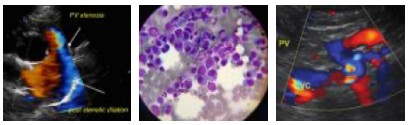
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

DATE

10/25/2021

PATIENT

Sady Brinn

SPECIES

Canine

BREED

Labrador retriever

SEX

Female, spayed

AGE

11/20/2007

WEIGHT

76 lbs.

INTERPRETED BY

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

HOSPITAL NAME

Stay Pet Veterinary

REFERRING VET

Dr. Klimovitz

INVOICE

12411

PRESENTING CLINICAL SIGNS

History: acute onset anorexia, still drinking water. Lethargy. No vomiting/diarrhea. Duration 3 days.

Current Medications: Meloxicam x 3 yrs. (OA chronic), Levothyroxine x 4 years - controlled.
Lab Results: Mild neutrophilia. Mild anemia, Hematocrit 33. Mini chem and T4 normal.
Date of Previous IntraPet Ultrasound: 12-9-20, 6-27-18, and 10-3-16.
Sedation: not needed
Stat Report: not requested

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is distended. A scant amount of suspended echogenic debris is observed within the lumen. 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.

The left kidney is normal size (6.14 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.

The right kidney is normal size (6.26 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 hydroureter.

Adrenal Glands

The left adrenal gland is enlarged at the cranial pole and normal in size at the caudal pole (1.21 cm at cranial pole) (0.73 cm at caudal pole) (2.85 cm in length). A 1.08 x 0.67 cm hyperechoic to slightly heterogeneous irregular nodule is observed at the cranial aspect. The glandular echogenicity and detail at the caudal aspect are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.71 cm at cranial pole) (0.74 cm at caudal pole) (2.11 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.

Spleen

The spleen is normal in size with a normal capsular contour. The parenchyma is subtly mottled in appearance. No focal lesions are observed. Splenic vasculature is normal.

Liver

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and slightly mottled in appearance. No distinct focal lesions are observed. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are mostly anechoic. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is minimally distended with ingesta. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is not dilated. Most of the small intestinal segments are normal in thickness with a normal layering pattern and appropriate mural detail. Several small intestinal segments appear to be bunched in the right cranial quadrant. The ileocecal colic junction and colonic wall are

normal. The colonic lumen contains shadowing fecal material. No obstructive disease is noted. See also *Other.*

Pancreas
The right limb of the pancreas is prominent to enlarged with irregular peripheral contours. The parenchyma is hypoechoic to heterogeneous in appearance. See also *Other*.

Free Abdomen
The mesentery in the right cranial quadrant is hyperechoic. Trace free fluid is observed in this region. The abdominal lymph nodes are normal/not visible.

Other
An approximately 4 cm hypoechoic irregular mass effect is observed in the right cranial quadrant.

ULTRASONOGRAPHIC FINDINGS
Primary Findings:

- The origin of the mass effect in the right cranial quadrant is unclear but may be arising from the right limb of the pancreas, bowel, mesentery, other. There is evidence of pancreatitis/peritonitis in this region as well as adherent bowel loops.

Secondary Findings:

- Geriatric renal, hepatic and splenic changes.
- The left adrenal nodule is most consistent with nodular hyperplasia with a lower possibility of emerging neoplasia. The nodule is similar in size compared to the previous scan.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- VD and left lateral thoracic radiographs are recommended to complete the metastatic check.
- If accessible, a fine needle aspirate of the mass effect in the right cranial quadrant is recommended (if clotting status is appropriate). A 25-gauge needle should be used. If the area is not accessible and/or cytologic evaluation is inconclusive, consider an abdominal exploratory with biopsies of the abnormal tissue in this region. In the meantime, supportive care for acute pancreatitis is recommended, including fluid therapy, pain medication, gastric protectants, antiemetics +/- fresh frozen plasma.


IntraPet Imaging RBIILLC
brinn,sady
Abd small I
C11-3s
10-25-2021 10:01:42 AM Admin
STAYsbk9labsf2007
mindray
COLON


IntraPet Imaging RBIILLC
brinn,sady
Adult ABD
C6-2Gs
10-25-2021 10:05:36 AM Admin
STAYsbk9labsf2007
mindray
Spleen


IntraPet Imaging RBIILLC
brinn,sady
Adult ABD
C6-2Gs
10-25-2021 10:05:49 AM Admin
STAYsbk9labsf2007
mindray
STOM


IntraPet Imaging RBIILLC
brinn,sady
Abd small I
C11-3s
10-25-2021 10:04:24 AM Admin
STAYsbk9labsf2007
mindray
RT ADR
1 Dist 2.11 cm
2 Dist 0.74 cm
3 Dist 0.71 cm


IntraPet Imaging RBIILLC
brinn,sady
Abd small I
C11-3s
10-25-2021 09:56:32 AM Admin
STAYsbk9labsf2007
mindray
LEFT
1 Dist 2.85 cm
2 Dist 0.73 cm
3 Dist 1.28 cm


IntraPet Imaging RBIILLC
brinn,sady
Abd small I
C11-3s
10-25-2021 09:59:49 AM Admin
STAYsbk9labsf2007
mindray
RT
Free fluid

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.

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)
Andrea.nicastro@sonopath.com