

## PRESENTING CLINICAL SIGNS

### PATIENT

Pupper Lamanna

History: Possible seizure this morning- owner just saw pet on his back with legs moving and then got up. Hx of adrenal tumor (last ultrasound 6.13.20). Otherwise app is slightly decreased but pet does get pucky and stools a little soft.

### SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Abd felt tense when palpated but almost feels like on the left side there's a bulge in one area under the skin. Last bw ALP 1240, ALT 200, Alb 4, Na/K 24, cortisol 1.3, normal stim.

### BREED

Jack Russell

Additional History: Three-view thoracic radiographs are unremarkable. Mild hepatomegaly on abdominal films. Increased opacity in the region of the kidneys on the lateral views.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### SEX

Male Neutered

### Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

### AGE

15 years

The prostate is normal in size (0.91 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

### WEIGHT

25.9 lb

The left kidney is normal size (3.68 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 hydronephrosis.

### INTERPRETED BY

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

The right kidney is normal size (6.50 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

### Adrenal Glands

The left adrenal gland is severely enlarged (2.42 cm at cranial pole) (2.65 cm at caudal pole) (4.34 cm in length); with an irregular shape and a mass effect. The parenchyma is slightly heterogenous. There is loss of glandular detail. There is questionable vascular invasion medially.

### IMAGING PERFORMED BY

Dr. Scott

The right adrenal gland is enlarged (1.85 cm at cranial pole) (1.79 cm at caudal pole) (4.19 cm in length); with an irregular shape and a mass effect. The parenchyma is diffusely and mildly heterogenous. There is loss of glandular detail. It is unclear whether there is vascular invasion.

### HOSPITAL NAME

Ho Ho Kus  
Veterinary Hospital

### Spleen

The spleen is normal in size (1.33 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. A 0.83 cm heterogenous nodule is observed at the caudal aspect. The lesion does not appear to cause capsular expansion. Splenic vasculature is normal.

### REFERRING VET

Dr. Scott

### Liver

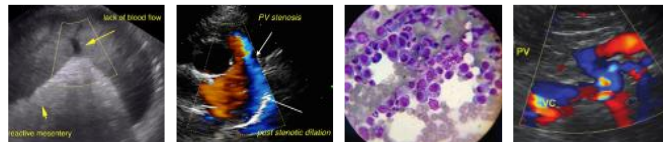
The liver is subjectively prominent in size with slightly irregular peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat and diffusely mottled in appearance. No distinct focal lesions are observed. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

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### DATE

1/17/22



**PATIENT**

Pupper Lamanna

The gall bladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal/not seen.

**SPECIES**

Canine

**Gastrointestinal**

The gastric lumen is mildly distended with ingesta. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The small intestinal lumen is segmentally dilated with chyme. 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.

**BREED**

Jack Russell

**Pancreas**

The right limb of the pancreas is enlarged with slightly irregular peripheral contours and a questionable mass effect. The parenchyma is hypoechoic relative to surrounding omental fat and mottled in appearance. The left limb is largely isoechoic relative to surrounding omental fat. The pancreatic duct is not overtly dilated (0.23 cm in diameter). The mesentery in the region of the right limb is hyperechoic. See also *Other* category.

**SEX**

Male Neutered

**AGE**

15 years

**Free Abdomen**

The mesentery in the cranial abdomen is hyperechoic. Trace free fluid is suspected.

**WEIGHT**

25.9 lb

**Lymph Nodes**

(See "Other" category )

**Other**

A 2.02 x 1.61 cm hypoechoic nodule/mass is observed in the cranial abdomen, in the region of the right limb of the pancreas/portal hilus. Surrounding mesentery is hyperechoic.

A >10 cm heterogenous mass effect is observed in the region of the mid- to caudal abdomen. The mass has cavitated areas and areas with fat opacities.

**INTERPRETED BY**

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

**ULTRASONOGRAPHIC FINDINGS**

**IMAGING  
PERFORMED BY**

Dr. Scott

**Primary Findings**

- Nodule/mass in the cranial abdomen, in the region of the portal hilus/right limb of the pancreas, the origin of which is unclear. It may be arising from the pancreas, liver, mesentery, lymph node, adrenal gland, other. Regional peritonitis is present. There also appears to be concurrent pancreatitis +/- a mass effect in the right limb of the pancreas.
- Left adrenal mass, with questionable vascular invasion. Neoplasia (i.e., adenocarcinoma, pheochromocytoma), is suspected, with a lower possibility of benign pathology.
- Right adrenomegaly. Differentials include neoplasia, nodular hyperplasia, other.
- The splenic nodule may represent a metastatic lesion. Alternatively, benign pathology is possible.

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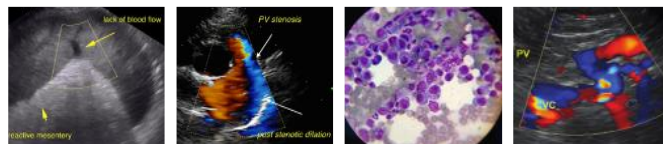
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## PATIENT

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- Mid- to caudal-abdominal mass effect. The mass is thought to be intra-abdominal. However, a compressive subcutaneous mass cannot be completely excluded, as the body wall is difficult to discern. Differentials include necrotic lipoma or liposarcoma, other.

