



PATIENT PRESENTING CLINICAL SIGNS

Remi Kelly History: On Tylosin powder; Has spondylosis. Looking for mass
Abnormal PE/Chem/CBC/UA Results: WNL

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine **Urinary System**

The urinary bladder is not definitively visualized in the available images.

BREED

Labrador Retr

The left kidney is normal in size (6.10 cm in length) with a normal shape, architecture and 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 hydronephrosis.

SEX

Female Spayed

The right kidney is normal in size (6.13 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. There is no evidence of pyelectasia, infarcts or hydronephrosis.

Adrenal Glands

AGE

8 years

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

What is thought to be the caudal pole of the right adrenal gland is in normal size (0.66 cm in width) with a normal shape, glandular echogenicity and detail. Surrounding vasculature appears normal.

WEIGHT

72 lbs

Spleen

The spleen is not visualized in its entirety. In the visualized portions, the margins are curvilinear, and the parenchyma is homogenous. No distinct focal lesions are observed.

Liver

INTERPRETED BY

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

The liver is not visualized in its entirety. In the visualized portions, the organ appears normal to slightly prominent in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and slightly mottled in appearance. No distinct focal lesions are observed.

The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

IMAGING PERFORMED BY

Cindy

Gastrointestinal

The visible portion of the stomach reveals a wall that is normal in thickness with a normal layering pattern. A small amount of ingesta is observed within the lumen. In the visualized portion of the small intestine, there appears to be normal wall thickness, without evidence of luminal dilation. and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended.

HOSPITAL NAME

Dillsburg VC

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.

REFERRING VET

Dr. Amber

Free Abdomen

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

INVOICE

12623

DATE

4.3.23

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- There is no obvious evidence of a mass within the abdominal cavity.

Secondary Findings

- The hepatic parenchymal changes are nonspecific and could be consistent with age-related remodeling, regenerative nodular hyperplasia, inflammatory disease, emerging neoplasia, hepatotoxicosis (i.e., copper), other hepatopathy. Correlation with the patient's liver values is recommended.
- Minor dystrophic mineralization in the right kidney

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider obtaining additional sonographic images of the urinary bladder, spleen, adrenal glands and midabdominal region to further evaluate for underlying pathology.
- Baseline lab work, including a CBC, chemistry panel, urinalysis and T4 is also recommended (if not already performed).



