



PATIENT PRESENTING CLINICAL SIGNS

Mak Morales Ramirez History: Presented as referral for an abdominal ultrasound. Pt has history of severe dermatologic conditions and the skin is very affected. Pt has history of demodecosis. Pt's skin does not seem to improve and the study is to evaluate and rule in/out possible underlying causes like neoplasia.

SPECIES Abnormal PE/Chem/CBC/UA Results: PE: Severe dermatologic changes with generalized alopecia, seborrhea oleosa and crusty lesions with severe scaling. All peripheral LNs are prominent. Ocular changes with purulent discharge is present OU. Historical BW was done and were unremarkable.

Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Pit Bull 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 are noted.

SEX

Neutered Male

The prostate appears enlarged and presents an inhomogeneous texture measuring 2.3 x 2.2 cm.

AGE

11 Years

Left kidney measures 6.66 cm length, right kidney 6.65 cm. Both show a slightly age-appropriate fuzzy corticomedullary transition. Renal pelvis and exit to the ureters are unremarkable.

INTERPRETED BY Adrenal glands

Both adrenal glands are normal.

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German Board
Certified Vet Specialist
in Diagnostic Imaging

Spleen

The spleen is inconspicuous in terms of size, surface and echotexture and shows transverse diameters of 1,2 cm. Splenic vasculature presents normal course of vessels and unremarkable perfusion of the splenic veins. There are no signs of nodular/focal changes noted.

HOSPITAL NAME

Paseos VC

Liver/Gallbladder

Liver echogenic texture appears generally and mildly hyperechoic and is inhomogeneous and coarse. Evidence of nodular or focal changes are not visible.

REFERRING VET

Dr. Andrea Montanez

The gallbladder is significantly distended, shows a partially hyperechoic and thickened wall and contains hyperechoic, inhomogeneous and structured material. The ventral parts of this lesion are surrounded by bile and show an irregular margination.

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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. No overt evidence of ileus

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PATIENT Mak Morales Ramirez and again, no signs of a florid or neoplastic process. Mesenteric lymph nodes are mildly hyperechoic and enlarged.

Pancreas

SPECIES All pancreatic parts displayed show isoechoic echogenicity to the surrounding omental fat. Signs of inflammatory changes or focal lesions are missing.

Canine

Free Abdomen

BREED No peritoneal or retroperitoneal effusion. Abdominal fat and great vessels show no pathological findings.

Pit Bull

SEX

The (left) medial iliac lymph nodes and the sub-lumbar, para-aortal lymph nodes impress with moderate enlargement. They appear rounded to amorphous in shape, hyperechoic and have a homogeneous echotexture. Their periphery is inconspicuous.

Neutered Male

ULTRASONOGRAPHIC FINDINGS

AGE Primary Findings

11 Years

- "Bulky lesions" of the medial iliac and sub-lumbar lymph nodes
- Gallbladder mass

INTERPRETED BY

Secondary Findings

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German Board
Certified Vet Specialist
in Diagnostic Imaging

- Hyperplasia of the prostate
- Inhomogeneous liver
- Mild enlargement of the mesenteric lymph nodes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Andrea Montanez

Ultrasonographic findings of the lymph nodes are highly suspicious for a neoplastic process as commonly seen with malignant lymphoma. Other metastatic disease and a severe inflammatory process are possible. I would exclude the latter. Anal glands (left) and the prostate could be locations for primary neoplasia (rectal examination?/hypercalcemia?). I do suspect a gallbladder neoplasia since the lesion appears expansile with a structured texture and irregular but clear margination (doppler signal?).

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Sonographic findings of the liver could speak for a chronic and age-appropriate liver disease such as chronic hepatitis, vacuolar liver disease and/or fatty infiltration since there no signs of nodular or focal changes that are suspicious for neoplasia. Diffuse infiltration cannot be ruled out.

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I would recommend sampling of the lymph nodes (as already performed). Complementary FNA of the gallbladder, liver and prostate could be performed next.

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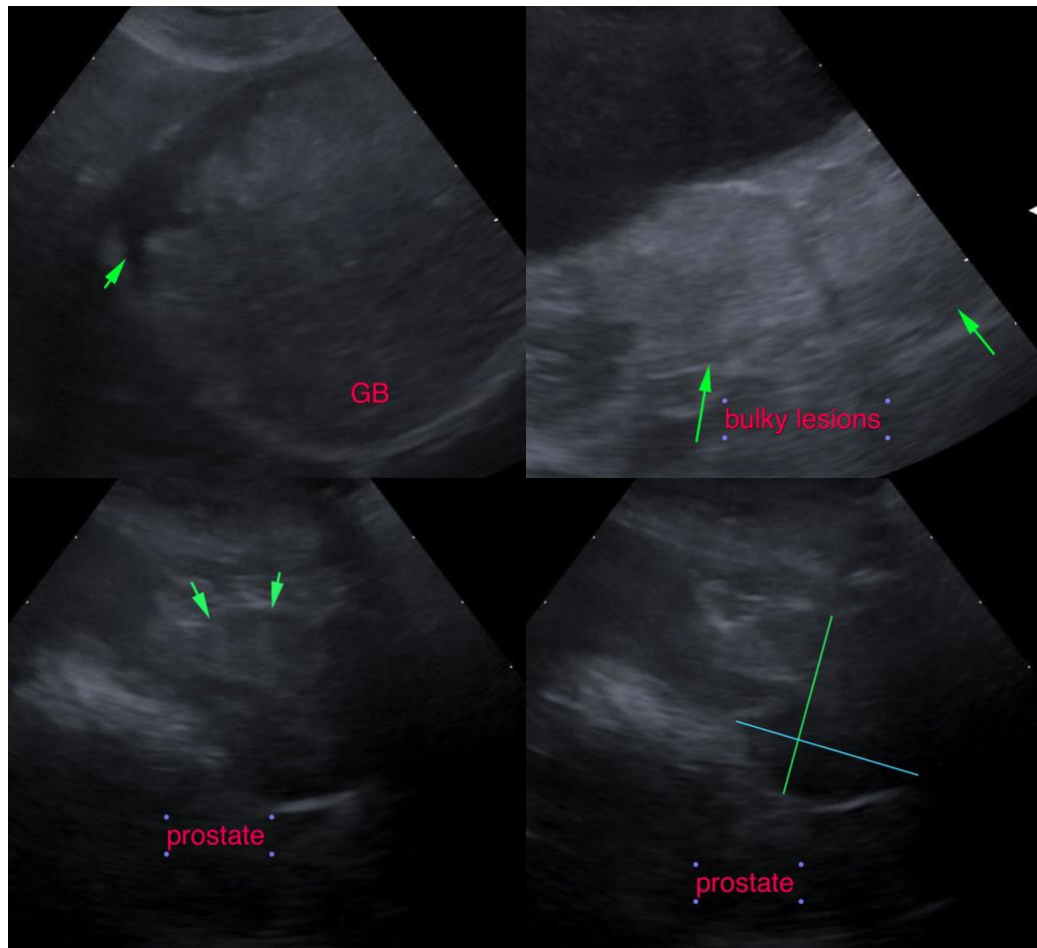
Dr. Andrea Montanez

