



PATIENT PRESENTING CLINICAL SIGNS

Kobe Bressack
History: persistent inappetence and weight loss- enlarged peripheral LNs- recently dx UTI- Gave dex/torb
Abnormal PE/Chem/CBC/UA Results: Grossly enlarged PLN

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine
Urinary System

BREED
Aussie Doodle
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.

SEX
Female, spayed
The left kidney is normal size (5.29 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

AGE
2 Years
The right kidney is normal size (5.48 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

WEIGHT
43 Pounds
Adrenal Glands
The left adrenal gland is normal size (0.37 cm at cranial pole) (0.41 cm at caudal pole) (2.55 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.

INTERPRETED BY

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

The right adrenal gland is normal size (0.58 cm at cranial pole) (0.52 cm at caudal pole) (2.57 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

Spleen

Loetitia Saint-Jacques, RVT

The spleen is normal in size (1.56 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. A 0.23 cm ill-defined hypoechoic nodule/area is observed approximately mid-spleen. Splenic vasculature is normal.

HOSPITAL NAME

Donner Truckee VH

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. The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

REFERRING VET

Dr. Vannini

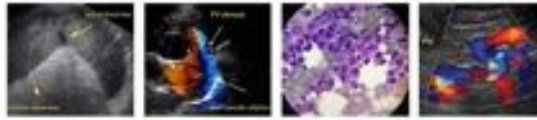
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DATE

Gastrointestinal

1/3/22



PATIENT

Kobe Bressack

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is gas distended. 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 disease is noted.

SPECIES

Canine

Pancreas

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

BREED

Aussie Doodle

Free Abdomen

SEX

Female, spayed

There is no evidence of free fluid. Several enlarged, irregular, hypoechoic lymph nodes are observed in the mid to caudal abdominal cavity, the largest measuring 3.36 cm in length.

AGE

2 Years

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- The abdominal lymphadenopathy, in conjunction with the peripheral lymphadenopathy, is most concerning for infiltrative neoplasia (i.e., lymphoma). However, pyogranulomatous lymphadenitis cannot be completely excluded.

WEIGHT

43 Pounds

Secondary Findings:

- The hypoechoic splenic nodule trends toward the benign (i.e., focus of lymphoid hyperplasia or extramedullary hematopoiesis) with low potential for emerging neoplasia.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

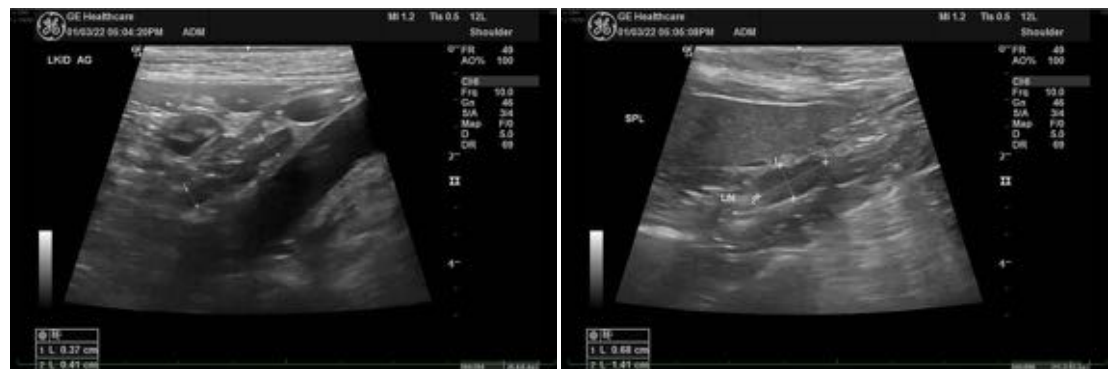
- Three-view thoracic radiographs are recommended to assess cardiopulmonary status.
- If cytology of the peripheral lymph nodes reveals lymphoma, consultation with a board-certified oncologist is recommended.

