



PATIENT PRESENTING CLINICAL SIGNS

Bindi Stout Clinical Exam Findings: Abdominal Mass - unknown origin

SPECIES Abnormal lab-work values: Presented today for UTI
Current Medications: Starting on Clavamox and Gabapentin today for UTI
Canine Radiographic Findings: Splenic Mass

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Austr Shepherd **Urinary System**

SEX

Female Spayed

AGE

12-20-2010

WEIGHT

70 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

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HOSPITAL NAME

Brighton AH

REFERRING VET

Dr. Ciccone

INVOICE

14025

DATE

8.10.23

The urinary bladder is moderately distended. The wall in the region of the apex is mildly to moderately thickened (up to 0.62 cm) and irregular. The wall tapers to a normal thickness as it extends towards the cystourethral junction. A small amount of suspended echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 2-3 cm, appear normal.

The left kidney is normal in size (6.42 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. Several nonobstructive nephroliths are visualized. There is no evidence of pyelectasia, infarcts or hydroureter. Renal vasculature appears normal.

The right kidney is normal in size (6.42 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. A few nonobstructive nephroliths are visualized. There is no evidence of pyelectasia, infarcts or hydroureter. Renal vasculature appears normal.

Adrenal Glands

The left adrenal gland is normal in size (0.70 cm at cranial pole) (0.68 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 appear normal.

The right adrenal gland is in normal size (0.78 cm at cranial pole) (0.43 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 appear normal.

Spleen

The spleen is enlarged with irregular peripheral contours. A >10.00 cm irregular, heterogenous cavitated mass is arising from the parenchyma. Surrounding mesentery is mildly hyperechoic. In the remainder of spleen the margins are curvilinear and the parenchyma is homogenous. Splenic vasculature appears normal with no evidence of thrombosis.

Liver

The liver is subjectively normal 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. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.



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

SPECIES *Gastrointestinal*

Canine
The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is mildly distended with ingesta. 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 ileocecolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.

BREED *Pancreas*

Austr Shepherd
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.

SEX *Free Abdomen*

Female Spayed
There is no obvious evidence of free fluid. The abdominal lymph nodes are normal/not visible.

AGE *Other*

12-20-2010
A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

WEIGHT *Other*

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ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Large splenic mass. Neoplasia (i.e., hemangiosarcoma, hemangioma, other) is considered likely with a lower possibility of a non-neoplastic process.
- The gallbladder changes are consistent with an emerging mucocele.
- The urinary bladder wall changes are suggestive cystitis.

Secondary Findings

- Minor bilateral chronic renal changes with nonobstructive nephrolithiasis
- The hepatic parenchymal changes are nonspecific and could be secondary to age-related remodeling or regenerative nodular hyperplasia. Inflammatory disease, metastatic disease and other hepatopathies are possible but considered less likely.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

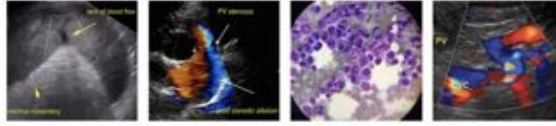
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- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- If there is no evidence of pulmonary metastatic disease, a submission of the spleen for histopathology can be considered. If pursued, liver biopsies should also be obtained at the time of surgery and the gallbladder should be assessed for mucocele formation +/- a cholecystectomy, if needed.
- While awaiting surgery, consider initiation of Ursodiol therapy for the gallbladder changes.



