

PATIENT PRESENTING CLINICAL SIGNS

Lucy Cunningham History: recent onset of vomiting and diarrhea. Radiographs reveal loss of serosal detail in the abdomen.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is distended. A scant amount of suspended echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone and visible portion of the proximal urethra are normal.

German Shepherd

SEX

The left kidney is normal in size (7.12 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. Renal vasculature is normal.

Female Spayed

AGE

The right kidney is normal in size (8.40 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. Renal vasculature is normal.

7 years

WEIGHT

NP

Adrenal Glands

INTERPRETED BY

The left adrenal gland is normal in size (0.53 cm at cranial pole) (0.59 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.

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

The right adrenal gland is in normal size (1.22 cm at cranial pole) (0.53 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.

IMAGING PERFORMED BY

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

Spleen

The spleen is enlarged with irregular peripheral contours. A >8.00 cm heterogenous, cavitated mass is arising from the parenchyma. Surrounding mesentery is hyperechoic. In the remainder of the spleen, the margins are irregular. A few hypoechoic nodules are seen. The parenchyma is slightly mottled in appearance. Splenic vasculature appears normal with no evidence of thrombosis.

HOSPITAL NAME

Central Vet
Summerville

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.

REFERRING VET

Karen Miller

INVOICE

The gall bladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal/not seen.

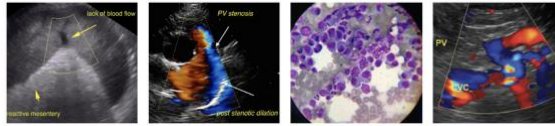
14214

Gastrointestinal

DATE

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.

8.24.23



PATIENT *Pancreas*

Lucy Cunningham

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.

SPECIES *Free Abdomen*

Canine

The mesentery throughout the cranial- to midabdomen is hyperechoic. A large amount of echogenic free fluid is observed within the abdomen. The abdominal lymph nodes are normal/not visible.

BREED *Other*

German Shepherd

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

SEX **ULTRASONOGRAPHIC FINDINGS**

Female Spayed

- Large splenic mass with smaller splenic nodules. Neoplasia (i.e., hemangiosarcoma) is suspected with a lower possibility of a benign process. Diffuse peritonitis is present likely secondary to splenic pathology.

AGE

7 years

- The ascites is suspected to represent hemorrhage from the splenic mass. However, other causes of effusion (i.e., increased hydrostatic pressure, increased vascular permeability, low oncotic pressure) cannot be completely excluded.

WEIGHT

NP

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastatic disease. If there is no evidence of pulmonary metastases, a splenectomy with submission of the spleen for histopathology is recommended. A liver biopsy should also be obtained at the time of surgery to assess for micro metastatic disease. If surgery is not pursued, palliative care (i.e., Yunnan Bayaio) is recommended.

