



PATIENT	PRESENTING CLINICAL SIGNS
Emily Callen	Hx of GI issues (blood in stool), abdominal pain, palpable abd. mass. Current meds: Budesonide, Famotidine
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.
Shih Tzu Mix	
SEX	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 3.7 cm in length. The right kidney measured 4.0 cm in length.
FS	
AGE	The area of the aortic trifurcation was free of pathology.
5yr	Adrenal Glands
WEIGHT	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.45 cm width at the caudal pole and 0.49 cm width at the cranial pole. The right adrenal gland was indistinctly visualized.
13.6lb	
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	Liver
Shari Reffi CVT	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 thin walls and primarily anechoic luminal content with mild luminal debris. The cystic and common bile ducts were normal.
HOSPITAL NAME	Gastrointestinal
Newton Vet	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild retained anechoic to mildly echogenic fluid with no signs of ileus, obstruction or foreign material.
REFERRING VET	
Dr. Colyer	
INVOICE	The small intestine presented intact wall layering with segmental 1:3 muscularis/mucosa ratio with concurrent segmentally thickened small bowel primarily in the mid-abdomen exhibiting altered muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.
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DATE	
09/09/2022	



PATIENT

Emily Callen

The colon walls presented intact yet mildly prominent wall layering with mild thickened to echogenic submucosa. Semi formed to soft fecal matter was present in the colon lumen with lumen dilation.

Pancreas

SPECIES

Canine

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 was evident.

BREED

Shih Tzu Mix

Free Abdomen

Small pockets of scant peritoneal effusion were present.

SEX

FS

Enlarged, multifocal variable yet enlarged hypoechoic mid-abdominal mesenteric root lymph nodes were present. The lymph nodes exhibited symmetrical to rounded margination with abnormal width: length ratio (>0.5). The enlarged lymph nodes were bordered by echogenic to reactive mesentery. The mesenteric root lymph nodes measured 6.9 cm length and 3.5 cm width.

AGE

5yr

A focally enlarged medial iliac lymph node was present. This lymph node was homogenous, mildly hypoechoic and smoothly margined. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node size was 0.63 cm

ULTRASONOGRAPHIC FINDINGS

WEIGHT

13.6lb

Primary

- Multifocal variable enlarged hypoechoic intra-abdominal lymphadenopathy with peri-lymphatic hyperechoic mesentery
- Segmentally thickened small bowel
- Mild gastric stasis

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the intra-abdominal lymph nodes is strongly suggestive of neoplastic criteria such as lymphoma vs other round cell neoplasia. Correlation with pending lymphatic cytology with potential for oncology consult is suggested. If neoplastic process is confirmed, potential segmental early small bowel involvement would be of concern.

IMAGING PERFORMED BY

Shari Reffi CVT

Pending sampling, as needed GI support is recommended. Three view chest radiographs suggested if not done to assess for thoracic pathology. A very guarded prognosis pending lymph node cytology.

HOSPITAL NAME

Newton Vet

REFERRING VET

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SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

