



PATIENT

Arya Saif

SPECIES

Canine

BREED

Siberian Husky

SEX

Female Spayed

AGE

8 Years

WEIGHT

76 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Potomac Mobile
Veterinary Ultrasound

HOSPITAL NAME

Banfield Leesburg
Village

REFERRING VET

Dr. Jarrett

INVOICE

11741kk

DATE

9/1/21

PRESENTING CLINICAL SIGNS

History: Recheck ultrasound from July; splenic mass. Sedated with Dexdomitor and Trazadone. She was fed before exam. Unfortunately, she has ruptured both her cranial cruciate ligaments and can't walk without assistance. She has an enlarged popliteal LN on the right hind leg.

Abnormal PE/Chem/CBC/UA Results: No bloodwork

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.

The left kidney is normal size (6.90 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

The right kidney is normal size (6.73 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal size (0.48 cm at cranial pole) (0.48 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.

The right adrenal gland is normal size (0.46 cm at cranial pole) (0.44 cm at caudal pole) (3.81 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.

Spleen

The spleen is subjectively normal in size with slightly swollen peripheral contours. A 3.41 x 2.70 cm heterogeneous, vascular mass is observed in the region of the hilus. In addition, a 1.36 x 1.36 cm heterogeneous nodule is observed at the caudomedial aspect. There is also a 1.18 x 0.674 cm hypoechoic nodule near the hilus. The remaining parenchyma is homogeneous. 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. Several, ill-defined, hyperechoic to slightly heterogeneous nodules masses are observed in the left to mid-liver, some of which are coalescing (the largest measuring approximately 3.2 cm). Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion. 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.



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Gastrointestinal

The gastric lumen is mildly to moderately 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 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 right limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. Medial ileac lymph nodes are prominent. The left measures 2.40 x 1.35 and the right measures 2.39 x 0.67 cm. A prominent jejunal lymph node is also seen.

Other

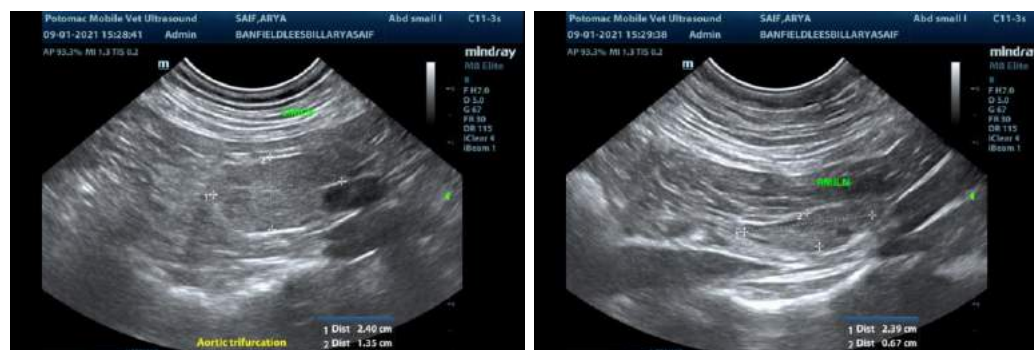
A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

ULTRASONOGRAPHIC FINDINGS

- The previously observed splenic mass appears larger compared to the last sonogram. In addition, two additional splenic nodules are seen. These findings are suggestive of progressive disease, likely neoplastic.
- The hepatic nodules/masses could be consistent with metastatic disease. Alternatively, benign pathology (i.e., regenerative nodules) is also possible.
- The prominent abdominal lymph nodes are likely reactive.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. Depending on the patient's thoracic radiograph results and quality of life, a splenectomy and liver biopsies can be considered. An abdominal CT scan would be useful in pre-surgical planning, particularly with regard to the hepatic lesions.





