



PATIENT

Lilly Treacy

PRESENTING CLINICAL SIGNS

History: Splenomegaly. Current med: Gabapentin 300 mg caps.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Labrador Retriever

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.

SEX

Spayed Female

The left kidney presented normal size (6.37 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.

AGE

13 Years

The right kidney presented normal size (6.02 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. Renal vasculature is normal.

WEIGHT

72 Lbs.

Adrenal Glands

The left adrenal gland is enlarged (0.71 cm at cranial pole) (1.14 cm at caudal pole) (2.37 cm in length); with a 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, DMV,
Diplomate DACVIM
(Small Animal
Internal Medicine)

The right adrenal gland is mildly enlarged (1.08 cm at cranial pole) (0.94 cm at caudal pole) (2.25 cm in length); with a 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

Kelly Vazquez

Spleen

The spleen is subjectively normal in size (2.25 cm in width at the level of the hilus) with normal curvilinear peripheral contours. The parenchyma is subtly mottled in appearance. Several, small ill-defined myelolipomas are present. Splenic vasculature is normal with no evidence of thrombosis.

HOSPITAL NAME

Willowbrook AC

Liver

The liver is enlarged with irregular peripheral contours. Numerous, ill-defined, varying sized, heterogeneous coalescing masses are observed throughout the organ. Some of the masses are cavitated in appearance. The lesions cause capsular expansion. There is no visibly normal appearing hepatic parenchyma.

REFERRING VET

Dr. Palescandolo

INVOICE

13954

At least 2 large cystic structures are observed, and it is difficult to discern which is the gallbladder.

Gastrointestinal

The gastric lumen is mildly distended with ingesta. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is not dilated. The small intestinal wall thickness

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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.

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Pancreas

The pancreas is largely obscured by the severe hepatomegaly. In the visualized portions, no obvious abnormalities are seen.

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Free Abdomen

Trace free fluid is observed. The abdominal lymph nodes are normal/not visible.

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

Primary Findings

- Numerous, coalescing hepatic masses. Neoplasia (i.e., round cell tumor, adenocarcinoma) is considered likely with a lower possibility of benign pathology (i.e., multifocal inflammatory disease).
- The trace ascites is likely secondary to hepatic pathology.

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Secondary Findings

- Bilateral age-related renal changes
- Mild bilateral adrenomegaly
- The splenic parenchymal changes trend toward the benign (i.e., lymphoid hyperplasia or extramedullary hematopoiesis) with a lower possibility of an emerging neoplasia.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- A fine needle aspirate of the liver can be considered if clotting status is appropriate. If cytology results are inconclusive, a surgical biopsy may be necessary to get a definitive diagnosis. However, given the diffuse hepatic pathology, the prognosis for this patient is considered guarded.

