



PATIENT

Mia Ensminger

PRESENTING CLINICAL SIGNS

History: Pet has very large soft tissue sarcoma mass at her RF axilla. 3 view chest rads and ultrasound being performed prior to surgical removal attempt.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Boxer

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). The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction and appeared normal. No masses, calculi or mucosal irregularities are noted.

SEX

Spayed female

The left kidney is hyperechoic, and exhibits mildly decreased corticomedullary differentiation. There is no evidence of nephrolithiasis, mineralization, pyelectasia or hydronephrosis. The proximal ureter is not visible (normal). The left kidney measured 6.6 cm.

AGE

11.2 years

The right kidney is hyperechoic, and exhibits mildly decreased corticomedullary differentiation. There is no evidence of nephrolithiasis, mineralization, pyelectasia or hydronephrosis. The proximal ureter is not visible (normal). The right kidney measured 6.0 cm.

WEIGHT

58 lbs

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland revealed a small, hypoechoic nodule arising from the cranial pole of the left adrenal gland, measuring (1.1 cm). The caudal pole of the left adrenal gland is normal and measures 0.65 cm.

The right adrenal is identified in its normal location with normal size and shape with appropriate parenchymal echogenicity and normal phrenic vasculature. The right adrenal gland height is (0.61) cm at the cranial pole and (0.46) cm at the caudal pole.

IMAGING PERFORMED BY

Dr. Myers

Spleen

HOSPITAL NAME

Hershire AH

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.

REFERRING VET

Dr. Meyers

Liver

The liver is diffusely hyperechoic and subjectively enlarged. The portal and hepatic vasculature are of normal size and appearance with no evidence of congestion or thrombosis.

INVOICE

32300

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.

DATE

8/10/22



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Gastrointestinal

The stomach is moderately distended with normal ingesta. The gastric wall is (0.36) cm with normal deviations due to rugal folds, and exhibits appropriate wall layering. The pylorus is of normal appearance.

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Canine

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 (0.56) cm. The jejunal wall measures up to (0.4) cm. . Intestinal motility appears normal.

BREED

Boxer

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

SEX

Spayed female

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.

AGE

11.2 years

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.

WEIGHT

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ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS:

- Normal geriatric abdomen.

SECONDARY FINDINGS:

- Reactive hepatopathy.
- Chronic renal changes.
- Left adrenal nodule.

IMAGING PERFORMED BY

Dr. Myers

HOSPITAL NAME

Hershire AH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes to the kidneys and liver are mild and should be correlated with lab work and the presence of any clinical signs. If there are significant elevations in liver enzymes then screening for metabolic disease such as diabetes mellitus, hyperlipidemia or Cushing's disease would be recommended.

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The changes in the kidneys are consistent with chronic renal disease. Recommendations include:

- ❖ a CBC, chemistry panel, urinalysis, urine protein creatinine ratio and blood pressure measurement are recommended

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- ❖ urine culture should also be considered, particularly if urine sediment is active
- ❖ dietary and supportive care recommendations can be made, based on the staging of the disease as outlined in the IRIS guidelines

SPECIES

Canine

The nodule on the left adrenal gland may be indicative of adrenal hyperplasia, a benign adrenal adenoma, or an early malignancy such as pheochromocytoma or adenocarcinoma. Recommendations include:

BREED

Boxer

- ❖ blood pressure measurement to screen for pheochromocytoma
- ❖ if signs of Cushing's disease are present, then adrenal function testing (either a low-dose dex-suppression test or ACTH stimulation test) is recommended
- ❖ monitoring the nodule for changes in size or appearance, via serial ultrasounds at 6-8 week intervals

