



**PATIENT PRESENTING CLINICAL SIGNS**

Harley Barber History: Abdominal mass noted on rads. Sent home with Gabapentin for 10 days.  
Abnormal PE/Chem/CBC/UA Results: Anemia and monocytosis - see attached lab work.

**SPECIES** Additional history: Hematocrit is 35% and is regenerative. Mild leucocytosis with a monocytosis.  
Slightly low BUN. The rest of the chemistry is unremarkable.

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED** *Urinary System*

Alaskan Malamute

The urinary bladder is mildly to moderately distended with anechoic urine. The wall is of appropriate thickness for the level of repletion. The mucosal surface in the region of the apex is slightly irregular. cystic calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

**SEX**

Male Neutered

The prostate is difficult to visualize in its entirety due to its pelvic location but appears slightly prominent in size with homogenous parenchyma.

**AGE**

12 years

The left kidney is normal size (5.56 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

**WEIGHT**

42.6kg

The right kidney is normal size (7.30 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

**INTERPRETED BY**

Andrea Nicastro, DVM,  
Diplomate ACVIM (*Small  
Animal Internal Medicine*)

**Adrenal Glands**

The left adrenal gland is normal size (0.68 cm at cranial pole) (0.61 cm at caudal pole) (2.07 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

**IMAGING PERFORMED BY**

Crystal Hill

The right adrenal gland is normal size (1.93 cm at cranial pole) (0.95 cm at caudal pole) (2.32 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

**HOSPITAL NAME**

Southside Animal Clinic

**Spleen**

The spleen is enlarged with a >9cm irregular heterogenous cavitated mass arising from the medial aspect. The mesentery effacing the serosal surface in this region is hyperechoic. In the remainder of the spleen, the peripheral margins are irregular, and the parenchyma is mottled in appearance. Splenic vasculature appears normal with no evidence of thrombosis.

**REFERRING VET**

Dr. Lucas

**Liver**

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.

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The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are



**PATIENT**

anechoic. The cystic and common bile ducts are normal.

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**Gastrointestinal**

The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is not dilated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive or overt infiltrative disease is noted.

**Pancreas**

A portion of the pancreas is obscured by the splenic mass. In the visualized portions, no obvious pathology is observed.

**Free Abdomen**

A moderate amount of echogenic free fluid is present within the abdomen. The abdominal lymph nodes are normal/not visible.

**Other**

A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings**

- Splenic mass. Neoplasia (i.e., hemangiosarcoma, hemangioma), is considered likely. Regional peritonitis is present.
- Suspected hemoabdomen (would need to be confirmed by comparing an abdominal fluid PCV to a peripheral PCV).

**Secondary Findings**

- Non-specific age-related renal changes
- Questionable prostatomegaly

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases. If there is no evidence of pulmonary metastatic disease, a splenectomy with submission of the spleen for histopathology can be considered. A liver biopsy should also be obtained at the time of surgery to assess for micro metastatic disease. Evaluation of the prostate is recommended at the time of surgery to assess for prostatomegaly.



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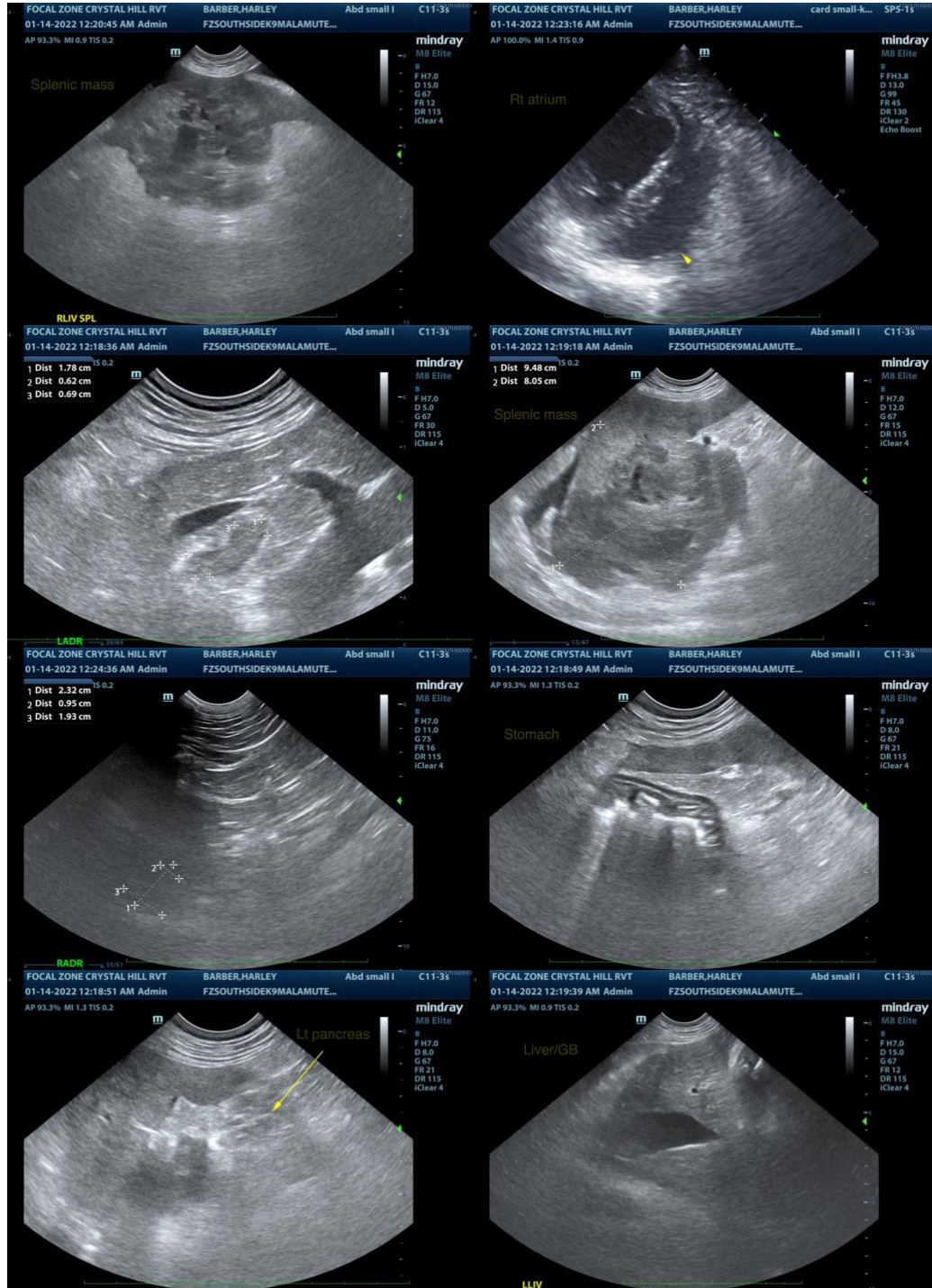
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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**Andrea Nicastro, DVM, Diplomate DACVIM (Small Animal Internal Medicine)**  
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