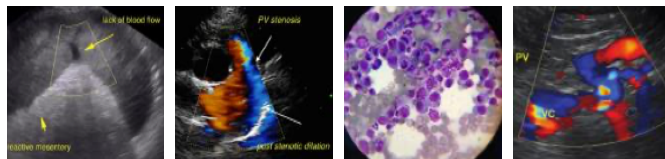


PATIENT	PRESENTING CLINICAL SIGNS
Guadalupe Torres	History: Patient presents for screening of abdomen for any signs of neoplasia after 2 mast cell tumors were confirmed on the left hind leg. Current meds: Temaril-P
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System The urinary 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	The visualized portion of the left and right kidneys are of normal size and shape and exhibit appropriate corticomedullary differentiation with a normal 1:3 cortex to medulla ratio. There is no evidence of nephrolithiasis, mineralization, pyelectasia, cystic change or hydronephrosis. The proximal ureters are not visible (normal). The left kidney is 5.2 cm in length. The right kidney is 5.8 cm in length.
SEX	
Female Spayed	
AGE	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 5.9 mm at the cranial pole and 8.6 mm at the caudal pole. The right adrenal gland height is 6.6 mm at the cranial pole and 5.5 mm at the caudal pole.
6 years	
WEIGHT	Spleen The spleen is of appropriate size and has a normal, homogenous parenchyma with a smooth, continuous capsular surface. The splenic vasculature is normal with no evidence of congestion or thrombosis, and blood flow through the splenic hilus appears normal.
NP	
INTERPRETED BY	Liver The liver is of appropriate size and shape, with sharp borders and a mildly coarse parenchymal echotexture that is hypoechoic to the spleen. The portal and hepatic vasculature are of normal size and appearance with no evidence of congestion or thrombosis.
Tam Mengine, DVM, DABVP (canine/feline practice)	
IMAGING PERFORMED BY	The gallbladder is moderately distended with anechoic contents. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.
Kelly Vazquez	
HOSPITAL NAME	Gastrointestinal The stomach is empty. The gastric wall is 4.6 mm with normal deviations due to rugal folds and exhibits appropriate wall layering. The pylorus is of normal appearance.
Animal Paradise Hospital	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 4.4 mm. The jejunal wall measures up to 3.8 mm. Intestinal motility appears normal.
REFERRING VET	The visible portions of the colon are of normal thickness, up to 1.8 mm, with intact wall layering. The ileocecal junction is visualized and appears normal.
Dr. ElShafie	
INVOICE	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.
12722	
DATE	
4.7.23	



PATIENT

Guadalupe Torres

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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

Findings

- Unremarkable canine abdomen

BREED

Mixed

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is no evidence of metastatic disease present on today's ultrasound. Additional recommendations prior to surgery would include three-view chest radiographs.

SEX

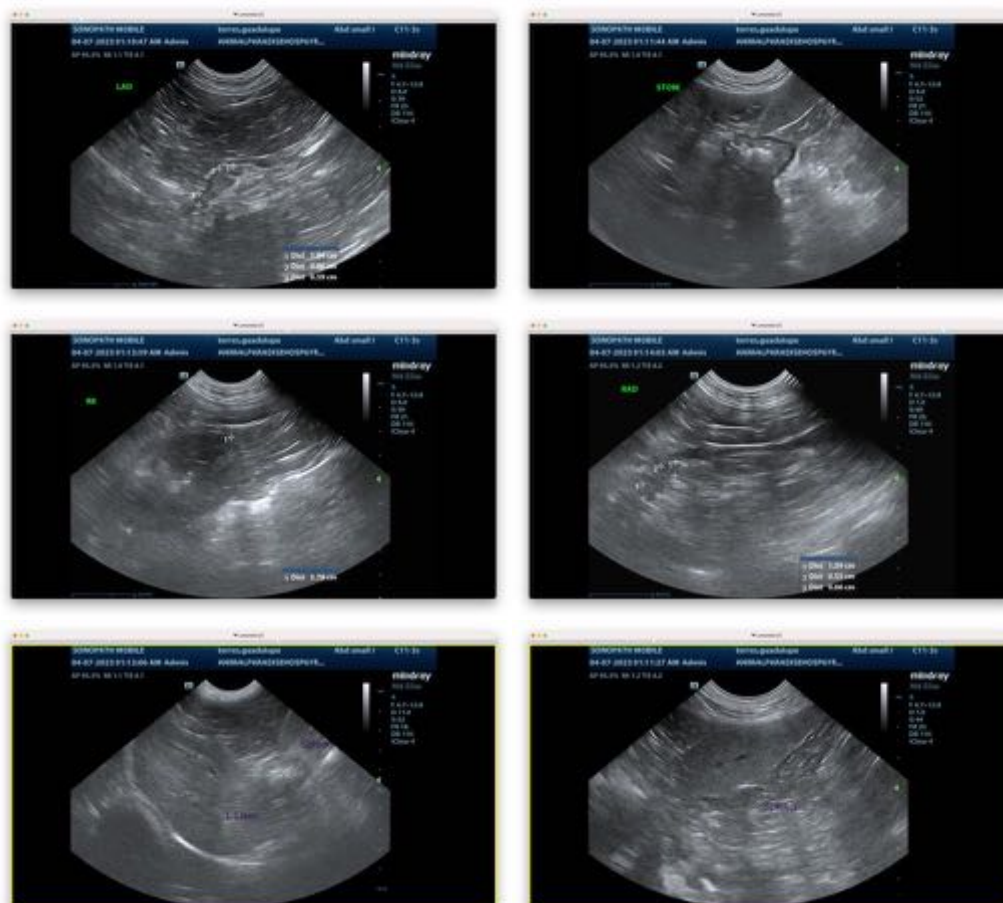
Female Spayed

AGE

6 years

WEIGHT

NP



INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Kelly Vazquez

HOSPITAL NAME

Animal
Paradise Hospital

REFERRING VET

Dr. ElShafie

INVOICE

12722

DATE

4.7.23

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