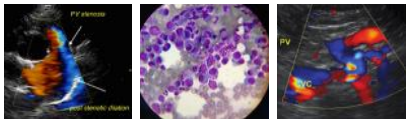
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
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DATE

3/3/2022

PATIENT

Lucy Flanzraich

SPECIES

Canine

BREED

DSH

SEX

Spayed Female

AGE

12/1/2004

WEIGHT

10.56 lbs

INTERPRETED BY

Andrea Nicastro, DMV, Diplomate DACVIM (Small Animal Internal Medicine)

HOSPITAL NAME

CityPets VC

REFERRING VET

Dr. Shook

INVOICE

10486

PRESENTING CLINICAL SIGNS

History: Lucy was examined on 1/8/22. She was found to have lost 3.47lbs since her last visit on 4/10/21. Lucy is not PU/PD, is not vomiting or having diarrhea. She has a 1cm skin mass on her right caudoventral abdomen that has been present at least 2 years with no change. Lucy was diagnosed with retinal hemorrhage and degeneration secondary to systemic hypertension on 2/26/2020 and has been on Amlodipine since. She is currently taking 0.625mg BID.

Current Medications: Amlodipine 0.625mg BID.
Lab Results: Chem 27/CBC/T4 done on 1/8/22 was normal. Fecal Dx negative. UA: USG 1.040, UPC borderline at 0.2, rest of UA WNL.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

Imaging Performed By: Andi Parkinson, RDMS.

Chest X-rays: No obvious evidence of neoplasia.

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 mildly distended. A small amount of gravity dependent mineralized sand 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 (3.78 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 in size (4.09 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. A few nonobstructive nephroliths are visualized. There is no evidence of pyelectasia, infarcts or hydroureter.

Adrenal Glands

The region of the left adrenal gland is evaluated. No obvious pathology is observed.

The right adrenal gland is normal size (0.45 cm width). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.80 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.

Liver
The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is isoechoic relative to the spleen with a few small, ill-defined hypoechoic nodules/areas. 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 small amount of mostly gravity dependent echogenic debris is observed within the lumen. The cystic and common bile ducts are normal. The portal vein to caudal vena cava ratio is approximately 1: 1.

Gastrointestinal
The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not 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 is normal to mildly thickened (up to 0.28 cm), with a normal layering pattern and appropriate mural detail. There is disruption in the normal 1:3 muscularis: mucosal ratio in some segments. Discreet masses are not identified. The ileocecal colic junction and colonic wall are normal. No obstructive disease is noted.

Pancreas
The left limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

Free Abdomen
The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- The small intestinal wall changes are suggestive of inflammatory bowel disease. Emerging lymphoma is possible. However, neoplasia is considered unlikely at this time.
- Age-related pancreatic remodeling. Mild pancreatitis is also possible, particularly if the patient exhibits a positive Murphy's sign.

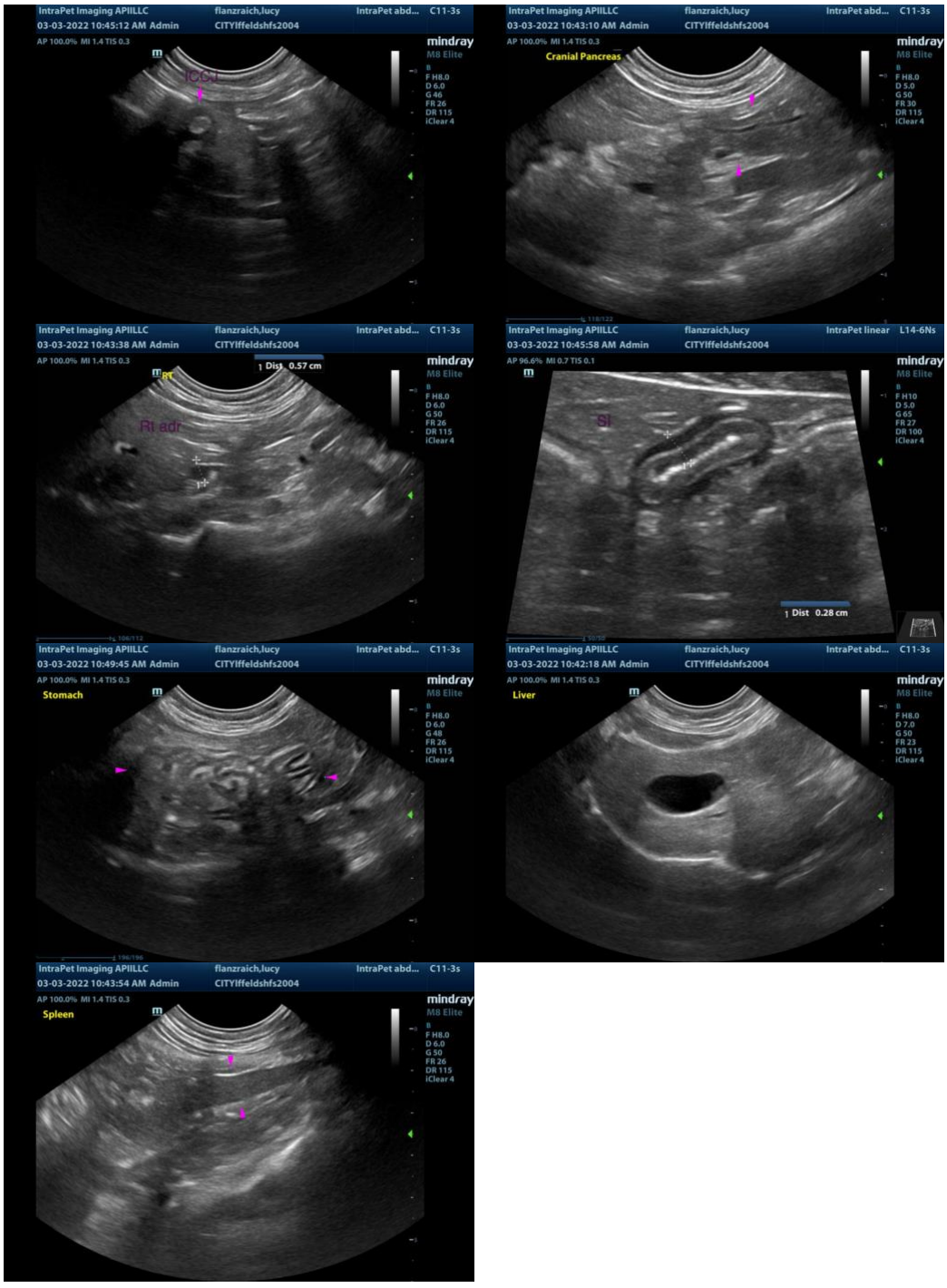
Secondary Findings

- Bilateral non-specific age-related renal changes with right nonobstructive nephrocalcinosis.
- Urinary bladder sand
- The hepatic parenchyma changes are most consistent with age-related remodeling. However, a microscopic hepatopathy (i.e., emerging hepatic lipidosis, inflammatory disease, or neoplasia) cannot be completely excluded.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider repeating baseline blood work, including a CBC chemistry panel and T4 to determine if metabolic function has deteriorated since January 8, 2022 (date of last bloodwork).

- Also consider a malabsorption panel (serum cobalamin, folate, TLI and PLI), +/- a fine-needle aspirate of the liver (depending on liver values and clotting status).



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.

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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