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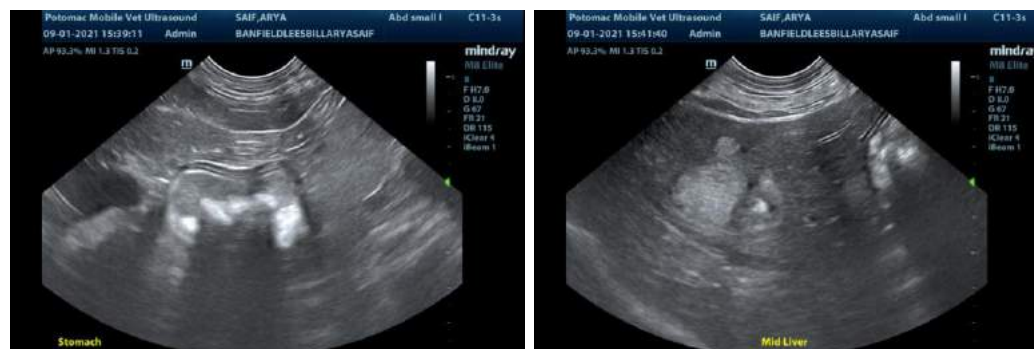
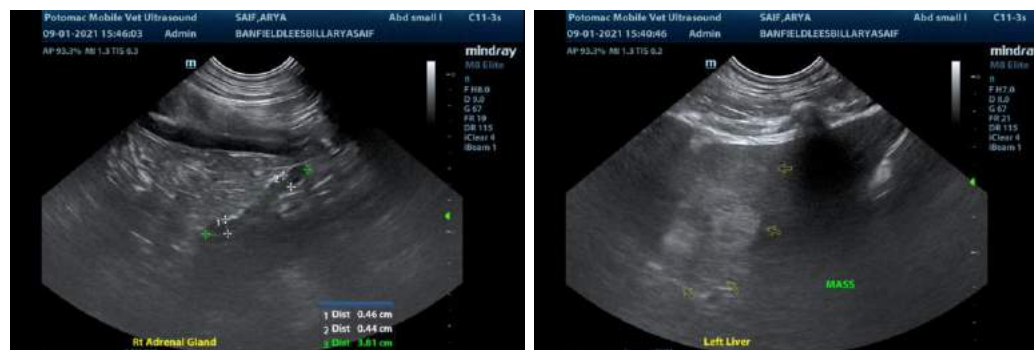
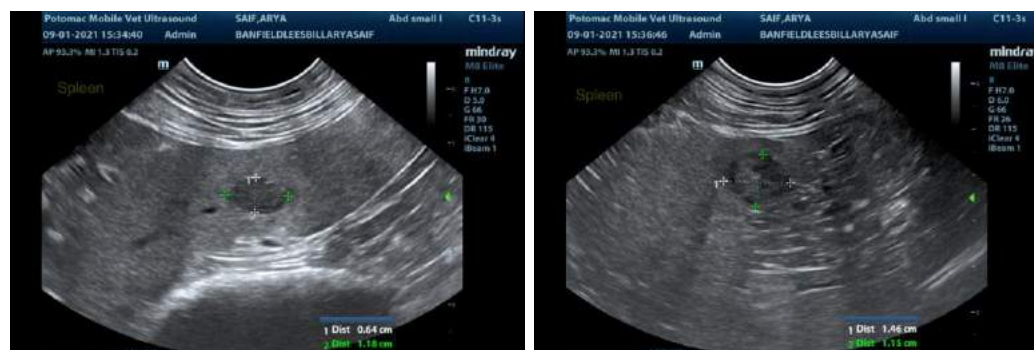
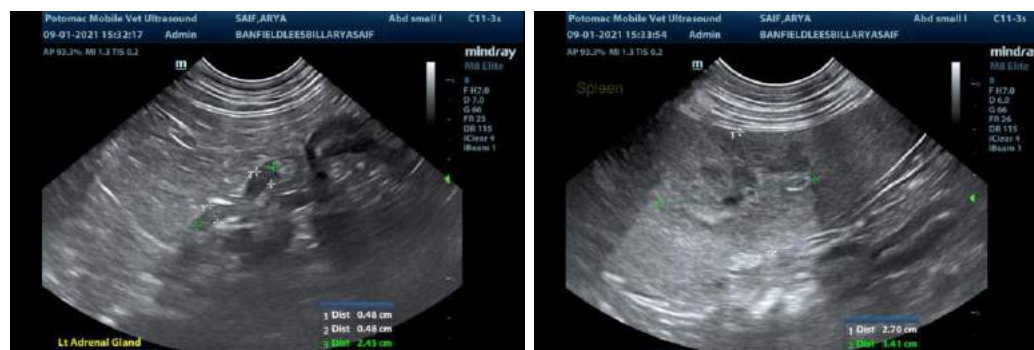
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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