5yr

WEIGHT

13.6lb

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IMAGING PERFORMED BY

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HOSPITAL NAME

Newton Vet

REFERRING VET

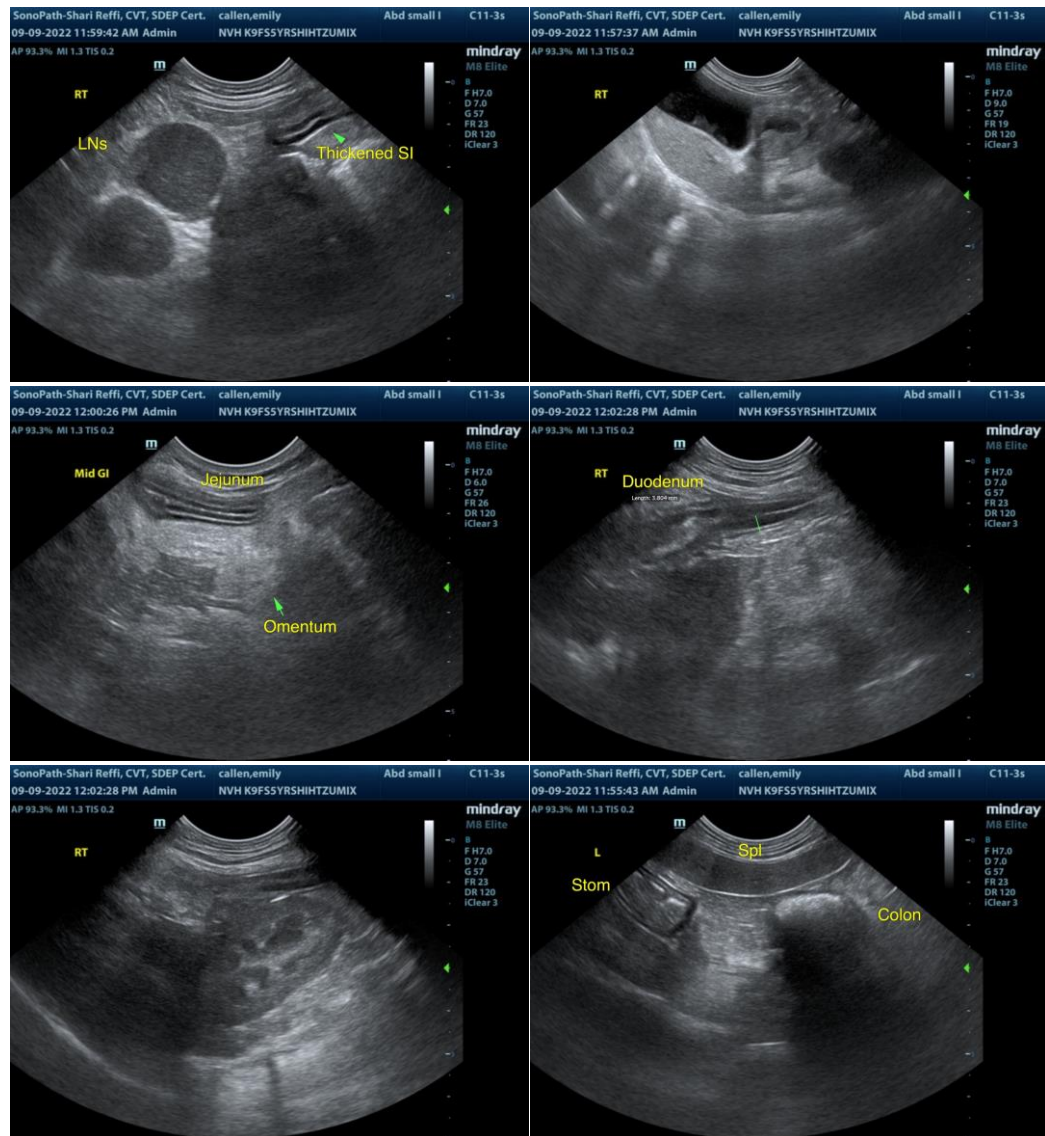
Dr. Colyer

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Emily Callen

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

5yr

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IMAGING PERFORMED BY

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HOSPITAL NAME

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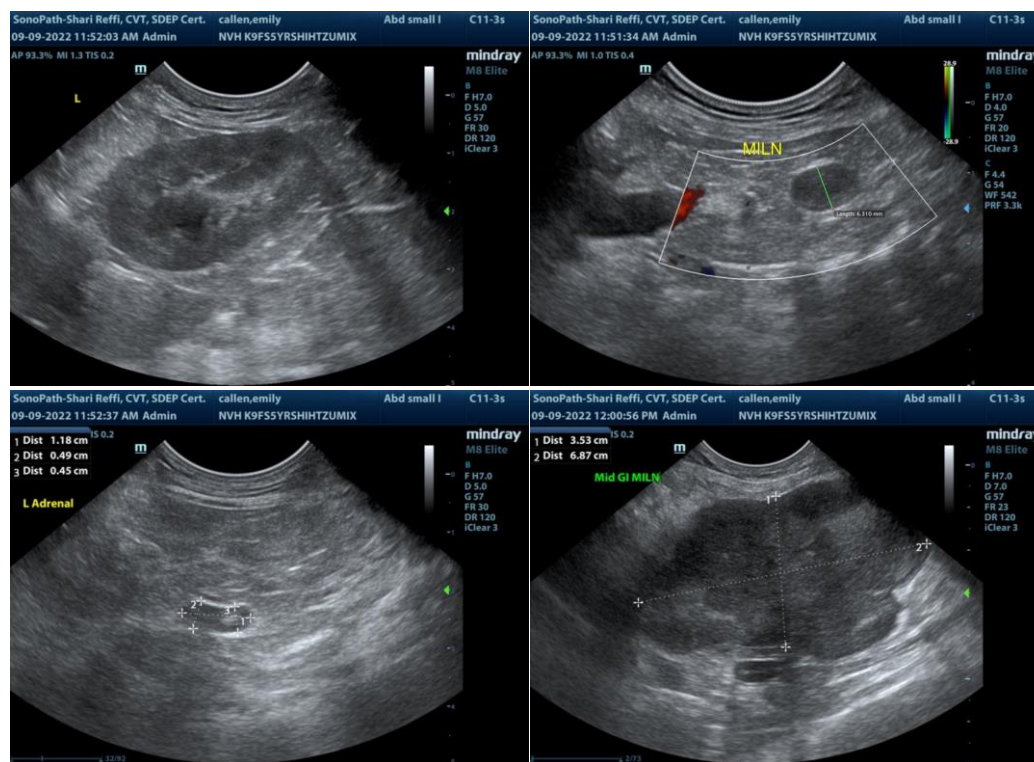
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com