



PATIENT

Jake McCrosson

PRESENTING CLINICAL SIGNS

History: Three week history of intermittent inappetence and lethargy. CBC / Chem unremarkable except Hct 33% (regenerative), ALT 187. PCV / TS of abdominal fluid = 26%/ 6.5

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is minimally 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.

BREED

Labrador Retriever

SEX

Neutered male

The prostate is normal.

AGE

9.9 years

Both kidneys are hyperechoic, and exhibit moderately decreased cortico-medullary differentiation. There is no evidence of nephrolithiasis, mineralization, pyelectasia or hydronephrosis. The proximal ureter is not visible (normal). The left kidney measured 6.7 cm. The right kidney measured 6.3 cm.

WEIGHT

71 lbs

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 (7.2) mm at the caudal pole. The right adrenal gland height is (4.9) mm at the cranial pole and (5.7) mm at the caudal pole.

INTERPRETED BY

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

Spleen

The spleen is of appropriate size and has a normal, homogenous parenchyma with a smooth, continuous capsular surface with the exception of a heteroechoic mass that measured 3.3 x 3.0 cm.

IMAGING PERFORMED BY

Dr. Mengine

Liver

The liver is subjectively enlarged with numerous, hypoechoic nodules and two larger heteroechoic masses. The one mass measured 6.7 x 3.9 cm arising from the left caudal aspect of the liver and a second 7.7 x 4.8 cm mass arising from the right caudal aspect of the liver. The borders are rounded. The portal and capsular vasculature are of normal size and appearance with no evidence of congestion or thrombosis.

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Dr. Mengine

The gallbladder is moderately distended with anechoic contents and a small amount of echogenic sludge. The wall was thin and continuous with no focal lesions. The cystic and common bile ducts are normal / not visible.

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Gastrointestinal

The stomach is empty. The gastric wall is (0.44) cm with normal deviations due to rugal folds, and exhibits appropriate wall layering. The pylorus is of normal appearance.

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8/3/22



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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 (0.49) cm. The jejunal wall measures up to (0.29) cm. . Intestinal motility appears normal.

SPECIES

Canine

The visible portions of the colon are of normal thickness, up to (0.9) mm, with intact wall layering. The ileocecal junction is visualized and appears normal.

BREED

Labrador Retriever

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.

SEX

Neutered male

Free Abdomen

There is a moderate amount of anechoic free fluid within the peritoneal cavity. The omentum and intra-abdominal fat are diffusely hyperechoic. Enlarged abdominal lymph nodes are not observed. The aortic trifurcation has normal blood flow with no evidence of thrombosis.

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ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS:

- 3.0 cm heteroechoic splenic mass.
- Multiple heteroechoic hepatic masses.
- Moderate amount of free fluid.

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SECONDARY FINDINGS:

- Chronic renal changes.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The splenic and hepatic masses are concerning for hemangiosarcoma or other malignancy. Recommendations include three view chest radiographs, aspiration of the free fluid for analysis, and FNA of the masses could be considered to assist with diagnosis. Splenectomy could be considered, but it is unclear whether the changes to the liver represent metastasis, in which case the benefits of splenectomy would be short lived. If splenectomy is not elected then treatment with Yunnan Baiyao and l'm-Yunity supplements could be considered.

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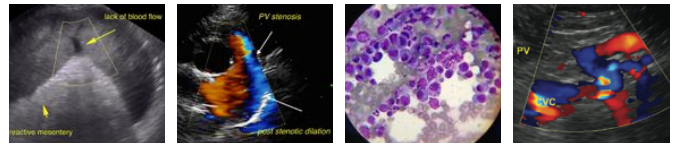
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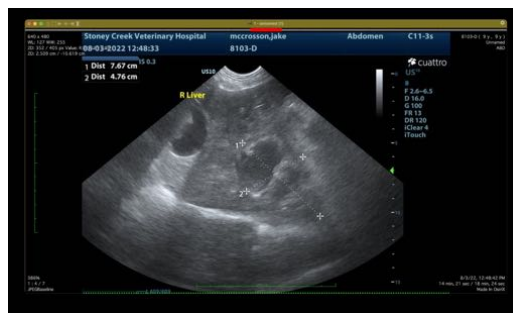
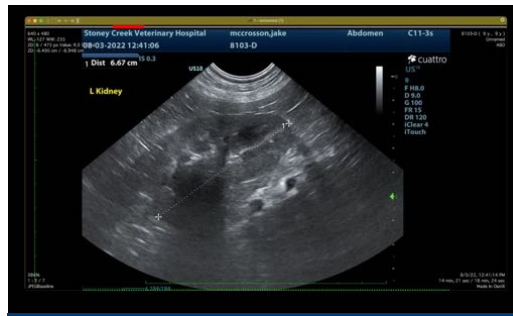
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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