

**DATE PRESENTING CLINICAL SIGNS**

8/31/2021

History: 8/31/2021 - Pre-anesthetic labs for dental procedure - elevated ALP. Dental grade 2/4 periodontal disease. Potbellied appearance. Splenomegaly, hepatomegaly. Owner reports increased thirst and appetite. Current Medications: Cytopoint injections PRN.

PATIENT

Snickers Gregory

Lab Results: ALP = 925 U/L.

Radiographs: Attached separately.

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

Sedation: Sedation not required for scan.

Stat Report: STAT report not requested by the veterinarian.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED**

Beagle

Urinary System

The urinary bladder and visible portion of the pelvic urethra are normal for the degree of luminal distension. The urine is anechoic with no evidence of debris. Cystic calculi and discrete masses are not observed. The region of the trigone and the visible portion of the proximal urethra are normal.

SEX

Male, neutered

The prostate is normal in size (1.24 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

AGE

2012

The left kidney is normal size (6.53 cm in length); normal shape and architecture with 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.

WEIGHT

The right kidney is normal size (7.60 cm in length) with a slightly irregular shape. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths or hydronephrosis.

INTERPRETED BY

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Adrenal Glands

The left adrenal gland is mildly enlarged (0.83 cm at cranial pole) (0.97 cm at caudal pole) (2.56 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.

HOSPITAL NAME

Hickory VH

The right adrenal gland is mildly enlarged (0.81 cm at cranial pole) (0.75 cm at caudal pole) (2.45 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.

REFERRING VET

Dr. Silcox

Spleen

The spleen is subjectively prominent in size (2.04 cm in width at the level of the hilus) with slightly swollen peripheral contours. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

INVOICE

11987

Liver

The liver is subjectively enlarged with swollen peripheral contours. The parenchyma is hyperechoic relative to the spleen. Numerous ill-defined varying sized hypoechoic nodules/areas are observed throughout the organ, particularly on the left side. A 6.31 x 2.59 cm hypoechoic to slightly heterogeneous area/mass is observed on the left side. Ascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is moderately distended. The wall is thin and smooth. A moderate amount of echogenic debris is observed within the lumen, most of which is partially dependent and some of which is suspended. 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 thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

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.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Diffuse hepatopathy. Differentials include benign pathology (i.e., regenerative nodular hyperplasia, vacuolar hepatopathy and/or age-related remodeling), infiltrative neoplasia, other hepatopathy.
- Gallbladder debris- incidental, non-mucocele.
- Mild bilateral adrenomegaly.

Secondary Findings:

- The splenic parenchyma changes are most consistent with a benign process such as lymphoid hyperplasia, extramedullary hematopoiesis or splenitis with a low possibility of infiltrative neoplasia (i.e., lymphoma, mast cell neoplasia).
- Minor bilateral age-related renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Fine needle aspirates of the liver, particularly the large hypoechoic area on the left side are recommended (if clotting status is appropriate). 25-gauge needles should be used. If cytology results reveal benign pathology, consider further testing for Cushing's disease (i.e., low-dose dexamethasone suppression test or ACTH stimulation test), particularly if the patient is isosthenuric. Also consider three-view thoracic radiographs to assess cardiopulmonary status, if not already performed.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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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