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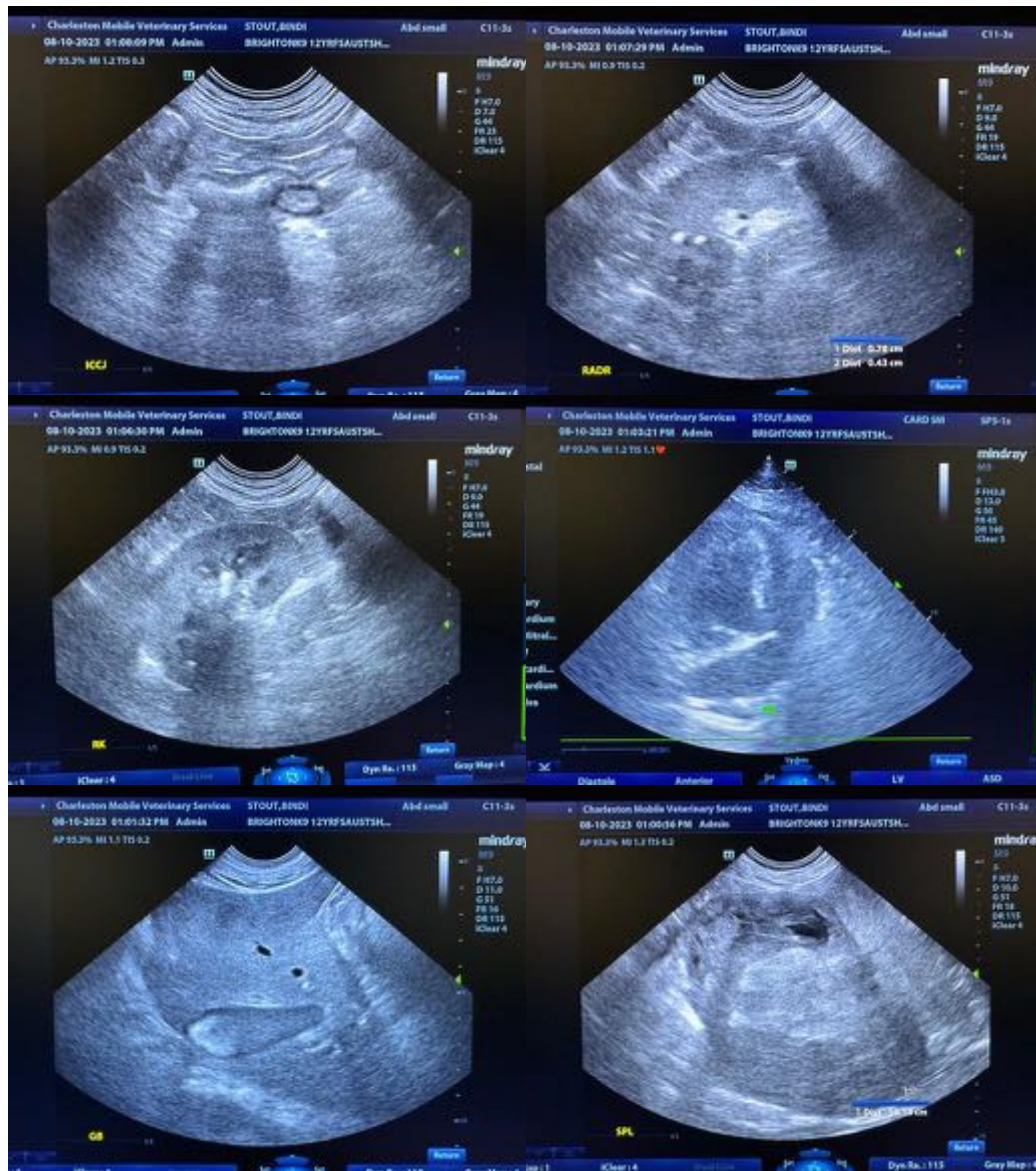
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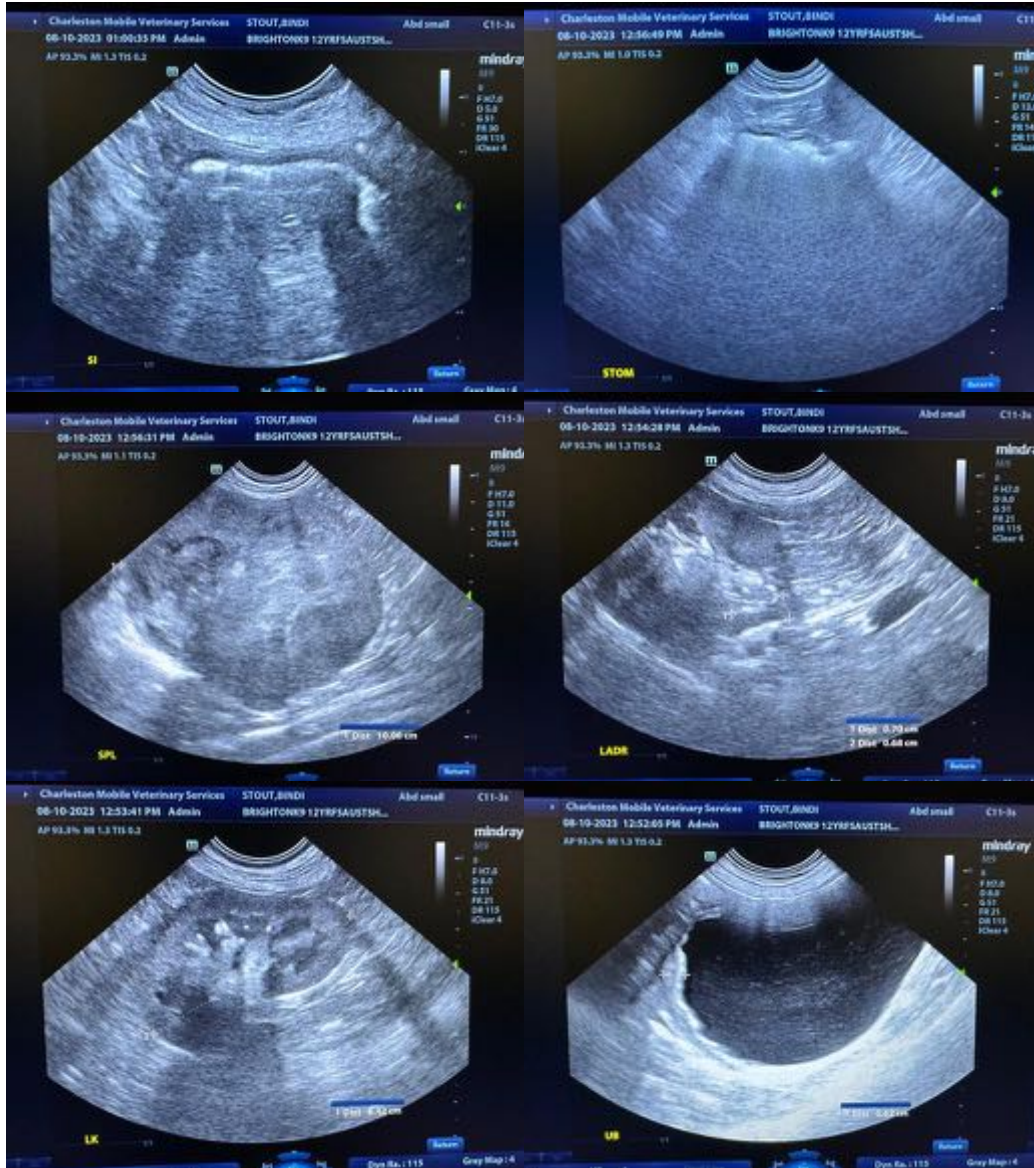
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@SonoPath.com