## SPECIES

Canine

- Minor bilateral age-related renal changes.
- The hepatic parenchymal changes are nonspecific and could be associated with benign age-related change. Alternatively, metastatic disease is possible.

## BREED

Jack Russell

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## SEX

Male Neutered

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- To better differentiate the abdominal pathology, and abdominal CT scan is recommended. Depending on the results, an abdominal exploratory may be warranted. Unfortunately, however, the prognosis is considered guarded for this patient.
- Given the recent seizure, a baseline blood pressure measure and a full neurologic evaluation is recommended.

## AGE

15 years

## WEIGHT

25.9 lb

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## HOSPITAL NAME

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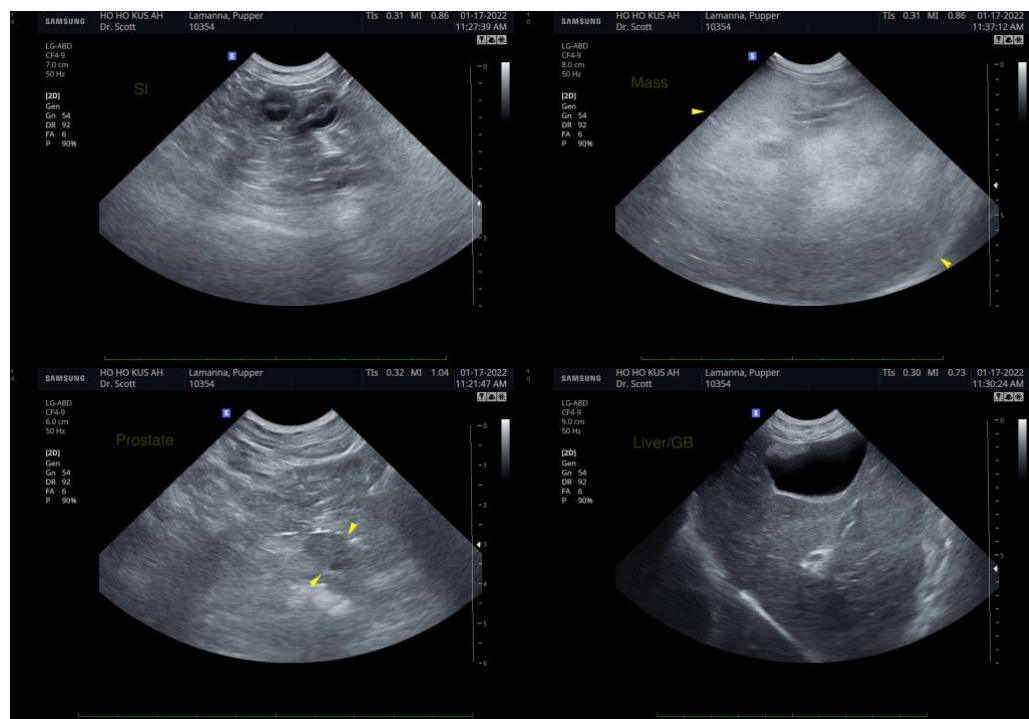
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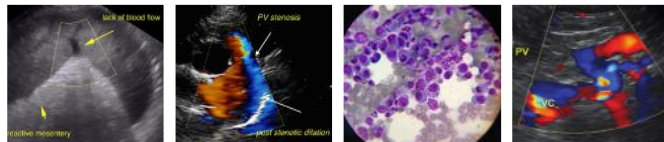
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**SPECIES**

