



PATIENT PRESENTING CLINICAL SIGNS

Bacon Robinson History: Bacon Robinson - 12y MN lab 1y hx liver mass seen at another vet and dx benign per o. 108 abscess prev tx with amoxi 500mg bid per o and resolved. rx denamarin. prev liver values unknown. presented 3d ago v, slightly lethargic, mild icteric. recent course amox 500mg 21d completed for 108 abscess (resolved temporarily). large mass effect cr abdomen on palpation consistent with radiographs of large liver mass. o has financial concerns. AUS next step. 3d outpatient sq fluids - o reports back to normal self.

SPECIES

Canine

BREED

Abnormal PE/Chem/CBC/UA Results:

Labrador Retriever

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Neutered Male

Urinary System

The urinary bladder and visible portion of the pelvic urethra are normal for the degree of luminal distension. The urine is anechoic with no evidence of debris. Cystic calculi and discrete masses are not observed. The region of the trigone and the visible portion of the proximal urethra are normal.

AGE

12 Years

The prostate is normal in size (0.99 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

WEIGHT

80 Pounds

The left kidney presented normal size (6.83 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.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal

The right kidney presented normal size (6.33 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

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

The left adrenal gland is normal size (0.62 cm at cranial pole) (0.64 cm at caudal pole) (2.08 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

Donner Truckee VH

The right adrenal gland is normal size (0.52 cm at cranial pole) (0.60 cm at caudal pole) (2.33 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.

REFERRING VET

Dr. Vannini

Spleen

INVOICE

14271

The spleen is normal in size (1.76 cm at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

DATE

11/12/21

Liver



PATIENT

Bacon Robinson

The liver is enlarged with irregular peripheral contours. A >12.0 cm heterogeneous irregular multilobulated mass is arising from the parenchyma. The lesion causes capsular expansion. Some normal hepatic tissue is observed on the right side adjacent to the diaphragm. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

SPECIES

Canine

The gall bladder lumen is moderately distended. The wall is thin and smooth. A scant amount of suspended echogenic debris is observed within the lumen. The cystic and common bile ducts are normal.

BREED

Labrador Retriever

Gastrointestinal

SEX

Neutered Male

The gastric lumen is mildly to moderately distended with echogenic fluid. A focal area of gastric wall in the region of the lesser curvature is thickened (up to 1.56 cm) with a loss of the normal layering pattern. Within this thickened section, a 1.0 cm ulcerated area is suspected. The remaining 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.

AGE

12 Years

Pancreas

WEIGHT

80 Pounds

The pancreas is largely obscured by the large hepatic mass. In the visualized portions, no obvious pathology is seen.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal

Free Abdomen

There is no evidence of free fluid. A few prominent lymph nodes are observed in the cranial to mid abdomen, the largest measuring 1.76 cm in length.

Other

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

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

HOSPITAL NAME

Donner Truckee VH

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Large multilobulated hepatic mass. Neoplasia (i.e., adenoma, adenocarcinoma, round cell tumor) is considered likely with a lower possibility of benign pathology.
- The gastric wall thickening is concerning for infiltrative neoplasia. However, severe inflammation cannot be completely excluded.

REFERRING VET

Dr. Vannini

- Gastric ulceration in the lesser curvature of the stomach.

