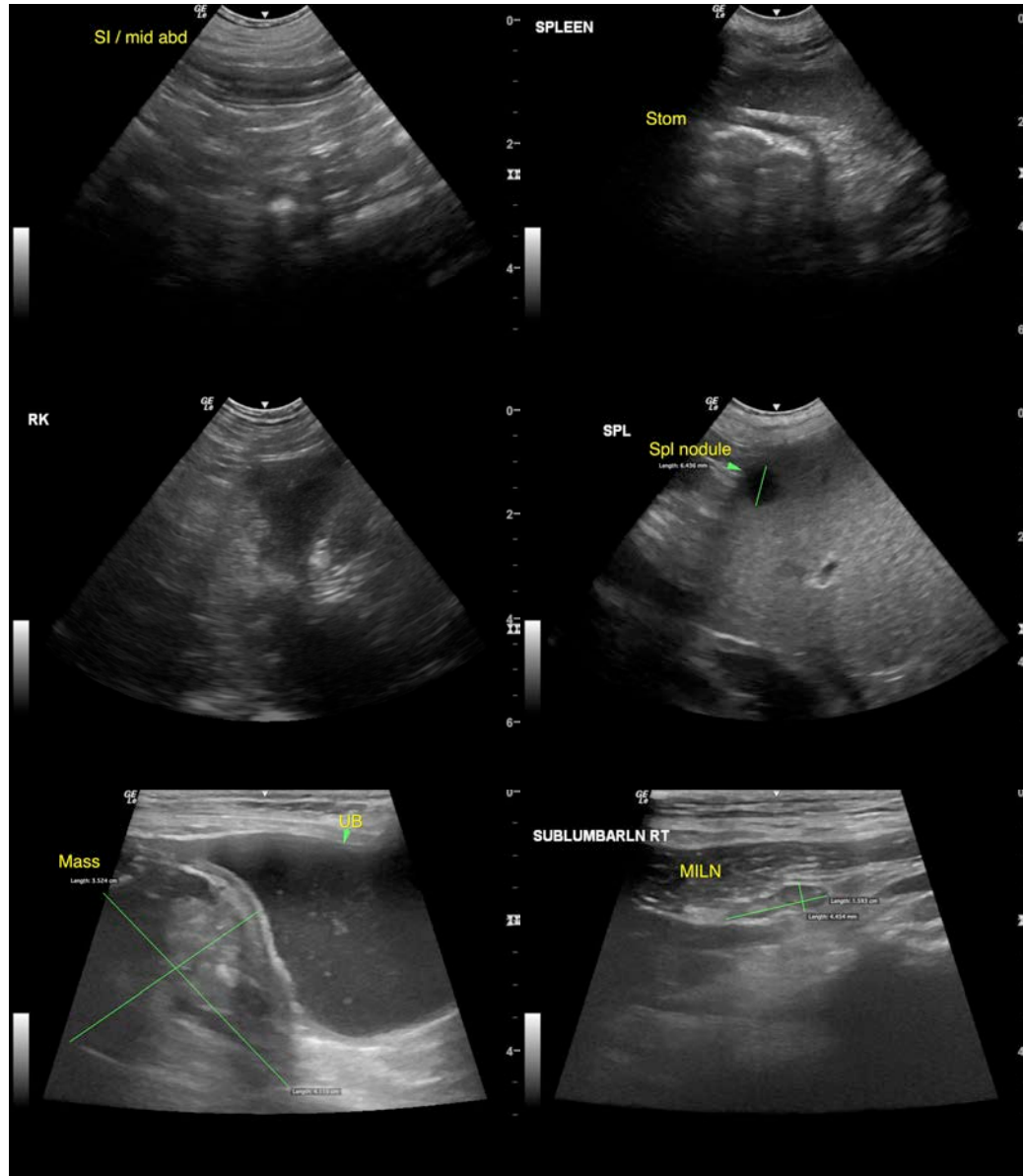
Dr. Carl Kelly

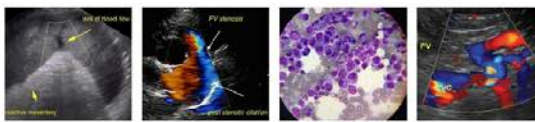
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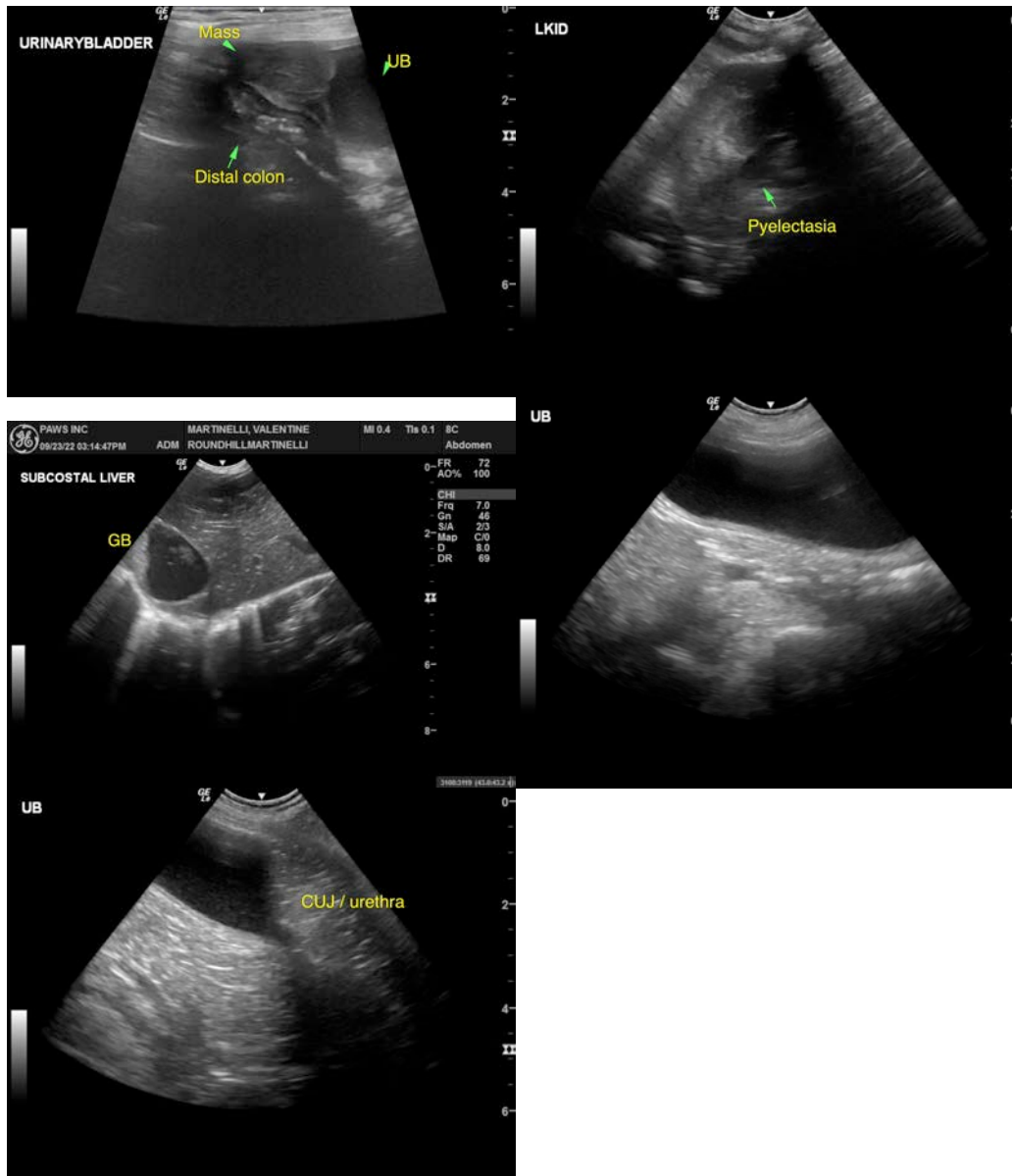
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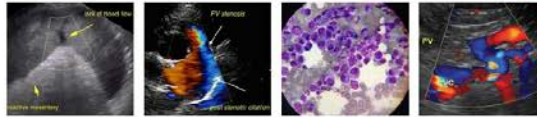
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



**PATIENT**

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Spayed Female

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