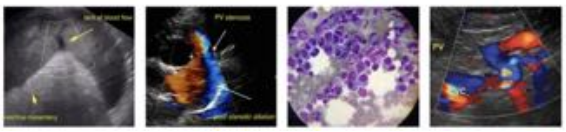


PATIENT

Snugs Durgin

SPECIES

Canine

BREED

Pitbull Terrier

SEX

Neutered Male

AGE

4 years

WEIGHT

68.3

INTERPRETED BY

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

IMAGING PERFORMED BY

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

HOSPITAL NAME

Long Point AH

REFERRING VET

Dr. Erin Burton, DVM

INVOICE

12660

DATE

4.5.23

PRESENTING CLINICAL SIGNS

History: 4-day history or anorexia and lethargy. Bloodwork shows an ALT of 131. USG 1.073. 2+ proteinuria. Inactive sediment. Normal T4. Heartworm negative. Thoracic radiographs unremarkable. Abdominal radiographs show a prominent spleen.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is distended. A small amount of suspended echogenic debris is observed within the lumen. The region of the trigone and the proximal urethra, visible to a depth of 2 cm, are normal.

The prostate is normal in size (1.58 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

The left kidney is normal in size (6.28 cm in length) with a normal shape, architecture and 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.

The right kidney is normal in size (7.21 cm in length) with a normal shape, architecture and 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.

Adrenal Glands

The left adrenal gland is normal in size (0.64 cm at cranial pole) (0.73 cm at caudal pole) with a normal shape and 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 in normal size (1.16 cm at cranial pole) (0.63 cm at caudal pole) with a normal shape and 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 mildly enlarged (3.05 cm in width at the level of the hilus) with normal curvilinear peripheral contours. The parenchyma is subtly mottled in appearance. No focal lesions are observed. Splenic vasculature is normal.

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 gall bladder lumen is moderately distended. The wall is thin and smooth. A moderate amount of aggregated, echogenic, gravity-dependent sludge is observed within the lumen. The cystic and common bile ducts are normal/not seen.

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 in

thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

Pancreas
The region of the base and right limb of the pancreas are largely isoechoic relative to surrounding omental fat. The pancreatic duct is not overtly dilated.
(See also "Other" category).

Free Abdomen
There is no obvious evidence of free fluid.

Lymph node
(See "Other" category).

Other
A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

A 1.54 cm irregular hypoechoic structure is observed in the left- to midabdominal, adjacent to the caudal pole of the spleen.

*Ultrasound-guided fine-needle aspirates of the spleen were obtained at the end of this study without incident.

ULTRASONOGRAPHIC FINDINGS

Findings

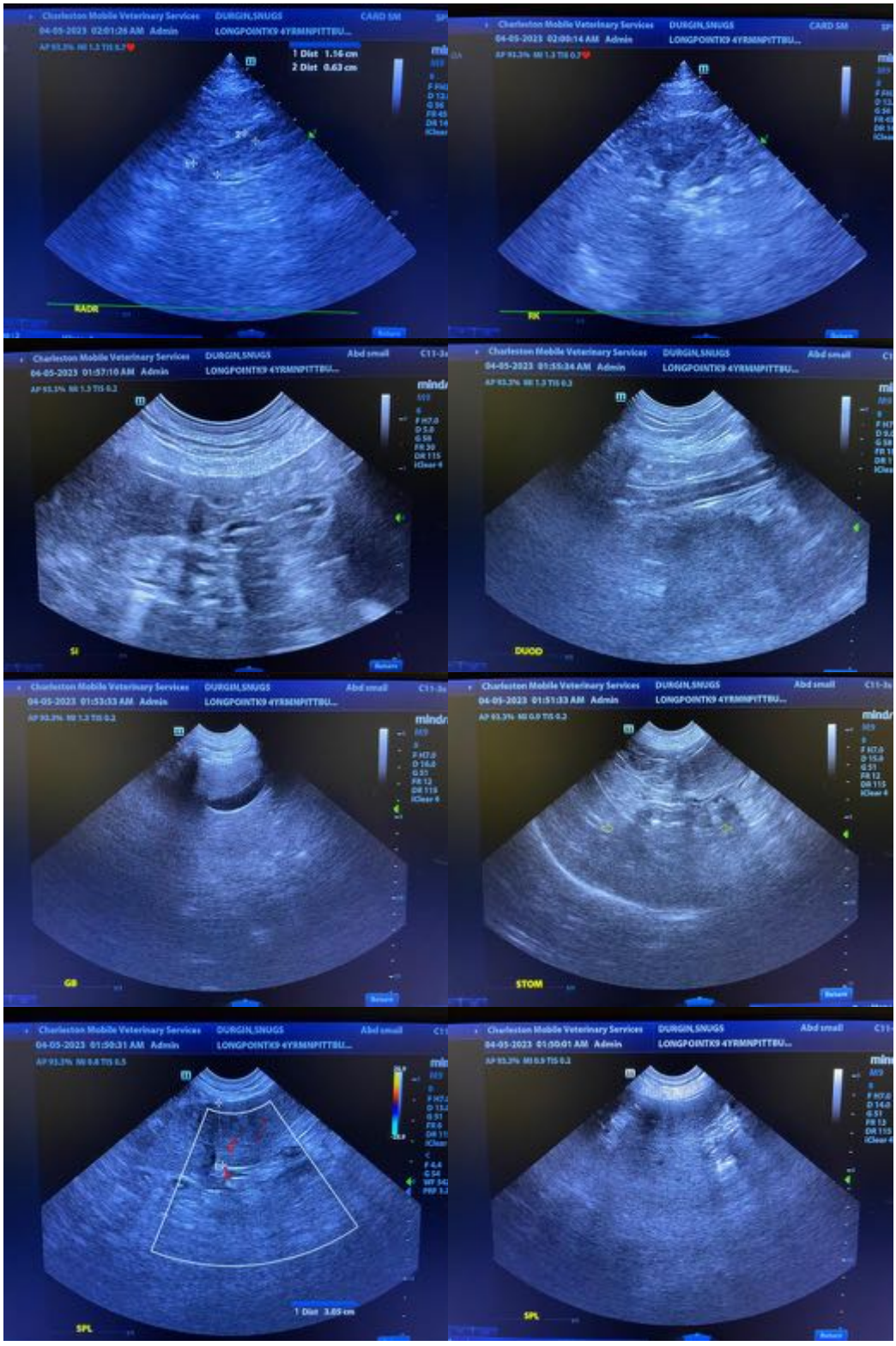
- The splenic changes could be consistent with a benign process (i.e., lymphoid hyperplasia, extramedullary hematopoiesis, antigenic stimulation, splenitis) or emerging neoplasia (i.e., lymphoma).

