

**PATIENT PRESENTING CLINICAL SIGNS**

Jazzy Daddona

History: Staging for suspected inflammatory mammary carcinoma. Patient has a prior history of lymphocytic leukemia which is in remission. Recent bloodwork shows ALT 281 with mildly low BUN and Albumin, else unremarkable. Chest rads clear.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder is moderately distended with anechoic urine, and no luminal sediment is present. The ureteral papillae, trigone and pelvic urethra are of normal appearance, and the ureters are not visible (normal). No masses, calculi or mucosal irregularities are noted. Urethra visualized to 3.0 cm.

**BREED**

Mixed

Both kidneys are hyperechoic and exhibit moderately decreased cortico-medullary differentiation. There is focal mineralization present within the renal cortex. There is no evidence of nephrolithiasis, pyelectasia or hydronephrosis. The proximal ureters are not visible (normal). The left kidney is 7.3 cm in length. The right kidney is 7.6 cm in length.

**SEX**

Spayed Female

**Adrenal Glands**

The adrenal glands are both identified in their normal locations. They are normal in size and shape with appropriate parenchymal echogenicity and normal phrenic vasculature. The left adrenal gland height is 5.4 mm at the cranial pole and 5.3 mm at the caudal pole. The right adrenal gland height is 4.4 mm at the cranial pole and 6.8 mm at the caudal pole.

**AGE**

6 years

**Spleen**

The spleen is of appropriate size and has a normal, homogenous parenchyma with a smooth, continuous capsular surface, with the exception of two hypoechoic nodules. One nodule (1.6 x 1.2 cm) is in the body of the spleen. The other (1.3 x 1.0 cm) is in the head of the spleen. Both cause capsular expansion. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal.

**WEIGHT**

54 lbs

**Liver**

The liver is of appropriate size and shape, with sharp borders and a markedly coarse parenchymal echotexture that is isoechoic to the spleen. The portal and hepatic vasculature are of normal size and appearance with no evidence of congestion or thrombosis.

**INTERPRETED BY**

Tam Mengine, DVM,  
DABVP (canine/feline  
practice)

The gallbladder is markedly distended with anechoic contents. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.

**IMAGING PERFORMED BY**

Dr. Tam Mengine

**Gastrointestinal**

The stomach is distended with normal ingesta. The gastric wall is 5.0 mm with normal deviations due to rugal folds, and exhibits appropriate wall layering. The pylorus is of normal appearance.

**HOSPITAL NAME**

Stoney Creek VH

The visualized portions of the duodenum, jejunum, and ileum are of normal thickness with intact wall layering that exhibits the appropriate 1:3 muscularis to mucosa ratio. The duodenal wall measures 5.6 mm. The jejunal wall measures up to 4.3 mm. Intestinal motility appears normal.

**REFERRING VET**

Dr. Tam Mengine

The visible portions of the colon are of normal thickness, up to 1.6 mm, with intact wall layering. The ileocecal junction is visualized and appears normal.

**INVOICE**

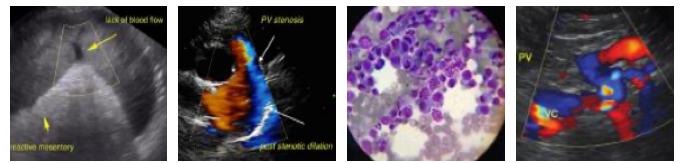
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**Pancreas**

The areas of the limbs and body of the pancreas are isoechoic to the surrounding mesenteric fat, with normal capsular appearance. There is no evidence of peripancreatic inflammation. The pancreatic duct appears normal.

**DATE**

3.30.23



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## Free Abdomen

There is no evidence of free fluid within the peritoneal cavity. The omentum and intra-abdominal fat are of appropriate echogenicity. Enlarged abdominal lymph nodes are not observed. The aortic trifurcation has normal blood flow with no evidence of thrombosis. There are images included of a 3.0 x 1.0 cm subcutaneous, cavitated mass, that is identified as a right-sided mammary mass.

## ULTRASONOGRAPHIC FINDINGS

### Primary Findings

- Splenic nodules with capsular expansion
- Hepatic remodeling
- Cavitated mammary mass

### Secondary Findings

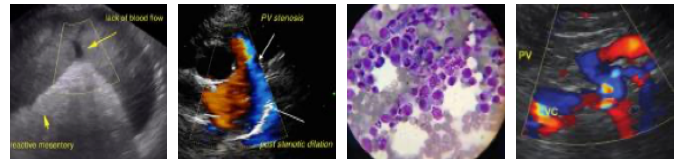
- Chronic renal changes

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The nodules in the spleen are concerning for neoplasia disease. The appearance of the liver may represent chronic remodeling change, but the possibility of infiltrative neoplasia cannot be ruled out. Thus, fine-needle aspirate of both organs is recommended to rule out the possibility of neoplasia. Additional recommendations include three-view chest radiographs and fine-needle aspirate cytology of the mammary mass (if not already performed).

The changes in the kidneys are consistent with chronic renal disease. Findings should be correlated with laboratory values, IRIS staging and clinical signs.





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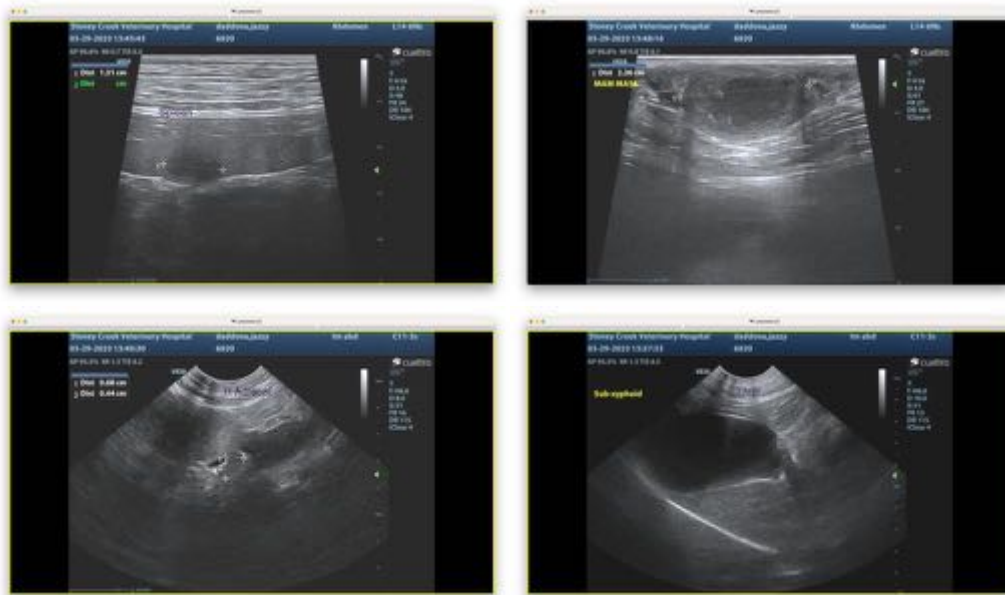
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Tam Mengine, DVM, DABVP (canine/feline practice) info@SonoPath.com