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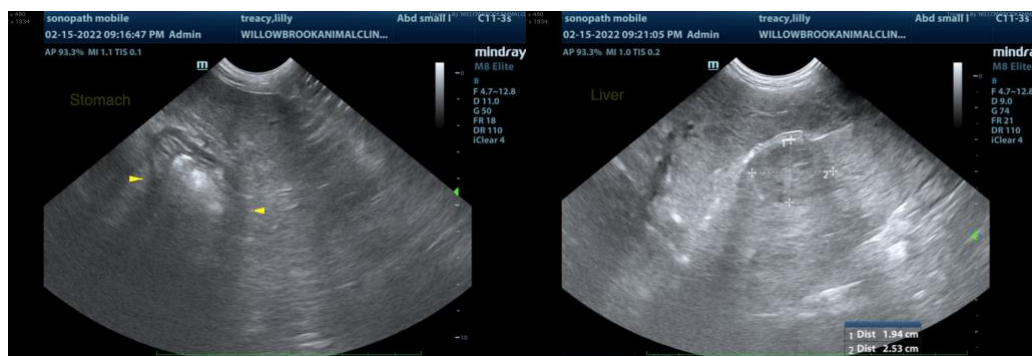
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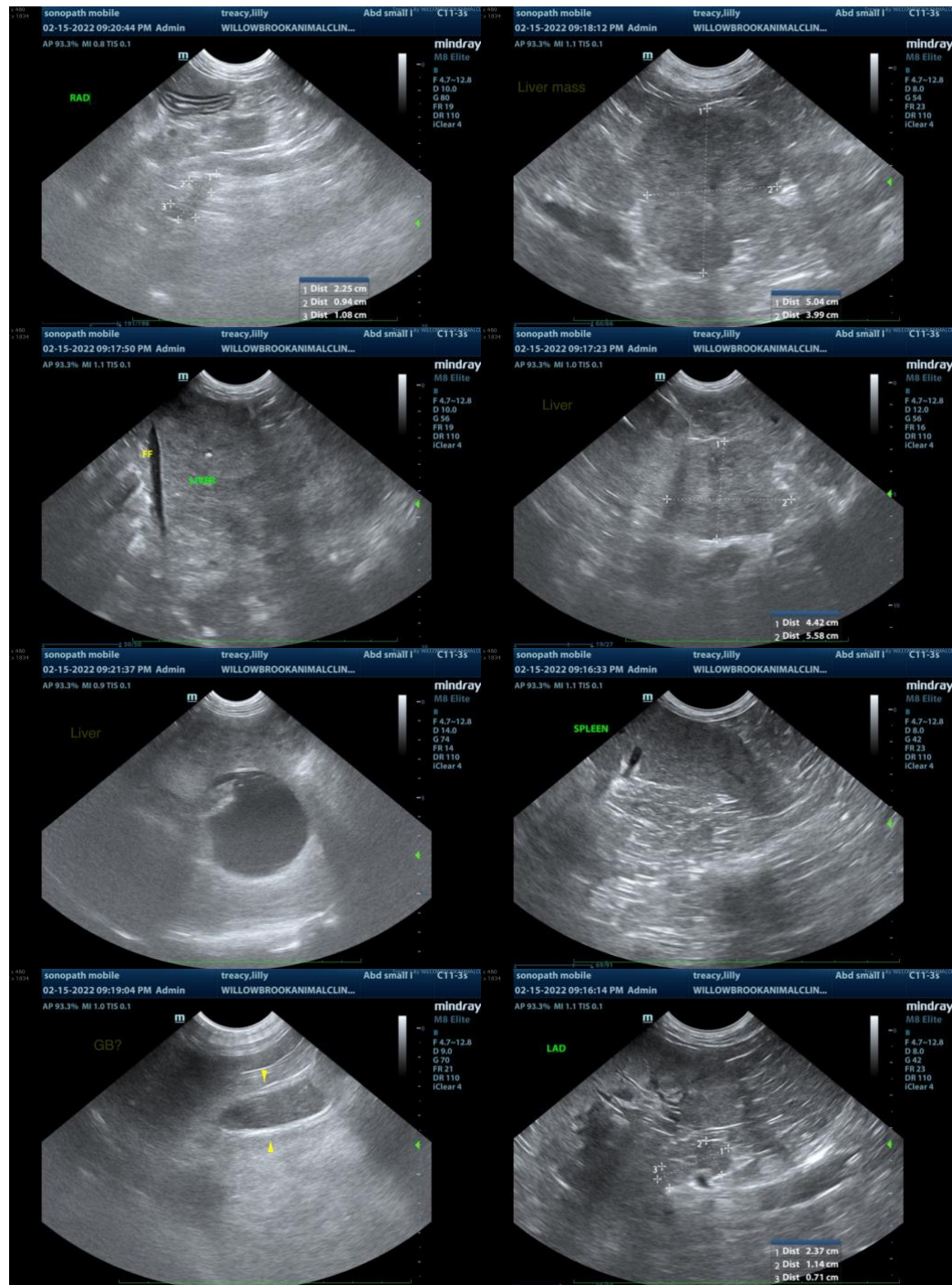
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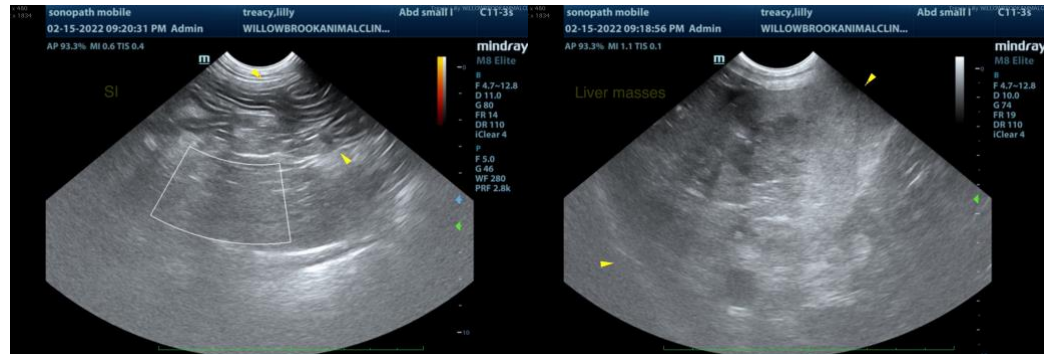
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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