

IMAGING PERFORMED BY

SVS Mobile Imaging 262-366-5970
fredgromalak@gmail.com



Clinical Sonography & Telectology

EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Kira Ninnemann
258245

SPECIES

Canine

BREED

Mixed Breed

SEX

FS

AGE

4 Years

WEIGHT

52

INTERPRETED BY

Sebastian Jawinski,
German Board
Certified Vet Specialist
in Diagnostic Imaging

IMAGING PERFORMED BY

Dr. Gromalak

HOSPITAL NAME

SVS Imaging

REFERRING VET

Dr. Schulz

INVOICE

50026

DATE

2-2-22

PRESENTING CLINICAL SIGNS

Had colonic lymphoma confirmed via histopathology and intususception removed surgically. This is staging after surgery.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary system**

The urinary bladder, trigone and pelvic urethra present normal findings without evidence of uroliths or sediment. Wall layering is intact on all views without focal or diffuse thickening. Ureters are not visualized and considered to be normal. No evidence of an inflammatory or neoplastic process is noted.

The left kidney presents a rounded, expansile cortical lesion at the level of the cranial renal pole, which is hypoechoic with a hyperechoic margin (1.49 x 1.49 cm). Distal acoustic enhancement is not recognized. Two additional hypoechoic, ill-defined, subcapsular cortical lesions are detected at the caudal pole (0.79 x 0.61 cm and 0.32 cm). The left renal capsule is smooth and well margined.

The right kidney demonstrates a hyperechoic, ill-defined medullary lesion of 1.14 x 0.67 cm.

Cranial to the urinary bladder an ill-defined, hypoechoic area is recognized aligning with the ventral lumbar spine. The bone surface is highly irregular as far as can be assessed.

Adrenal glands

Both adrenal glands are considered to be normal.

Spleen

The spleen is inconspicuous in terms of size, surface and echotexture and shows diameters of 1.91 cm. Splenic vasculature presents normal course of vessels and unremarkable perfusion of the splenic veins.

There are no signs of nodular/focal changes noted.

Liver/Gallbladder

Liver images are inconspicuous. Echotexture, size and vasculature appear regular. Evidence of nodular or focal changes is not visible. The gallbladder is mildly filled without signs of relevant sludge, a florid process or cholestasis.

Gastrointestinal

The stomach, the small intestine and colon present intact wall layers being normal in width and echogenicity. Adjacent mesentery and fat tissue are of normal appearance. There is no overt evidence of an ileus, a florid-inflammatory or even neoplastic process. The mesenteric, epigastric and portal lymph nodes are considered to be normal.

Pancreas

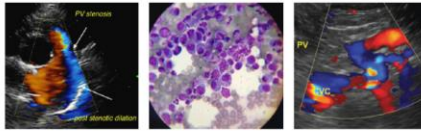
All pancreatic parts displayed show isoechoic echogenicity to the surrounding omental fat.

Free Abdomen

There is no evidence of peritoneal or retroperitoneal effusion noted.

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ULTRASONOGRAPHIC FINDINGS

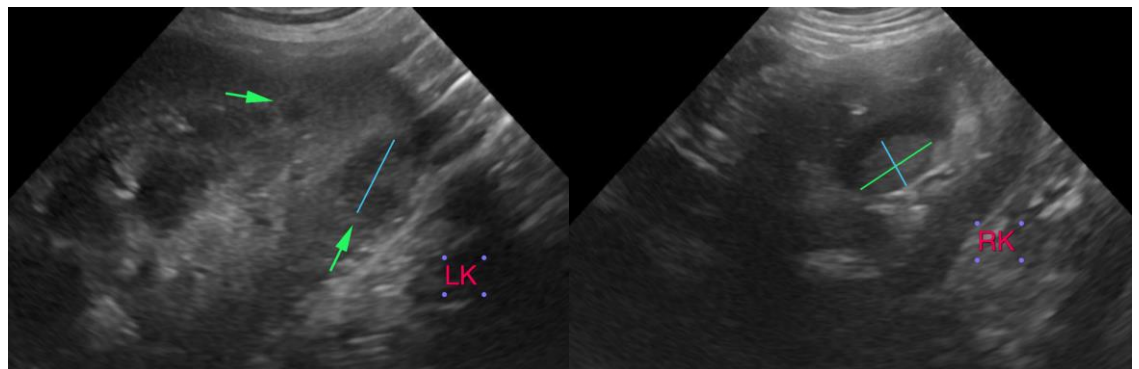
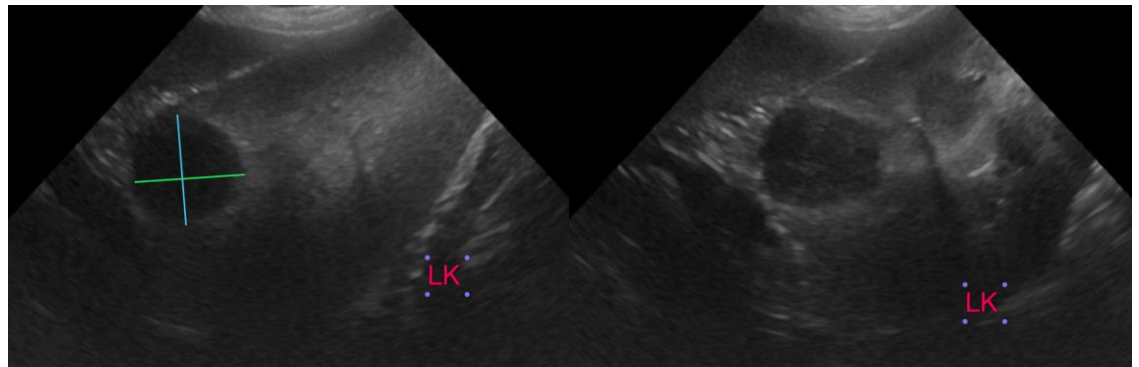
- Mass-like lesions of the left and right kidney
- Questionable sub-lumbar mass formation cranial to the urinary bladder

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasonographic findings of the kidneys are highly suspicious for a neoplastic process. The left renal lesion in the cranial section of the kidney appears expansile and shows no distal acoustic enhancement which is typically seen with renal cysts. Differentials include renal neoplasia which often is bilateral and metastases of another primary tumor as well as inflammatory lesions such as renal abscesses which are very unlikely. FNA of the cortical lesions on the left side and urinary testing could be performed next.

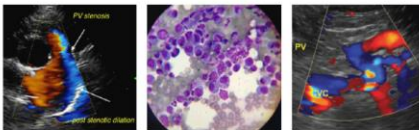
The hypochoic changes ventral to the lumbar spine and the irregular bone surface would go along with the assumption of a malignant, retroperitoneal process.

Please search for bone/pulmonary lesions/metastases.



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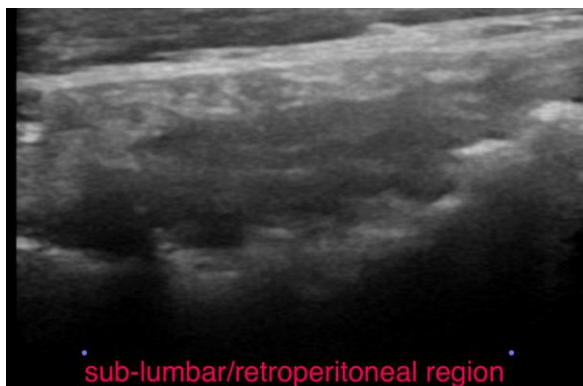
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
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