

**DATE**

8/9/21

PRESENTING CLINICAL SIGNS

History: Presented on 7/21/21 for a 2-week history of a mass associated with the left elbow. Non-painful. Upon exam, a new 3/6 left apical murmur was noted. The patient is also having an echocardiogram today.

PATIENT

Tinkerbell Peterson

Current Medications: Frontline Plus.

SPECIES

Canine

Lab Results: Cytology of left elbow mass - consistent with Mast Cell Tumor. ALT is 147. CBC is unremarkable. T4 is normal. UA is unremarkable. Chest radiographs are unremarkable.

BREED

Rat Terrier

Radiographs: Attached separately.

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.

SEX

Spayed Female

Sedation: Not needed.

Stat Report: Not requested/declined.

AGE

10/2/07

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with mostly 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.

WEIGHT

14.8 lbs

The left kidney is normal size (4.19 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 hydroureter. Renal vasculature is normal.

INTERPRETED BY

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

The right kidney is normal size (4.33 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 hydroureter. Renal vasculature is normal.

HOSPITAL NAME

Noah's Ark Veterinary
and Boarding Resort

Adrenal Glands

The left adrenal gland is normal size (0.49 cm at cranial pole) (0.51 cm at caudal pole) (1.84 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. Gostyla

The right adrenal gland is normal size (0.46 cm at cranial pole) (0.38 cm at caudal pole) (1.70 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.

INVOICE

11607kk

Spleen

The spleen is normal in size (1.66 cm in width at the level of the hilus) with a normal capsular contour. The parenchyma is subtly mottled in appearance. No focal lesions are observed. Splenic vasculature is normal.

Liver

The liver is subjectively prominent in size with slightly swollen peripheral contours. The parenchyma is isoechoic relative to the spleen. Several, ill-defined, hypoechoic nodules/areas (the largest measuring 1.99 cm in diameter on the right side) are observed throughout the parenchyma. Hepatic vasculature and

intrahepatic biliary tracts are of normal volume with no evidence of congestion. 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 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:

- The hepatic parenchymal changes are non-specific and could be consistent with benign pathology (i.e., regenerative nodular hyperplasia). Alternatively, infiltrative neoplasia (i.e., mast cell disease) may be present.
- The splenic parenchymal changes could be consistent with lymphoid hyperplasia, extramedullary hematopoiesis, or infiltrative neoplasia (i.e., mast cell disease).

Secondary Findings:

- Minor, age-related renal pathology.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. To assess for mast cell disease in the spleen and liver, consider fine needle aspirates if the patient's clotting status is normal. Diphenhydramine should be administered at 2.2 mg/kg subcutaneously 15 minutes prior to aspiration to reduce the risk of mast cell degranulation.





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.

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)
Andrea.nicastro@sonopath.com