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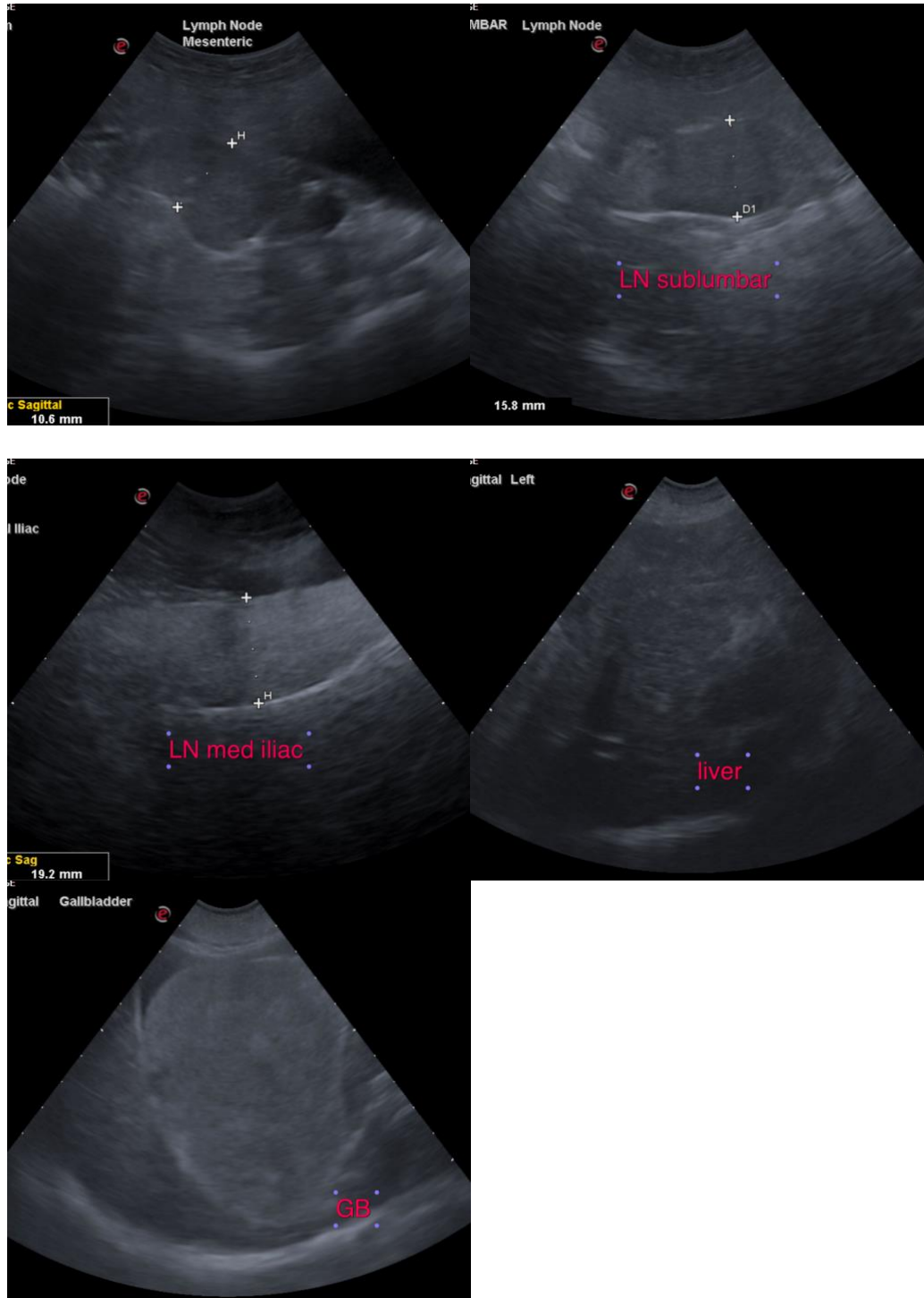
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The information and recommendations provided are based on the images presented by the



PATIENT referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Mak Morales Ramirez

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.

SPECIES

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Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
info@sonopath.com

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