



PATIENT

Cole Greenberg

SPECIES

Canine

BREED

Boxer Mix

SEX

MN

AGE

2.5 years

WEIGHT

73 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jennifer Todd

HOSPITAL NAME

Lambs Gap AH

REFERRING VET

Dr. Michelle Nelson

INVOICE

15006

DATE

9-28-22

PRESENTING CLINICAL SIGNS

Fluctuant swelling under neck 2 weeks ago that resolved with Clavamox and Carprofen but pet remains lethargic and decreased appetite. At recheck appt, pet was febrile (104) but was down to 102.6 today. Sedated oral exam showed mild tartar, otherwise unremarkable. Right SM gland enlarged (LN vs salivary gland) - cytology pending.

Abnormal PE/Chem/CBC/UA Results: CBC/Chem/Lytes - elevated globulin Fever Unknown Origin Panel - all negative UA unremarkable Lat Chest and Lat Abd Rad NSF

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 was noted.

The area of the residual prostate was free of pathology.

No evidence of medial Iliac or sublumbar lymphadenopathy/masses.

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 7.0 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 2.6 cm length x 0.59 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 3.1 cm length x 0.50 cm width at the caudal pole.

Spleen

The spleen exhibited subjective mild enlargement with maintained symmetrical capsule contour and a finely textured to subtly heterogeneous parenchyma exhibiting normal parenchyma echogenicity. Medial folding of the spleen was present in some views. Normal splenic vascularity was evident. No evidence of splenic masses or nodules.

Liver/ Gallbladder

The liver exhibited subjective borderline enlargement with the ventral liver extending to the level or just caudal to the gastric axis. 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.



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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.

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

No omental masses, lymphadenopathy, or peritoneal effusion were noted.

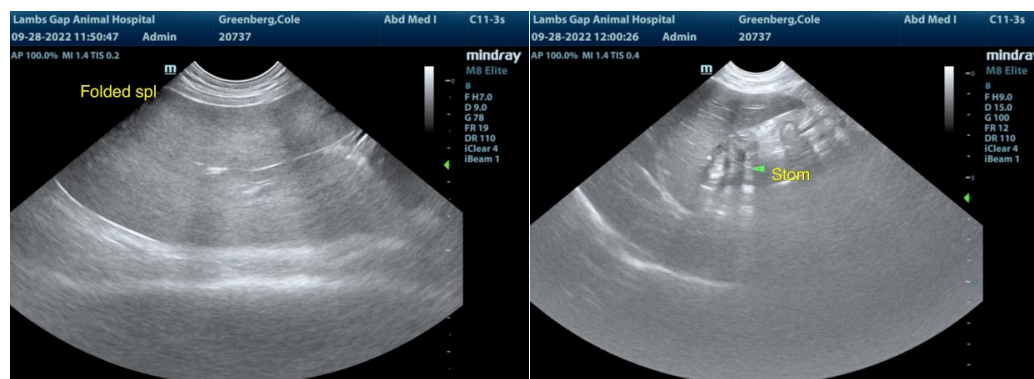
ULTRASONOGRAPHIC FINDINGS

- Mild generalized splenomegaly exhibiting symmetrical capsule contour and subtle parenchyma heterogeneity, evidence of medial splenic folding
- Possible borderline hepatomegaly - subjectively benign
- Sonographically unremarkable gastrointestinal tract

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sonographically, the subjective splenomegaly with folding is nonspecific with considerations including patient variant, splenomegaly owing to sedation if clinically applicable, incidental hyperplasia, hematopoiesis, or splenitis.

Screening splenic FNA cytology, assuming normal clotting status and using a 25-gauge needle, is recommended primarily to ensure only benign changes are present in light of hyperglobulinemia and to rule out any evidence of emerging neoplasia, i.e., myeloma, or other. No other evidence of abdominal visceral pathology was noted.





