

**DATE PRESENTING CLINICAL SIGNS**

5/20/22 Recheck. Splenic lesion.

PATIENT Current Medications: None.

Sandy Baczynski

Date of Previous IntraPet Ultrasound: 3/21/22. See attached.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

Urinary System**BREED**

Pit Bull

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 (7.51 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild to moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

AGE

3/31/10

The right kidney presented normal size (7.03 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

87.7 Pounds

INTERPRETED BYAndrea Nicastro, DMV,
Diplomate DACVIM
(Small Animal
Internal Medicine)**Adrenal Glands**

The left adrenal gland is normal size (0.67 cm at cranial pole) (0.71 cm at caudal pole) (3.64 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 (0.59 cm at cranial pole) (0.70 cm at caudal pole) (3.62 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.

IMAGING PERFORMED BY

Rachel Brillhart RDMS

Spleen**HOSPITAL NAME**

Festival Vet Clinic

The spleen is normal in size with a normal capsular contour. There is appropriate echogenicity and echotexture. A 2.04 cm x 2.04 cm irregular, multiseptated, vascular, cystic mass/lesion is observed at the lateral aspect. In addition, several myelolipomas are seen. Splenic vasculature is normal.

REFERRING VET

Dr. Davies

Liver

The liver is subjectively normal in size with normal peripheral contours. The parenchyma is isoechoic relative to the spleen and exhibits mild heterogeneity. No focal distinct lesions are observed. Hepatic vasculature and biliary tracts are of normal volume with no evidence of congestion.

INVOICE

37844

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.

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 small intestinal lumen is not dilated. The small intestinal wall thickness is normal (xxx cm) 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 right 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.

Other

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

PRIMARY FINDINGS

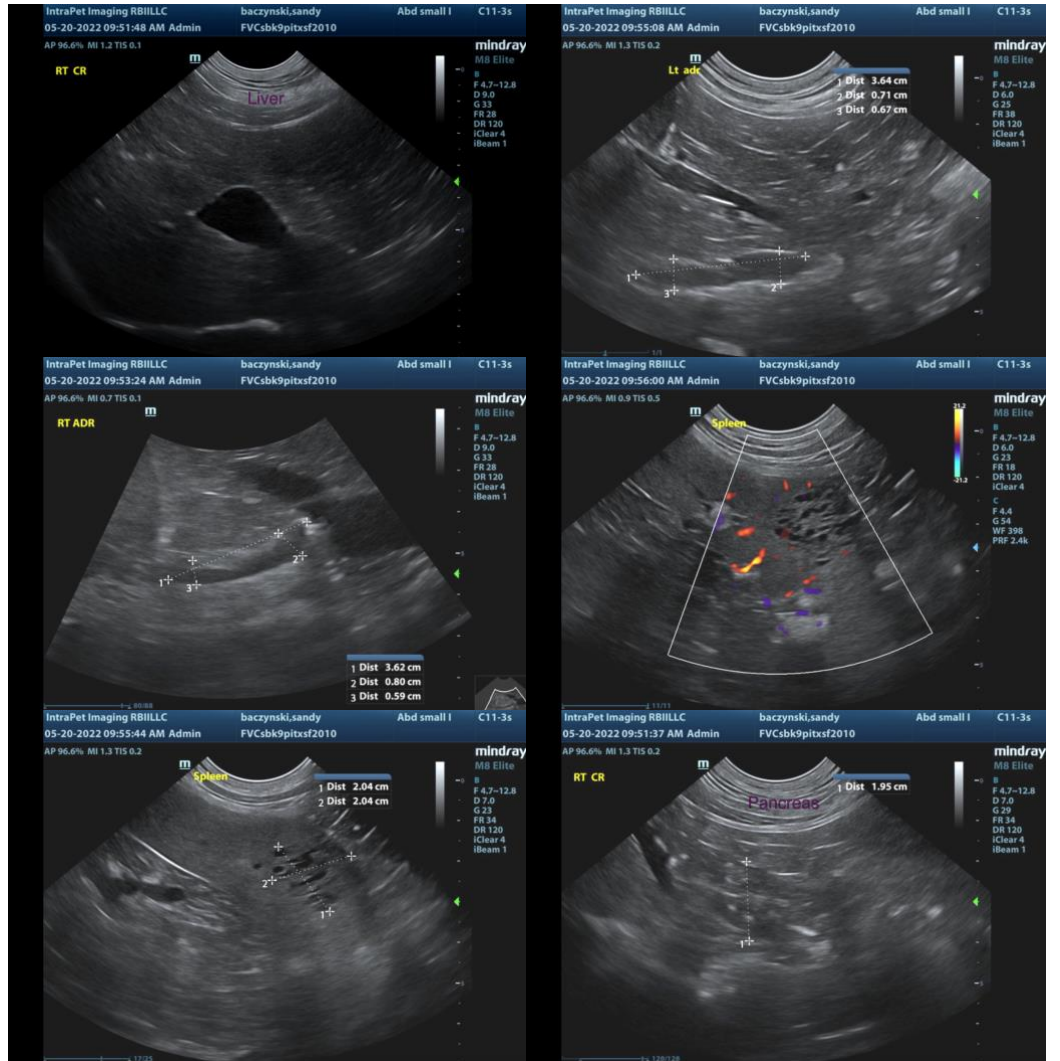
- The cystic splenic mass is similar in appearance compared to the previous sonogram. Differentials include a benign lesion versus an emerging tumor (i.e., hemangioma, hemangiosarcoma).

SECONDARY 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 unlikely. Correlation with the patient's liver values is recommended.
- The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.
- Minor bilateral age related renal changes, as previously noted.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- As stated in the previous report, a splenectomy with submission of the spleen for histopathology can be considered if there is no evidence of pulmonary metastatic disease. If a more conservative approach is to be pursued, consider a recheck ultrasound in 2-3 months to assess for progression.
- Consider protein losing nephropathy recommendations as described in the previous report.



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