IMAGING PERFORMED BY

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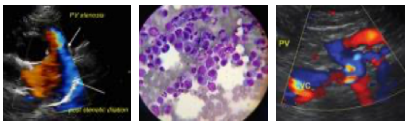

SonoPath
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DATE
12/6/21

PATIENT
Reese Benson

SPECIES
Canine

BREED
Boston Terrier mix

SEX
Female, spayed

AGE
11/19/2008

WEIGHT
38.7 lbs.

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

IMAGING PERFORMED BY
Stephanie Pearce RDCS, RVT

HOSPITAL NAME
Healing Paws Veterinary Wellness Center

REFERRING VET
Dr. Preston

INVOICE

PRESENTING CLINICAL SIGNS

History: ALP was elevated last year on bloodwork, has elevated more this year. PE is otherwise WNL but looking for possible causes of elevated ALP.

Current Medications: hepato support supplement, otherwise no meds.
Lab Results: 10/9/2020 - ALP 614 (5-131). 12/3/2021 - ALP 801 (5-131). 4DX negative, CBC WNL.
Date of Previous IntraPet Ultrasound: No previous IntraPet scans.
Sedation: Not required for a full diagnostic ultrasound.
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 moderately distended with mostly 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.

The left kidney is normal size (5.81 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. Renal vasculature is normal.

The right kidney is normal size (5.41 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. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is borderline enlarged (0.59 cm at cranial pole) (0.68 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.

The right adrenal gland is borderline enlarged (0.71 cm at cranial pole) (0.71 cm at caudal pole) (2.02 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 subjectively normal in size (2.16 cm in width at the level of the hilus) with normal curvilinear peripheral contours. The parenchyma is subtly mottled in appearance. A 1.71 x 1.13 cm ill-defined hypoechoic to heterogeneous area is observed at the medial aspect. In addition, a few pinpoint hyperechoic foci are observed throughout the organ. Splenic vasculature is normal with no evidence of thrombosis.

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 gallbladder is mildly distended and contains some

dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is minimally fluid 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 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 disease is noted.

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.

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. A 0.65 x 0.55 cm medial iliac lymph node is visualized.

ULTRASONOGRAPHIC FINDINGS

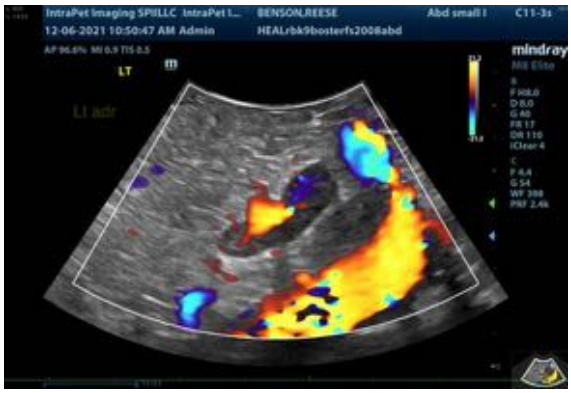
- Borderline bilateral adrenomegaly.
- The splenic parenchymal changes, including the ill-defined hypoechoic area, could be consistent with benign pathology (i.e., extramedullary hematopoiesis or lymphoid hyperplasia). Alternatively, emerging neoplasia is possible. Cytology or histopathology would be necessary to differentiate these possibilities.

*An obvious cause for the patient's elevated ALP is not identified in this study. There is no gross evidence of hepatic pathology. Considerations include age-related remodeling, vacuolar hepatopathy, regenerative nodular hyperplasia or other benign process.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider testing for hyperadrenocorticism with a low-dose dexamethasone suppression test or ACTH stimulation test if clinical signs (i.e., PU/PD) develop in the future.
- Serial monitoring (i.e., every 3-4 months) of the patient's liver values is recommended. If values continue to increase, repeat abdominal ultrasound +/- pre and post prandial serum bile acids and hepatic tissue sampling may be warranted.


IntraPet Imaging SPIILLC IntraPet I...
BENSON,REESE
Abd small I
C11-3s
12-06-2021 10:49:20 AM Admin
HEALrbk9bosterfs2008abd
Spleen
1 Dist 1.71 cm
2 Dist 1.13 cm
mindray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BENSON,REESE
Abd small I
C11-3s
12-06-2021 10:50:47 AM Admin
HEALrbk9bosterfs2008abd
LT
Lt adr
mindray


IntraPet Imaging SPIILLC IntraPet I...
BENSON,REESE
Abd small I
C11-3s
12-06-2021 10:51:46 AM Admin
HEALrbk9bosterfs2008abd
Medial iliac LN
1 Dist 0.65 cm
2 Dist 0.55 cm
mindray


IntraPet Imaging SPIILLC IntraPet I...
BENSON,REESE
Abd small I
C11-3s
12-06-2021 10:53:43 AM Admin
HEALrbk9bosterfs2008abd
RT
Rt adr
1 Dist 2.02 cm
2 Dist 0.71 cm
3 Dist 0.71 cm
mindray


IntraPet Imaging SPIILLC IntraPet I...
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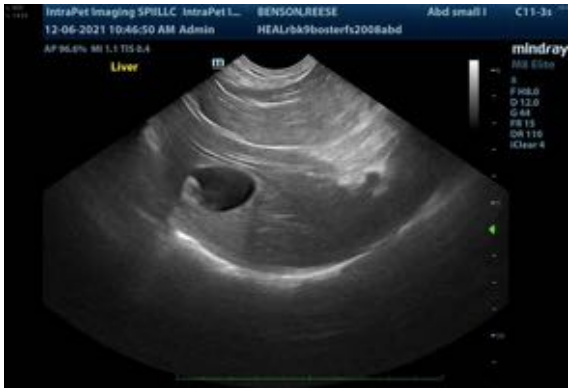
linear ab
L14-6Ns
12-06-2021 10:58:44 AM Admin
HEALrbk9bosterfs2008abd
SI
mindray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BENSON,REESE
Abd small I
C11-3s
12-06-2021 10:46:50 AM Admin
HEALrbk9bosterfs2008abd
Liver
mindray

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