Canine

**BREED**

Jack Russell

**SEX**

Male Neutered

**AGE**

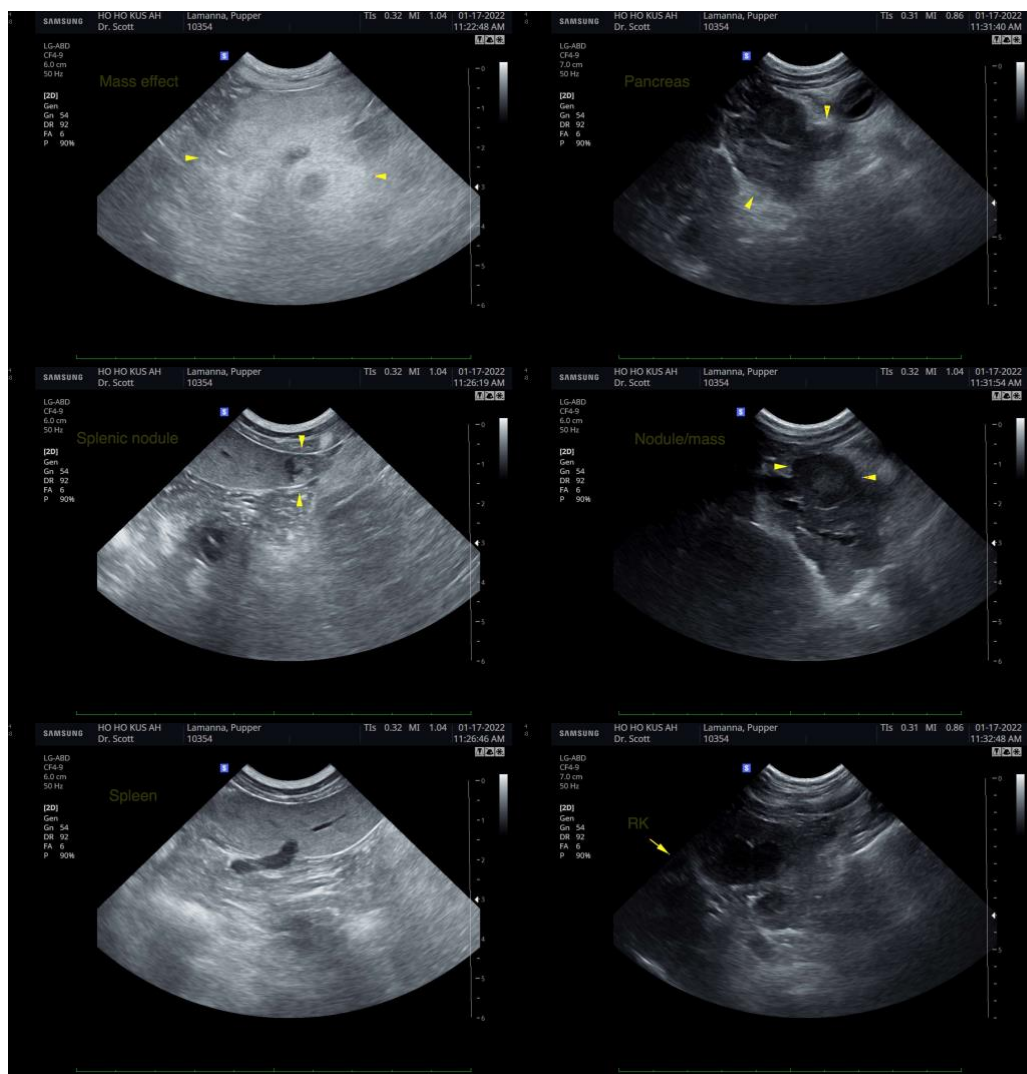
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**WEIGHT**

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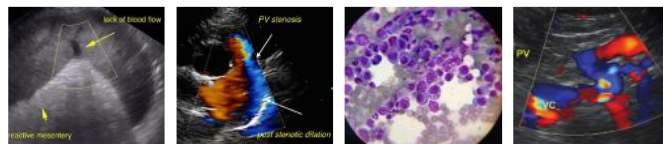
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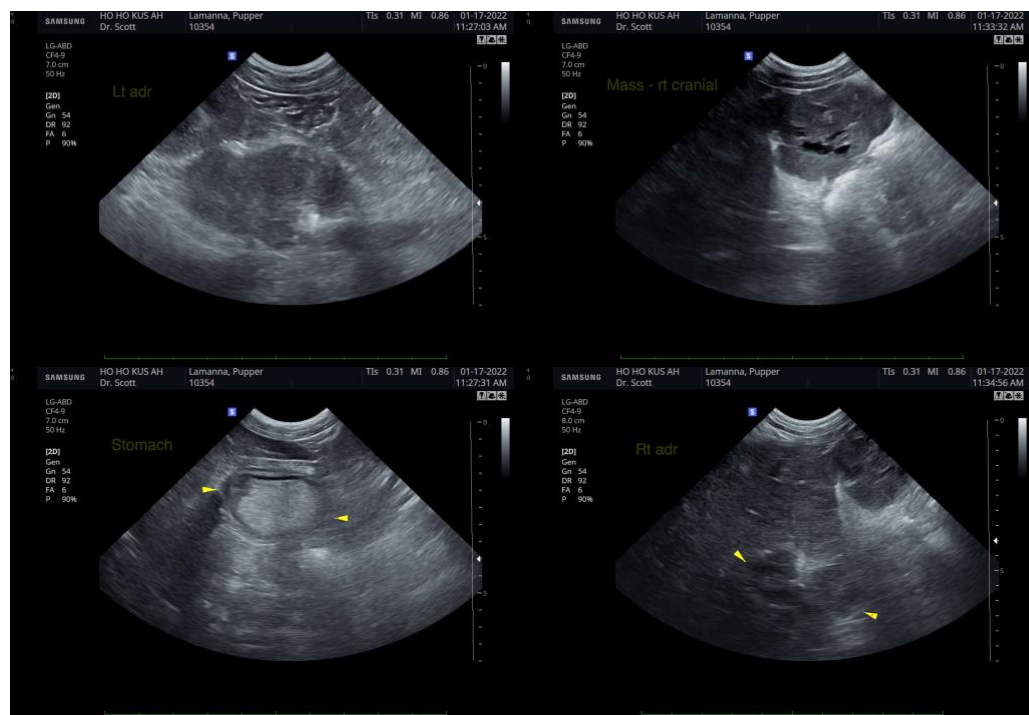
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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