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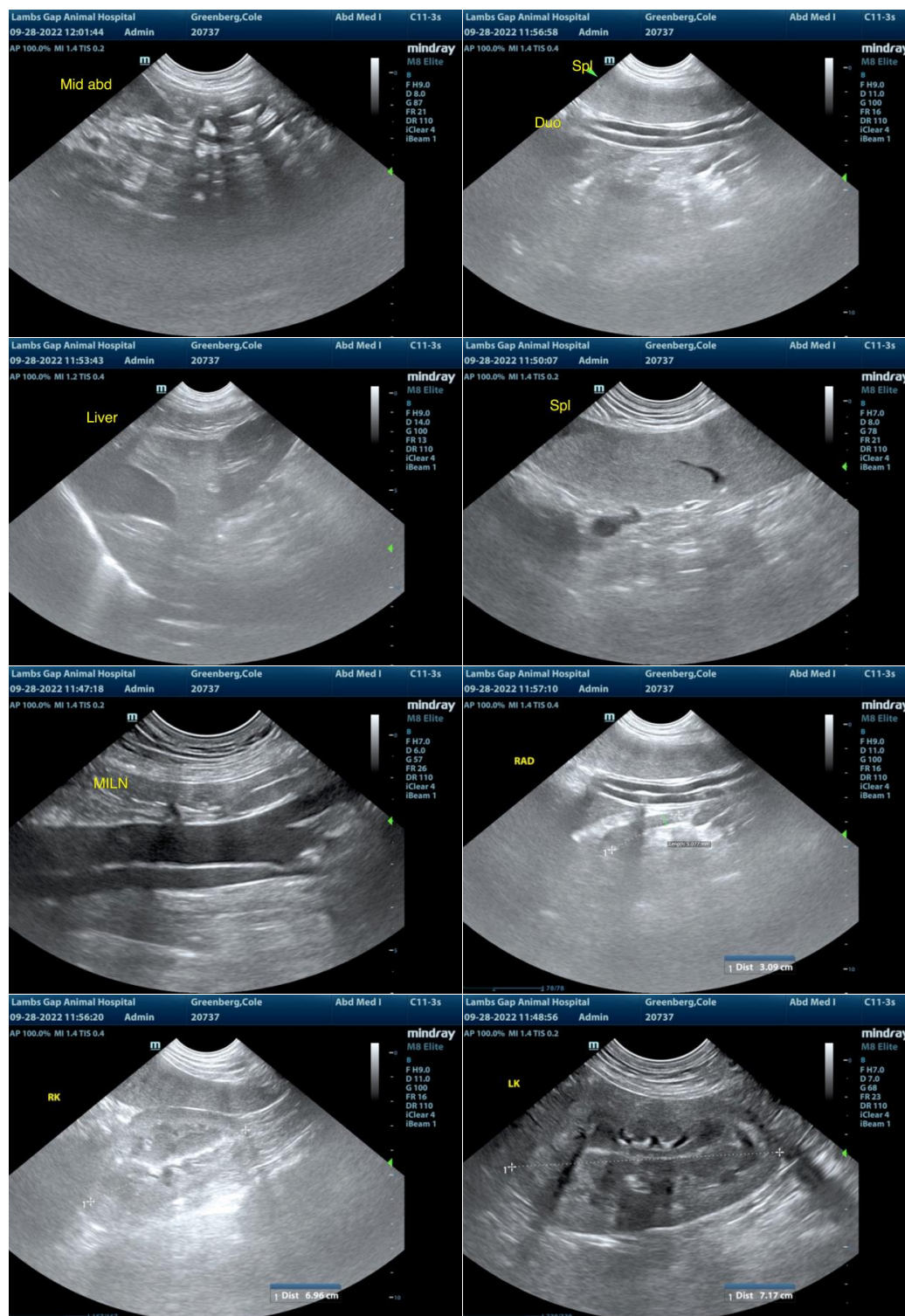
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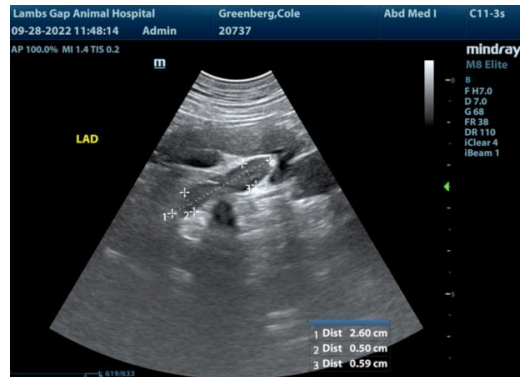
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

INTERPRETED BY

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