INVOICE

14271

Secondary Findings

DATE

11/12/21



PATIENT

Bacon Robinson

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

12 Years

WEIGHT

80 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

HOSPITAL NAME

Donner Truckee VH

REFERRING VET

Dr. Vannini

INVOICE

14271

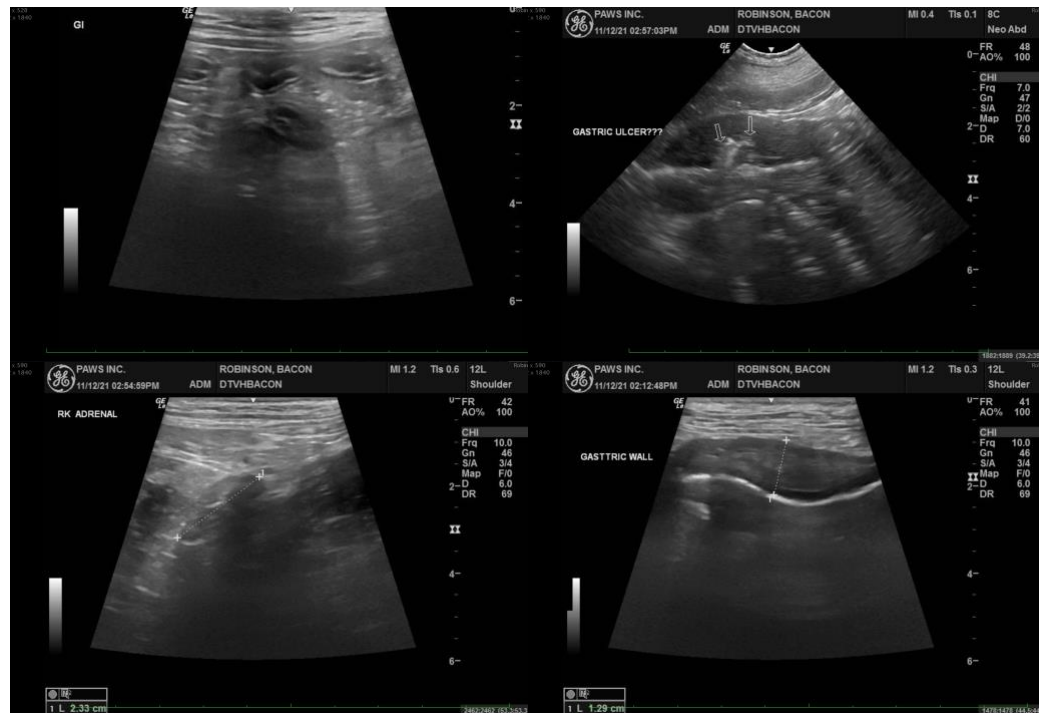
DATE

11/12/21

- The prominent abdominal lymph nodes could be consistent with lymphoid hyperplasia, reactive lymphadenitis or infiltrative neoplasia.
- Minor age-related renal pathology.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- If possible, three-view thoracic radiographs are recommended to assess for pulmonary metastatic disease.
- If an aggressive approach is desired, consider needle aspirates or surgical biopsies of the hepatic mass and gastric wall. Hepatic mass removal is considered unlikely due to its size. However, debulking may be an option.
- Given the size of the hepatic mass as well as the possibility of neoplasia in both the liver and gastric wall, the prognosis for this patient is considered guarded and palliative care should be considered.





PATIENT

Bacon Robinson

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

12 Years

WEIGHT

80 Pounds

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal

IMAGING PERFORMED BY

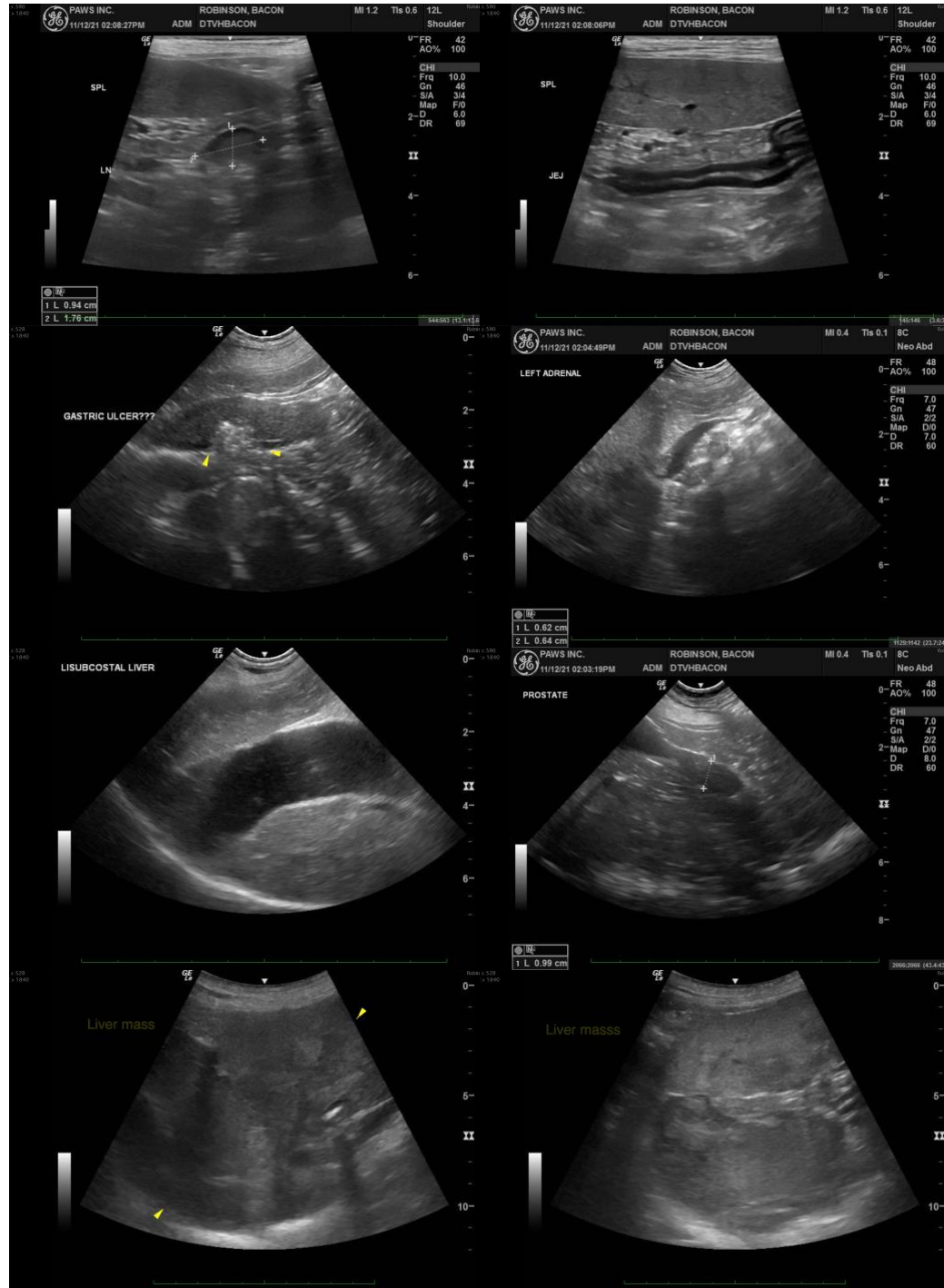
Loetitia Saint-Jacques, RVT

HOSPITAL NAME

Donner Truckee VH

REFERRING VET

Dr. Vannini



INVOICE

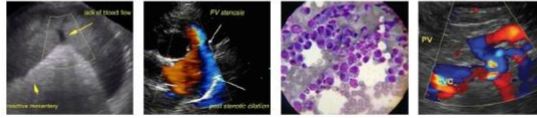
14271

DATE

11/12/21

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



PATIENT can be of any further assistance please contact me.

Bacon Robinson Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)
andrea_nicastro2@hotmail.com

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

12 Years

WEIGHT

80 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

HOSPITAL NAME

Donner Truckee VH

REFERRING VET

Dr. Vannini

INVOICE

14271

DATE

11/12/21