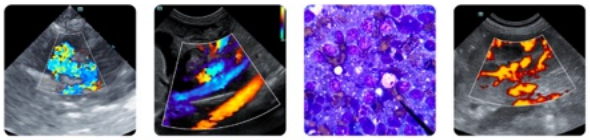


PATIENT

Ada Phillips

SPECIES

Canine

BREED

German Shepherd Mix

SEX

Spayed female

AGE

8 years

WEIGHT

38.8 kg

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Danielle RVT

HOSPITAL NAME

Orchard VC

REFERRING VET

Dr. Gudelot

INVOICE

73424

DATE

3/11/26

PRESENTING CLINICAL SIGNS

- Monitoring splenic and adrenal mass from Nov 2025
- No health changes to patient
- CBC WNL Chem mild increase BUN (12.42) and mild hypernatremia, creatinine high normal USG 1.024

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder lumen is normally distended, and the wall of the urinary bladder appears thin and smooth. The urine is anechoic. Normal appearance of the bladder neck and proximal urethra. There are no calculi and no evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size: 5.67×3.34 cm, and the thickness of the cortex is 0.59 cm in the sagittal plane. The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephroliths, or hydronephrosis. Color Doppler shows a normal vascular pattern.

The right kidney is normal in shape and size: 5.59×3.66 cm, and the thickness of the cortex is 0.63 cm in the sagittal plane. The cortex is isoechoic compared to the liver parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephroliths, or hydronephrosis. Color Doppler shows a normal vascular pattern.

Adrenal Glands

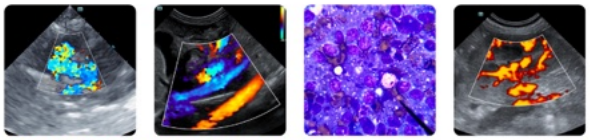
The left adrenal gland demonstrates a nodular lesion arising from the cranial pole measuring 2.01×1.65 cm (maximum measurements from three images). The lesion is hyperechoic, predominantly homogeneous, and well marginated, and does not appear to invade adjacent tissues. The caudal pole measures 0.69 cm and appears normal.

The right adrenal gland measures 0.59 cm at the cranial pole and 0.58 cm at the caudal pole. A small hyperechoic focus that does not deform the adrenal capsule is noted.

Spleen

Splenic thickness is 2.12 cm. A heterogeneous splenic nodule measuring 2.09×2.44 cm (maximum measurements from three images) is identified. The lesion appears avascular on color Doppler and does not deform the splenic capsule.

The remaining splenic parenchyma appears mildly heterogeneous with scattered, slightly hyperechoic areas, which may represent nodular hyperplasia.



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Liver

The liver is subjectively normal in size, with sharp edges and a regular contour. The liver parenchyma appears uniform and isoechoic compared to the falciform fat, with a normal echotexture. No hepatic lymphadenopathy is observed.

The gallbladder lumen is normally distended. The wall is thin and the contents are primarily anechoic. No dilation of the cystic duct or common bile duct is observed.

Gastrointestinal

The stomach is empty and folded, with mural thickness 3.76 mm and preserved wall layering. The pylorus measures 4.98 mm.

The duodenum measures 4.79 mm. The jejunum measures 3.65 mm, with preserved wall layering. The ileum measures 2.53 mm, also with preserved wall layering.

The ileocecal junction was not visualized. No signs of inflammation, ileus, or foreign material are identified.

The colon measures 1.31 mm, with formed feces present in the descending segment.

Pancreas

The evaluated pancreatic areas do not show evidence of overt inflammation or neoplastic disease.

Peritoneal Cavity

No sonographic evidence of abdominal effusion, peritonitis, or lymphadenomegaly is identified. The lymph node at the iliac trifurcation appears normal.

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS

- Left adrenal nodular lesion (cranial pole) measuring approximately 2.01×1.65 cm.
- Splenic heterogeneous nodule measuring approximately 2.09×2.44 cm.

SECONDARY FINDINGS

- Mild diffuse splenic heterogeneity compatible with nodular hyperplasia.
- Small hyperechoic focus within the right adrenal gland.

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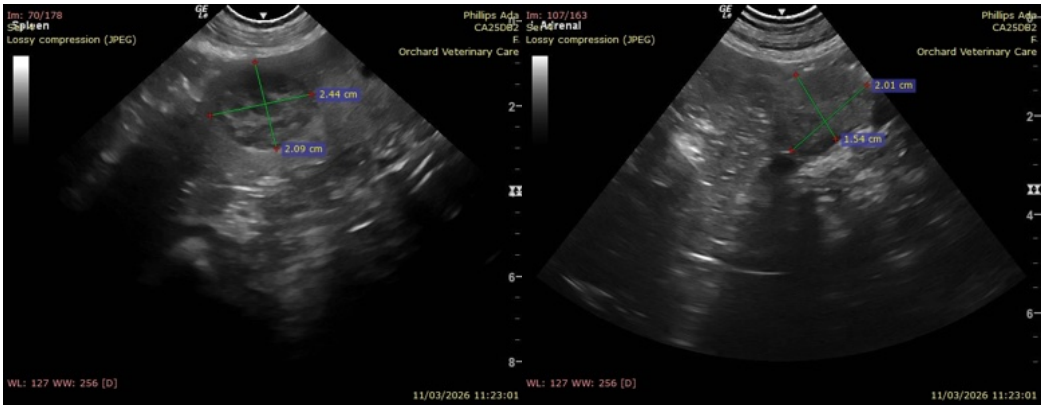
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Compared with the abdominal ultrasound examination from November 2025, the left adrenal nodular lesion measures 2.01×1.65 cm on the current study. The previously reported measurement was approximately 1.3 cm. Given that prior measurements may have been obtained in a different imaging plane, the lesion appears overall similar in size with only mild interval increase in maximal transverse dimension (from 1.3 to 1.65 cm). The lesion remains well marginated and does not demonstrate ultrasonographic features of local invasion. Compared with the previous examination from November 2025, the lesion appears overall similar in size with only mild variation in measurements. It should be noted that interobserver variability and differences in imaging plane can influence adrenal measurements, and therefore small differences between studies should be interpreted cautiously. Multiple measurements were obtained during the current examination, with the largest value reported, although slightly smaller measurements were also recorded.

