



PATIENT

Moe Sammies Friends Shelter

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered Male

AGE

13 years

WEIGHT

26 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

HOSPITAL NAME

Pine Creek VC

REFERRING VET

Dr. Denny Nolet

INVOICE

10397

DATE

2/16/22

PRESENTING CLINICAL SIGNS

History: Appointment reason: U/S, pt very nervous and possible back pain. Per DN gave Alfaxalone 10mg/ml (0.2mg/kg) 0.22ml and torb 10mg/ml (0.1mg/kg) 0.11ml IV (ak) Dog presented with an enlarged left mandibular lymph node and considerable swelling in the throat area. Aspiration cytology of lymph node yielded only lymphocytes, some lymphoblasts and no PMN's suggesting that this is not an infection. It is noted that the swelling around the lymph node is less today than two days ago. Other peripheral nodes are not enlarged. Would like to evaluate abdominal nodes to R/O lymphoma and check other organs in this obese dog who cries whenever picked up and according to the owner always has Abnormal PE/Chem/CBC/UA Results: There is a large swelling on the left side of the face and the underlying lymph node is enlarged. No swelling in area of gum line. Appears not to be a dental problem. Aspiration of the lymph node = Only lymphocytes and some are lymphoblasts. Concern for possible lymphoma.

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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 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 prostate is normal in size (0.77 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

The left kidney is normal size (5.25 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 hydronephrosis.

The right kidney is normal size (4.87 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 hydronephrosis.

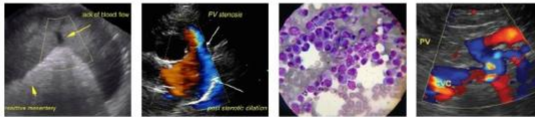
Adrenal Glands

The left adrenal gland is normal size (0.46 cm at cranial pole) (0.59 cm at caudal pole) (2.15 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 normal size (0.62 cm at cranial pole) (0.55 cm at caudal pole) (2.10 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 (1.61 cm in width 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.



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Liver

The liver is subjectively enlarged with swollen peripheral contours. The parenchyma is hyperechoic relative to the spleen, with several small ill-defined hypoechoic nodules throughout the parenchyma. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

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

Gastrointestinal

The gastric lumen is mildly to moderately distended with ingesta. 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 segmentally dilated with chyme. 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.

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 small 0.75 cm cystic mesenteric lymph node is visualized.

Other

A brief echocardiogram reveals no evidence of pericardial effusion.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, regenerative nodular hyperplasia, and/or age-related remodeling. Inflammatory and infiltrative disease are considered less likely.
- The significance of the tiny cystic mesenteric lymph node is unclear, but is likely reactive. Neoplastic infiltration is unlikely.

**There is no obvious evidence of neoplasia in the abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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- Three-view thoracic radiographs are recommended to assess for lymphadenopathy in the chest.
- Consider PARR on the lymph node samples to try and confirm the presence of lymphoma. Alternatively, a lymph node biopsy can be considered.
- Consider a consultation with a board-certified oncologist.