IMAGING PERFORMED BY

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

HOSPITAL NAME

Central Vet
Summerville

REFERRING VET

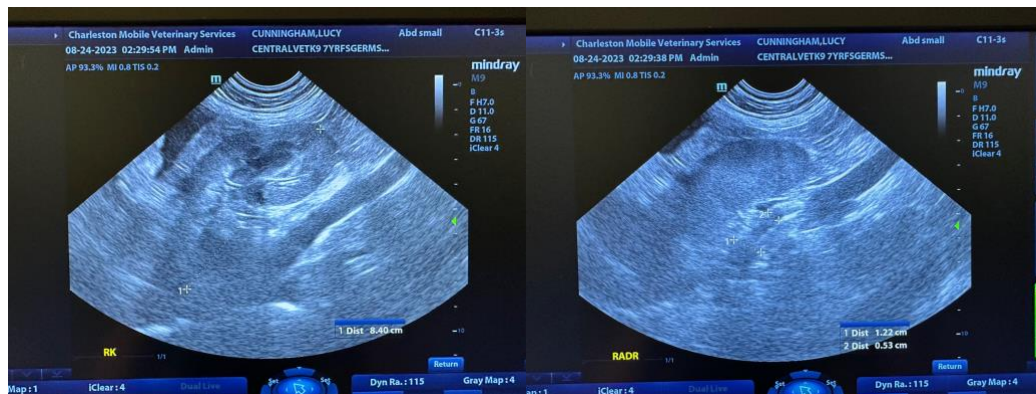
Karen Miller

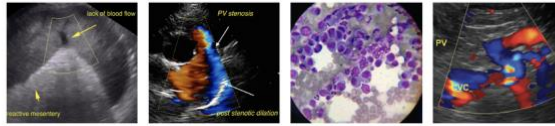
INVOICE

14214

DATE

8.24.23





PATIENT

Lucy Cunningham

SPECIES

Canine

BREED

German Shepherd

SEX

Female Spayed

AGE

7 years

WEIGHT

NP

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

Central Vet
Summerville

REFERRING VET

