

**DATE PRESENTING CLINICAL SIGNS**

6.21.23 Cali was ADR yesterday. She appeared uncomfortable and was clingy to owner. No vomiting or diarrhea. Physical exam pending (performed at another DVM today and will be performed here at MAVA tomorrow).

**PATIENT**

Cali Andrews Current Medications: Apoquel 16mg SID, Carprofen 50mg BID PRN for arthritis pain. Radiographs: pending today.

Date of Previous IntraPet Ultrasound: No previous.

**SPECIES** Sedation: IV: Butorphanol - 5mg Dexmedetomidine - 0.125mg.

Stat Report: Not requested.

Canine Imaging Performed By: Rachel Brillhart, RDMS.

**BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Lab Mix **Urinary System**

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. Luminal contents are anechoic. No cystic calculi are observed. The region of the trigone and visible portion of the proximal urethra are normal.

**SEX**

Female Spayed

The left kidney is normal in size (5.63 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 hydroureter. Renal vasculature is normal.

**AGE**

11/27/2012

The right kidney is normal in size (5.67 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 hydroureter. Renal vasculature is normal.

**WEIGHT**

55.7 lbs

**INTERPRETED BY**

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

**Adrenal Glands**

The left adrenal gland is normal in size (0.60 cm at cranial pole) (0.64 cm at caudal pole) (2.67 cm in length) 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.

**HOSPITAL NAME**

Mt. Airy Vet Assoc

The right adrenal gland is in normal size (0.80 cm at cranial pole) (0.64 cm at caudal pole) (2.93 cm in length) 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.

**REFERRING VET**

Dr. Cormier

**Spleen**

The spleen is subjectively normal in size (1.85 cm in width at the level of the hilus) with normal curvilinear peripheral contours. The parenchyma is diffusely mottled with small, ill-defined, hypoechoic nodules/areas throughout the organ. Splenic vasculature appears normal with no evidence of thrombosis.

**INVOICE**

13435

**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. Luminal contents are anechoic. 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 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. The abdominal lymph nodes are normal/not visible.

### ***Other***

A uterine stump is visible (0.68 cm in width). No obvious pathology is observed.

## **ULTRASONOGRAPHIC FINDINGS**

### **Primary Findings**

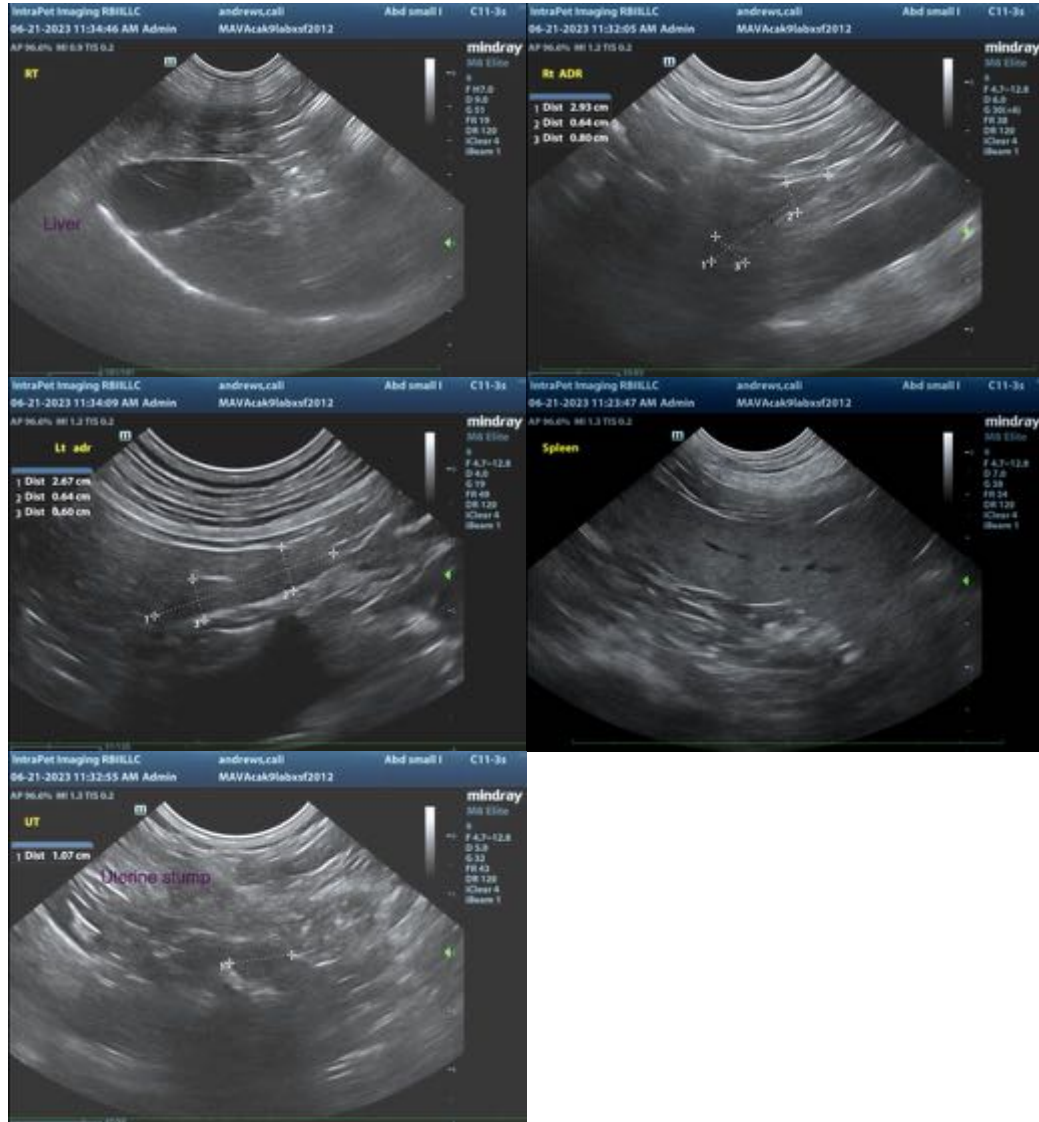
- The splenic changes could be consistent with a benign process (i.e., lymphoid hyperplasia, extramedullary hematopoiesis, antigenic stimulation, or splenitis). Alternatively, emerging neoplasia (i.e., round cell tumor) cannot be completely excluded.

### **Secondary Findings**

- Visible uterine stump (incidental)

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Consider ultrasound-guided fine-needle aspiration of the spleen (if clotting status is normal). A 25-gauge needle should be used for the procedure. Other considerations include the following:
  1. Baseline lab work, including a CBC, chemistry panel, urinalysis and T4
  2. Three-view thoracic radiographs to assess for occult disease in the chest.
  3. Orthopedic and neurologist examinations to evaluate for nonmetabolic causes for discomfort and lethargy.
  4. Depending on the results of the above diagnostics, further work-up may be warranted.



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](mailto:info@SonoPath.com)