- The origin of the hypoechoic structure in the left midabdominal is unclear. It may represent a prominent lymph node, a portion within the left limb of the pancreas, lesion within the mesentery, other. A benign process is favored.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Testing for tick-borne disease is recommended. If tick testing and splenic cytology results are inconclusive, consider the following:

    1. Pre-and postprandial serum bile acids to assess hepatic function
    2. GI panel including serum cobalamin and folate, TLI, PLI and resting cortisol level
    3. In the meantime, symptomatic care (i.e., appetite stimulants) is recommended.


Charleston Mobile Veterinary Services
DURGIN,SNUGS
04-05-2023 02:01:26 AM Admin
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1 Dist 1.16 cm
2 Dist 0.63 cm
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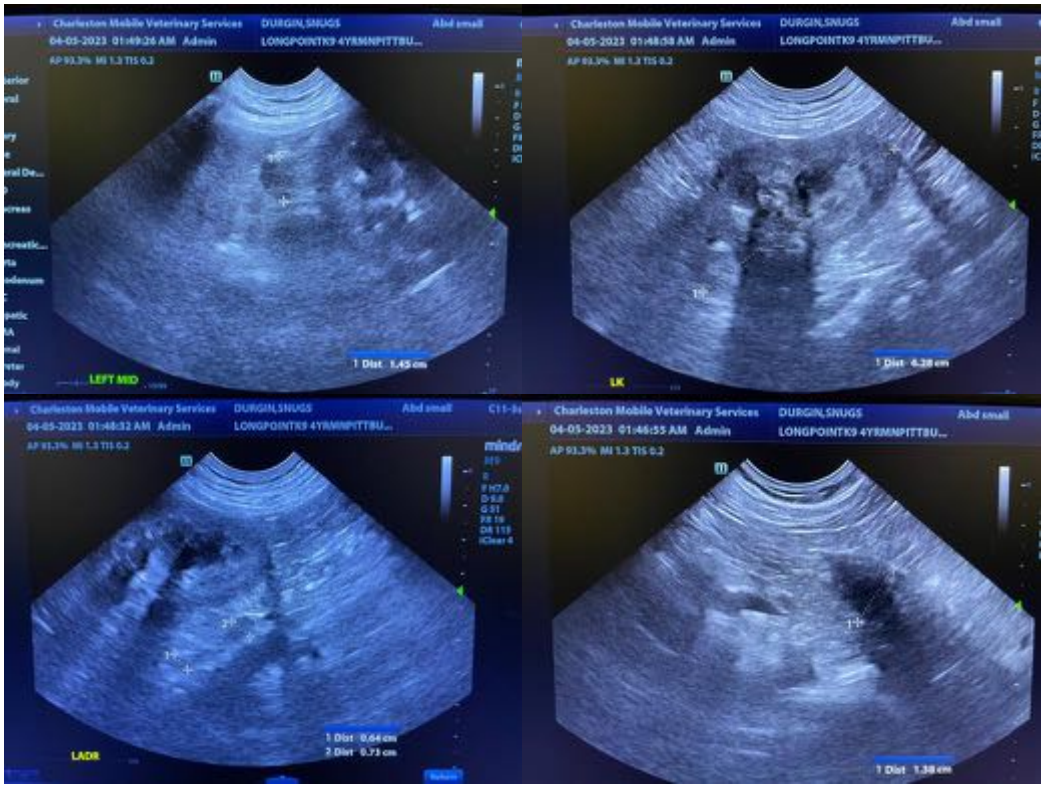

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com