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HOSPITAL NAME

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SPECIES

Canine

BREED

Aussie Doodle

SEX

Female, spayed

AGE

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WEIGHT

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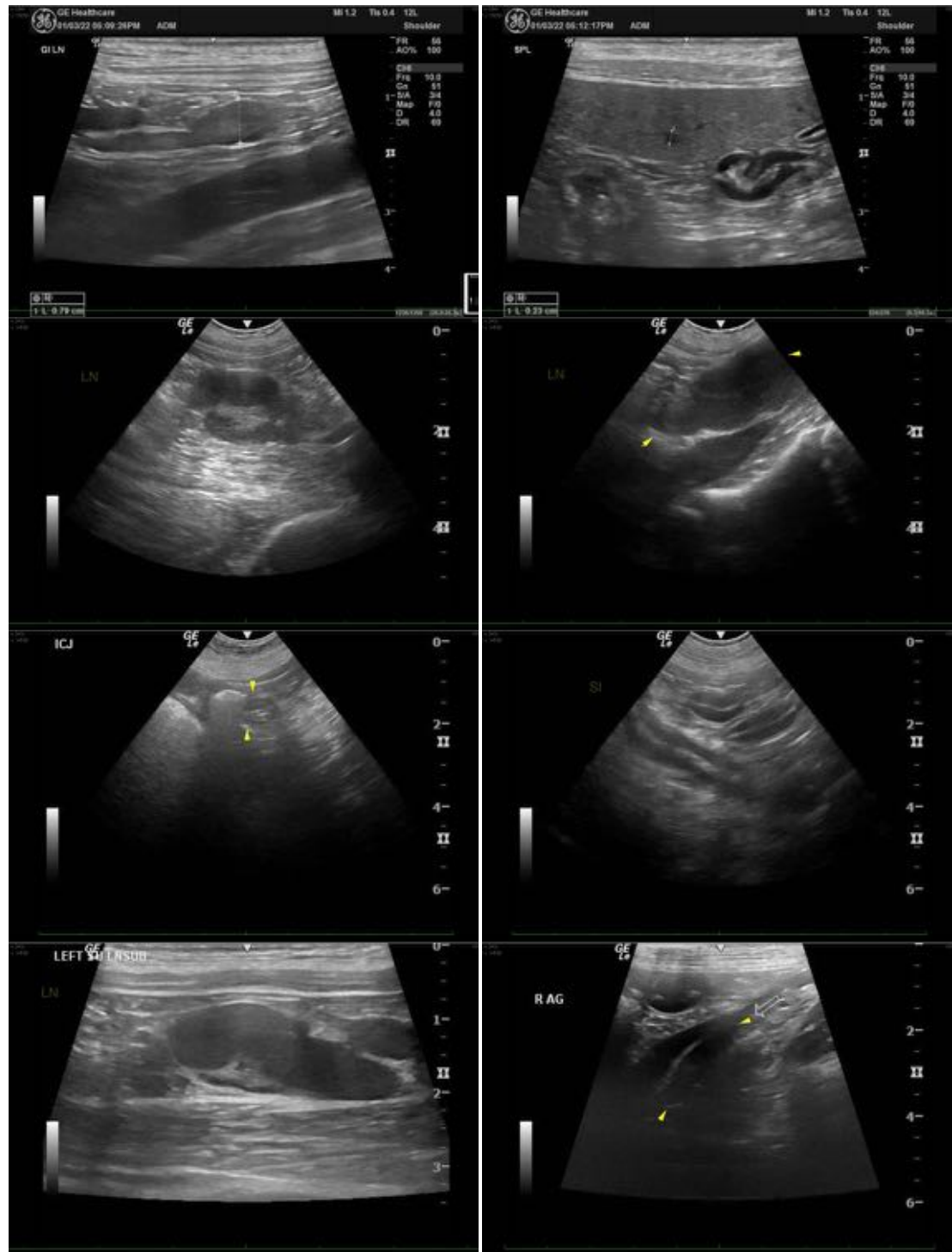
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PATIENT

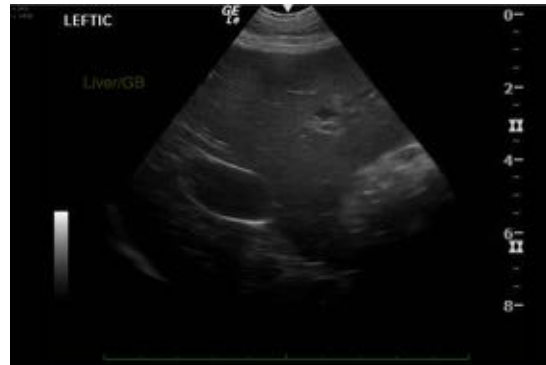
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SEX

Female, spayed

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ADDENDUM

Brief evaluation of the thorax reveals a 1.82 cm hypochoic rounded mediastinal lymph node. Pleural effusion is seen.

In one still image, the left thyroid lobe measures 1.12 x 0.32 cm in the sagittal plane. A 0.25 cm parathyroid gland is visualized within this lobe.

A 4.38 x 4.28 cm irregular, rounded, hypochoic to heterogeneous lymph node with ill-defined cavitated areas is observed in the left submandibular region. A 2.46 x 1.10 cm irregular hypochoic lymph node is observed in the right submandibular region. Anechoic areas are also seen within this node.

ULTRASONOGRAPHIC FINDINGS

Submandibular and mediastinal lymphadenopathy. Neoplasia (I.e., lymphoma) is suspected with a lower possibility of pyogranulomatous lymphadenitis.

Pleural effusion.

RECOMMENDATIONS

If cytologic lymph node evaluation is inconclusive, consider PARR on lymph node samples to further assess for lymphoma. Alternatively, surgical biopsies can be considered.

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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