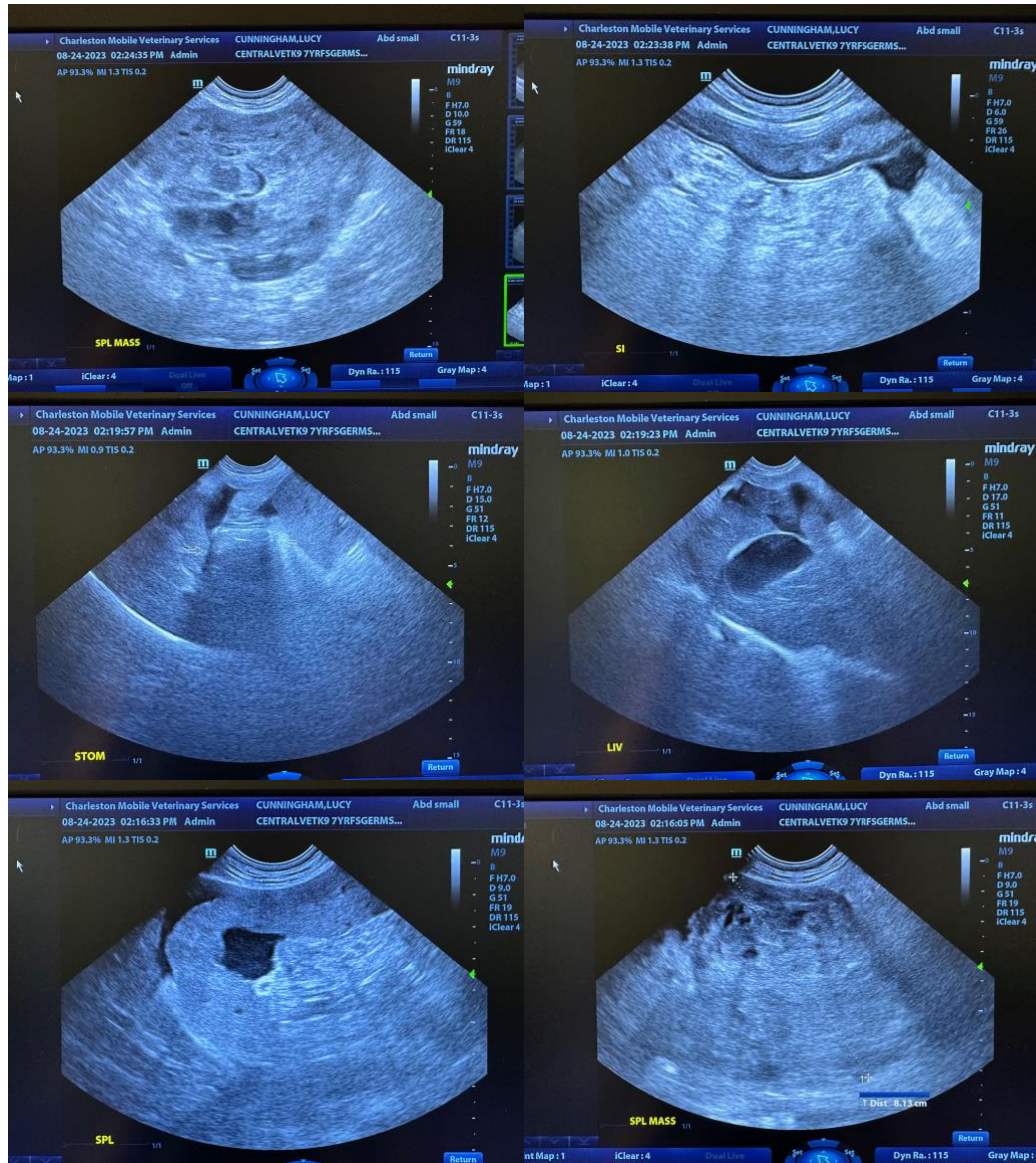
Karen Miller

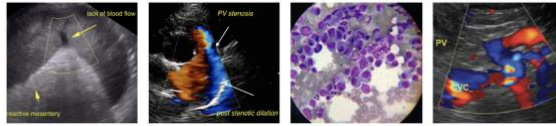
INVOICE

14214

DATE

8.24.23





PATIENT

Lucy Cunningham

SPECIES

Canine

BREED

German Shepherd

SEX

Female Spayed

AGE

7 years

WEIGHT

NP

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

Central Vet
Summerville

REFERRING VET

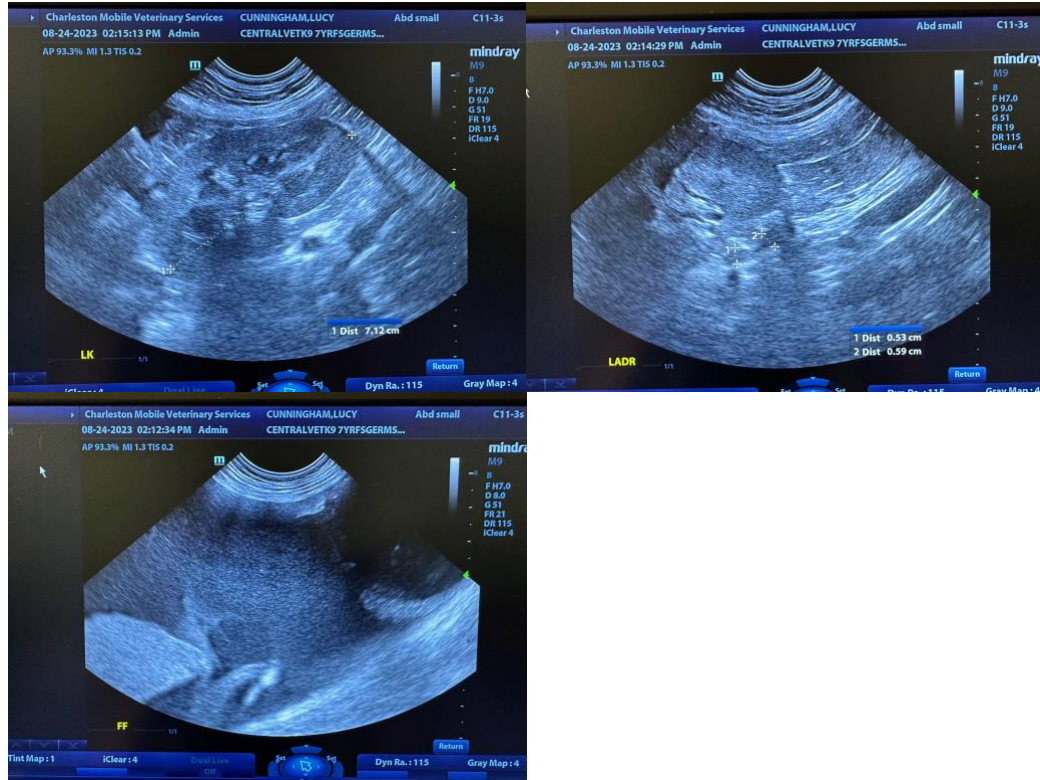
Karen Miller

INVOICE

14214

DATE

8.24.23



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