



PATIENT

Jodie Johnson

SPECIES

Canine

BREED

Pit Bull

SEX

Spayed Female

AGE

6

WEIGHT

14.5

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. A Waffle

HOSPITAL NAME

Torch Lake VC

REFERRING VET

Dr. A Waffle

INVOICE

12192

DATE

9/8/21

PRESENTING CLINICAL SIGNS

14 lb weight loss in 2 weeks. Ravenous appetite. Presented as referral from ER clinic
Abnormal PE/Chem/CBC/UA Results: Ulcerated mass of L caudal mammary (open draining tract)

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 was noted.

No overt evidence of pathology associated with the uterine stump or bilateral ovaries was noted.

Several medial iliac lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of the lymph nodes measured 2.2 cm x 0.9 cm.

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 6.4 cm in length. The right kidney measured 6.3 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 0.80 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 0.65 cm width at the caudal pole.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

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 minor, echogenic, nonmineralized biliary sludge. The gallbladder debris was nonspecific and likely incidental with potential for mild nonclinical cholestasis. The cystic duct and common bile ducts were normal without evidence of dilation.



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Gastrointestinal

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The stomach presented intact wall layering with a normal wall layer ratio. Mild retained echogenic ingesta and anechoic fluid along with minor luminal gas was present. The gastric body wall width measured 0.45 cm.

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained segmental, mild, echogenic, nonshadowing digesta / chyme consistent with normal food without signs of ileus, obstruction or foreign material.

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

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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.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present. A nonhomogeneous to subjectively cystic mass was noted in the area of the caudoventral subcutaneous space, consistent with mammary mass.

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ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Nonspecific mildly prominent medial iliac lymph nodes - not overtly consistent with neoplastic / metastatic criteria, hyperplasia or minor lymphadenitis suspected
- Mild retained gastric ingesta / fluid with segmental small bowel digesta / chyme - suspect post prandial presentation, minor potential for some degree of gastrointestinal hypomotility if documented NPO, no evidence of mechanical obstruction
- Nonhomogeneous to cystic mammary mass

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Cytology +/- C/S if evidence of concurrent cystic component to the mammary mass is suggested for further clarification If not done. If a neoplastic process is confirmed, no overt evidence of Intraabdominal or retroperitoneal metastatic disease. However, sonographic monitoring of the medial iliac lymph nodes +/- FNA for screening cytology if persistent or progressive medial Iliac lymphadenopathy Is noted, is recommended.

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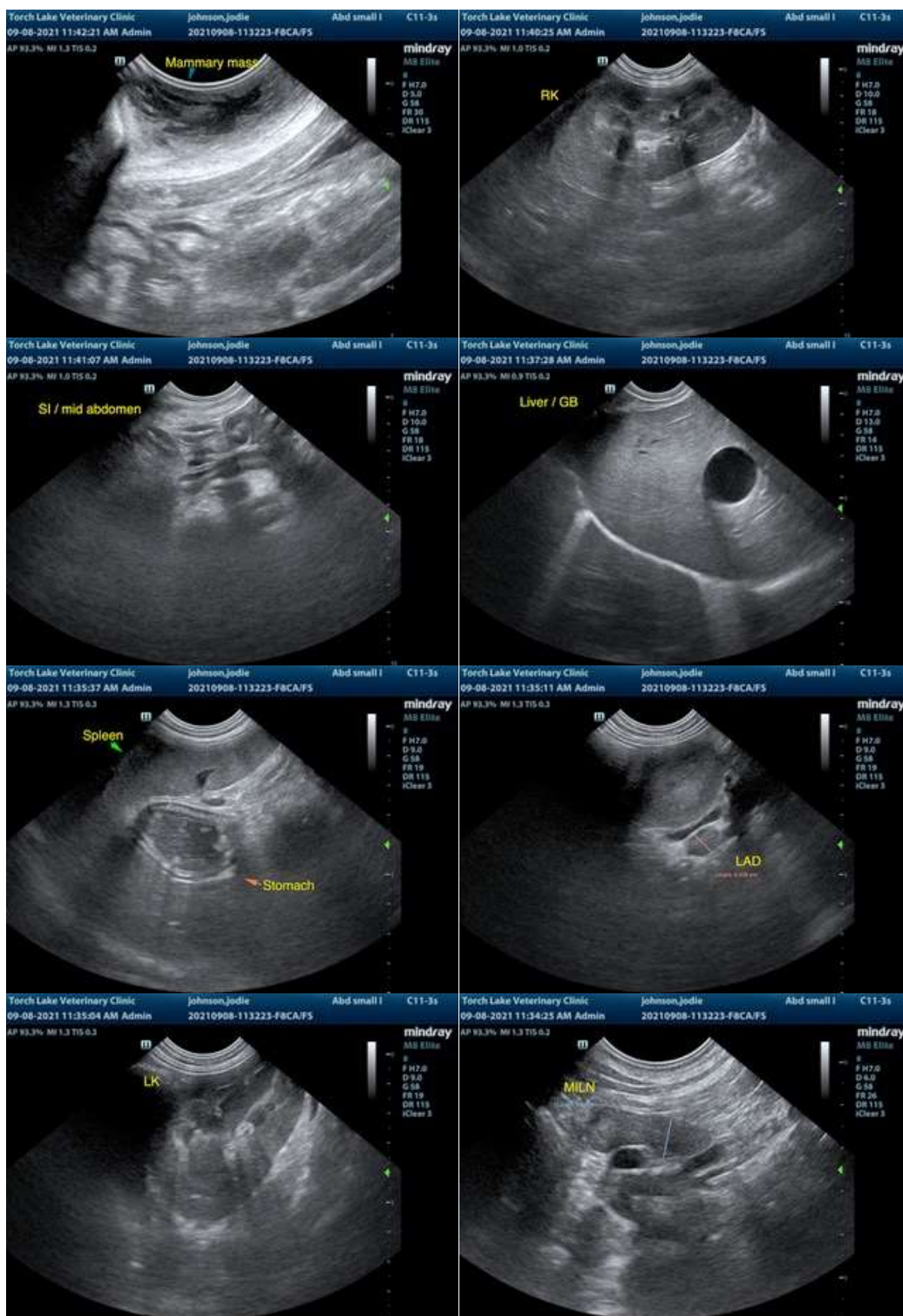
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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.

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info@SonoPath.com

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