The splenic nodule has also mildly increased in size from approximately 1.3×2.0 cm to 2.09×2.44 cm. Given the interval between examinations, the degree of enlargement is considered relatively mild.

Recommendations

- Periodic ultrasonographic monitoring is recommended to assess stability of both the adrenal lesion and the splenic nodule.
- Fine needle aspiration of the splenic nodule may be considered if further characterization is desired, although many splenic nodules in dogs are benign and cytology may occasionally be nondiagnostic.



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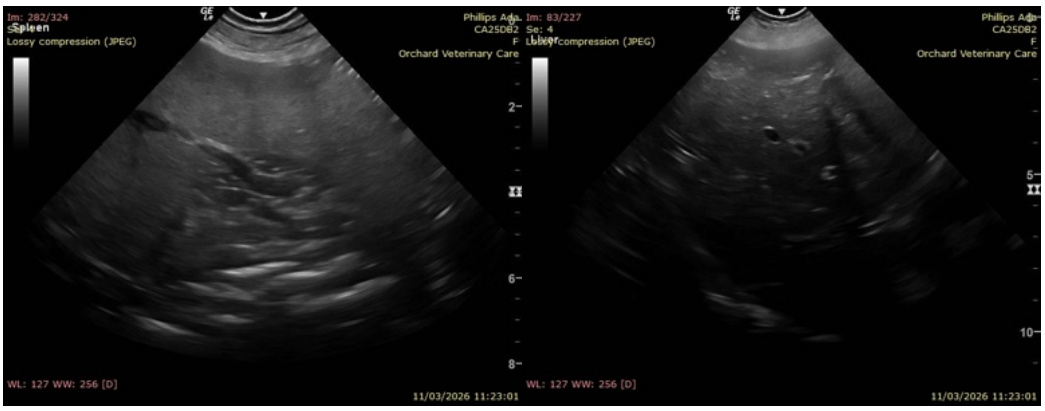

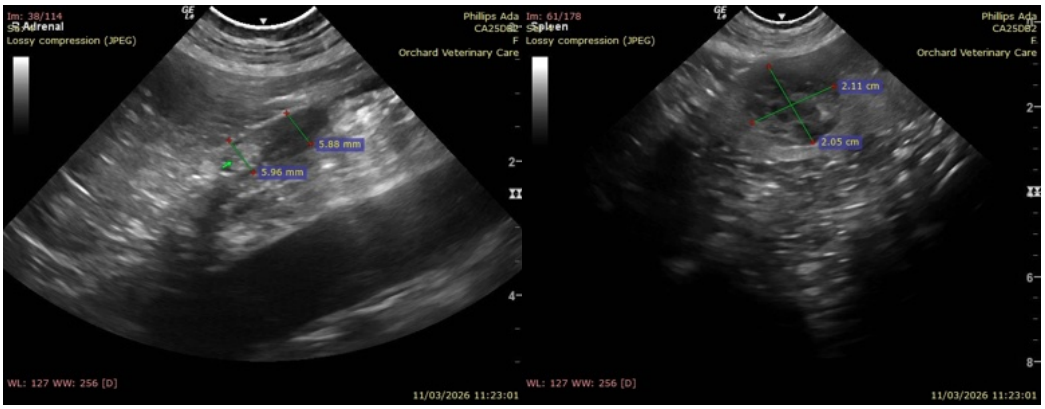

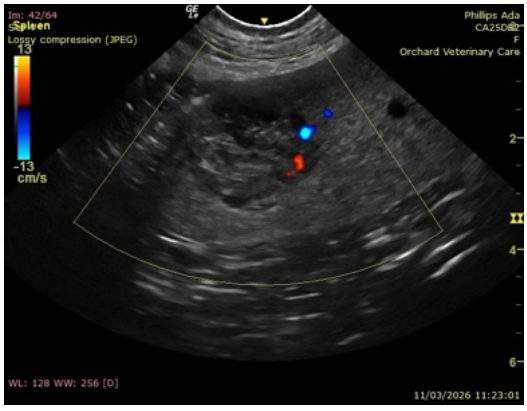

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

MV Esp Ultrasound in Domestic and Wild Animals

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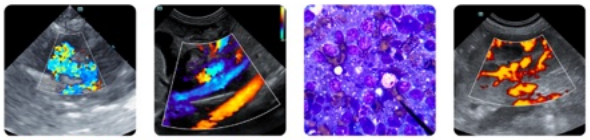

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Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

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