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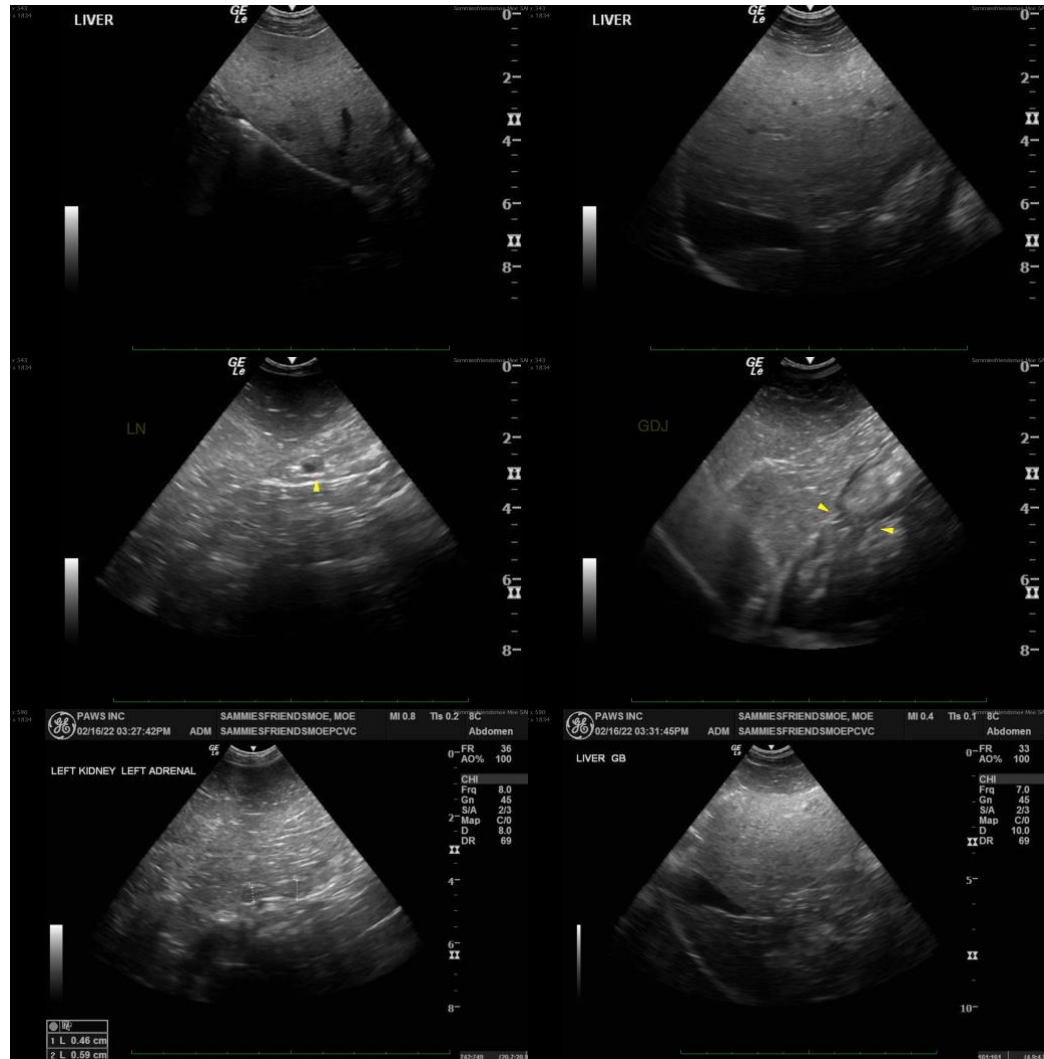
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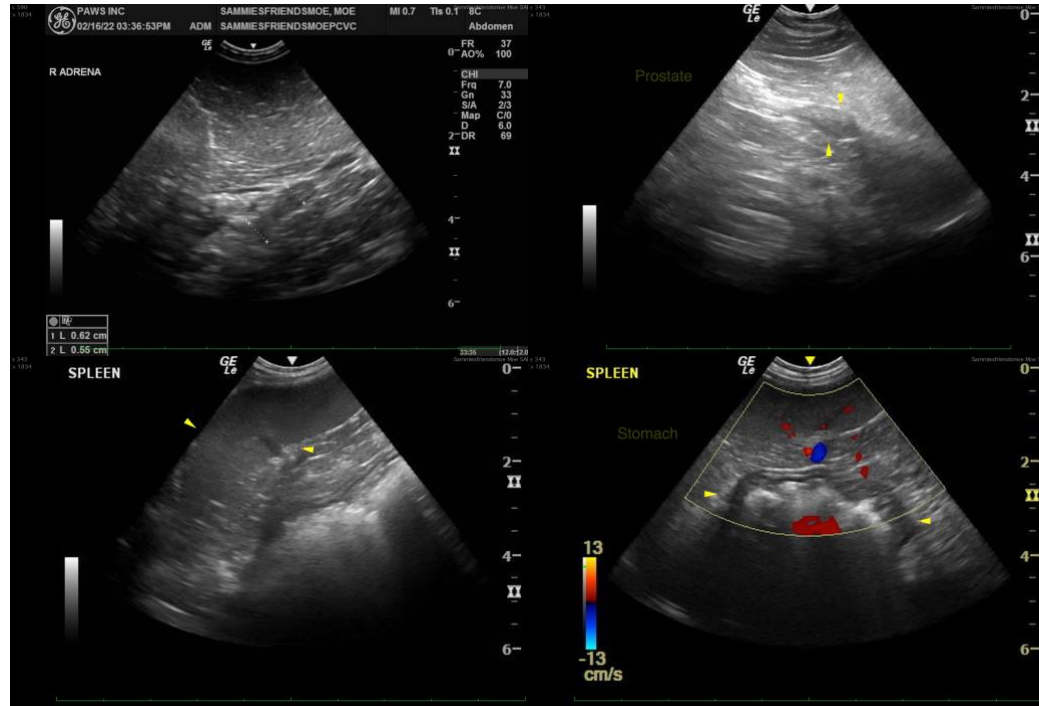
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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