SEX

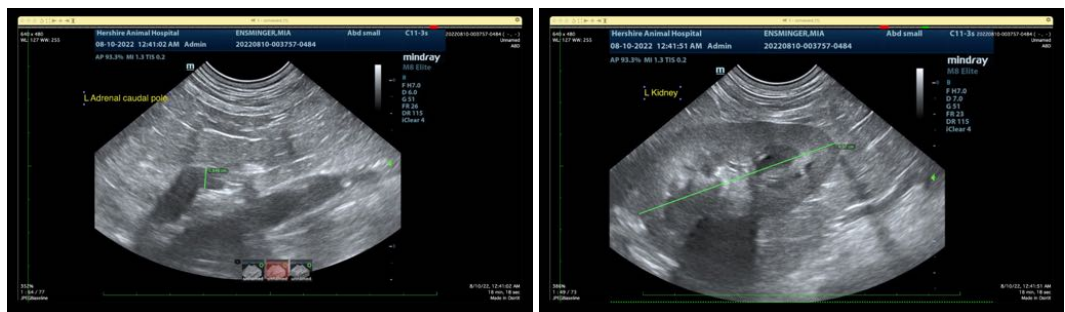
Spayed female

AGE

11.2 years

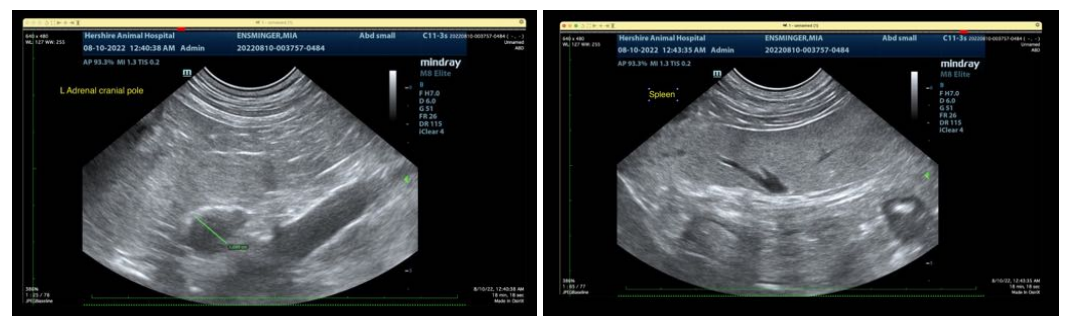
WEIGHT

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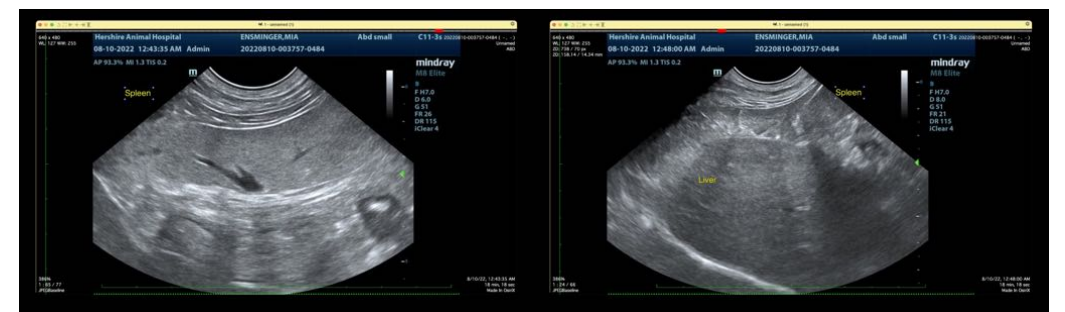


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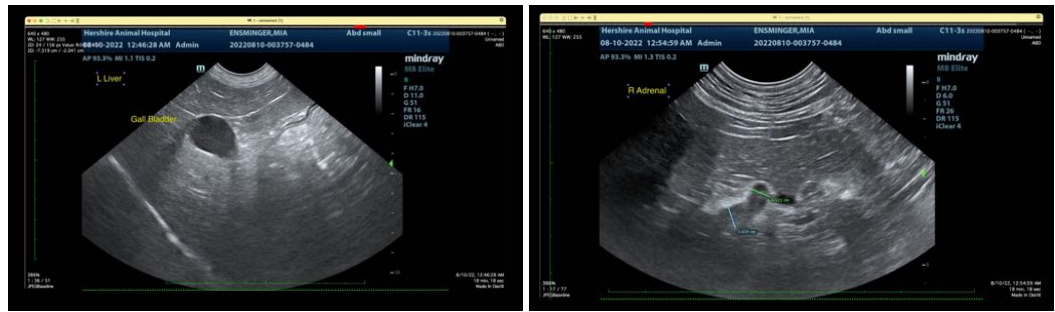
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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