

**DATE PRESENTING CLINICAL SIGNS**

9/1/2021

History: Lethargic; not eating.

PATIENT

Marley Newton

Current Medications: Not provided by the veterinarian.

Lab Results: Severe liver enzyme elevations ALKP 1609, ALT 187, elevated PSL

Radiographs: Mid-abdominal mass

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

BREEDJack Russell Terrier
mix**SEX**

Female, spayed

AGE

4/21/2009

WEIGHT

15.5 lbs.

INTERPRETED BYAndrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal
Medicine)**HOSPITAL NAME**

Padonia VH

REFERRING VET

Dr. Youssef

INVOICE

11997

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 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 (4.89 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

The right kidney is normal in size (4.92 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

Adrenal Glands

The left adrenal gland is normal size (0.52 cm at cranial pole) (0.55 cm at caudal pole) (1.57 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 (0.85 cm at cranial pole) (0.54 cm at caudal pole) (2.06 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 enlarged with irregular swollen peripheral contours. A >5 cm irregular heterogeneous cavitated vascular mass is observed within the parenchyma. The mass has ruptured within the splenic capsule. The remaining parenchyma is subtly mottled in appearance. Splenic vasculature appears normal with no evidence of thrombosis. The mesentery surrounding the spleen is hyperechoic.

Liver

The liver is subjectively enlarged with rounded peripheral contours. The parenchyma is isoechoic relative to the spleen. A few small (<1 cm) hypoechoic nodules are observed as well as a 1.09 cm hyperechoic nodule on the left side. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder is not visualized.

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 pancreas is diffusely prominent in size with slightly irregular peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat and subtly mottled in appearance. No distinct focal lesions are observed. The pancreatic duct is not overtly dilated. Surrounding mesentery is hyperechoic.

Free Abdomen

The mesentery throughout the abdomen is hyperechoic. Trace free fluid is observed. The abdominal lymph nodes are normal/not visible.

Other

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

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

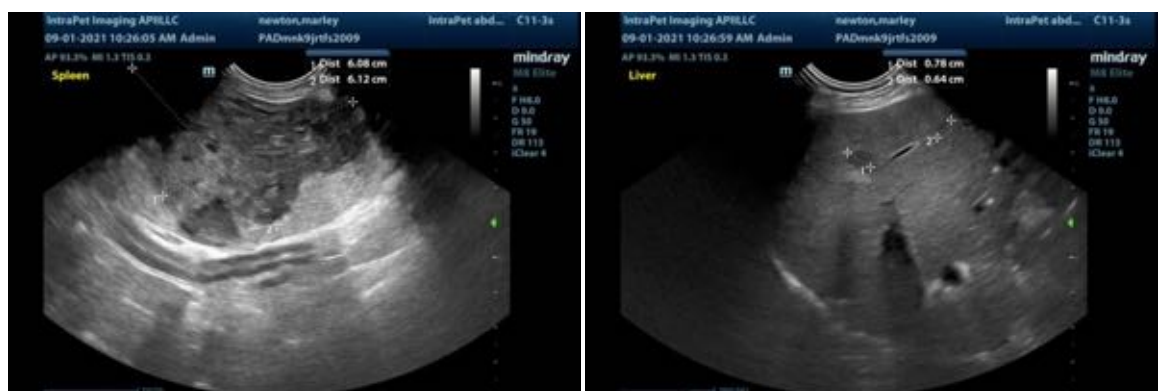
- Ruptured splenic mass with peritonitis. Neoplasia (i.e., hemangiosarcoma, hemangioma) is considered likely with a lower possibility of benign pathology (i.e., hematoma).
- The hepatic nodules trend toward the benign (i.e., regenerative nodules) with a possibility of metastatic disease, particularly the hypoechoic nodules.
- The pancreatic changes are consistent with acute or chronic active pancreatitis.

Secondary Findings:

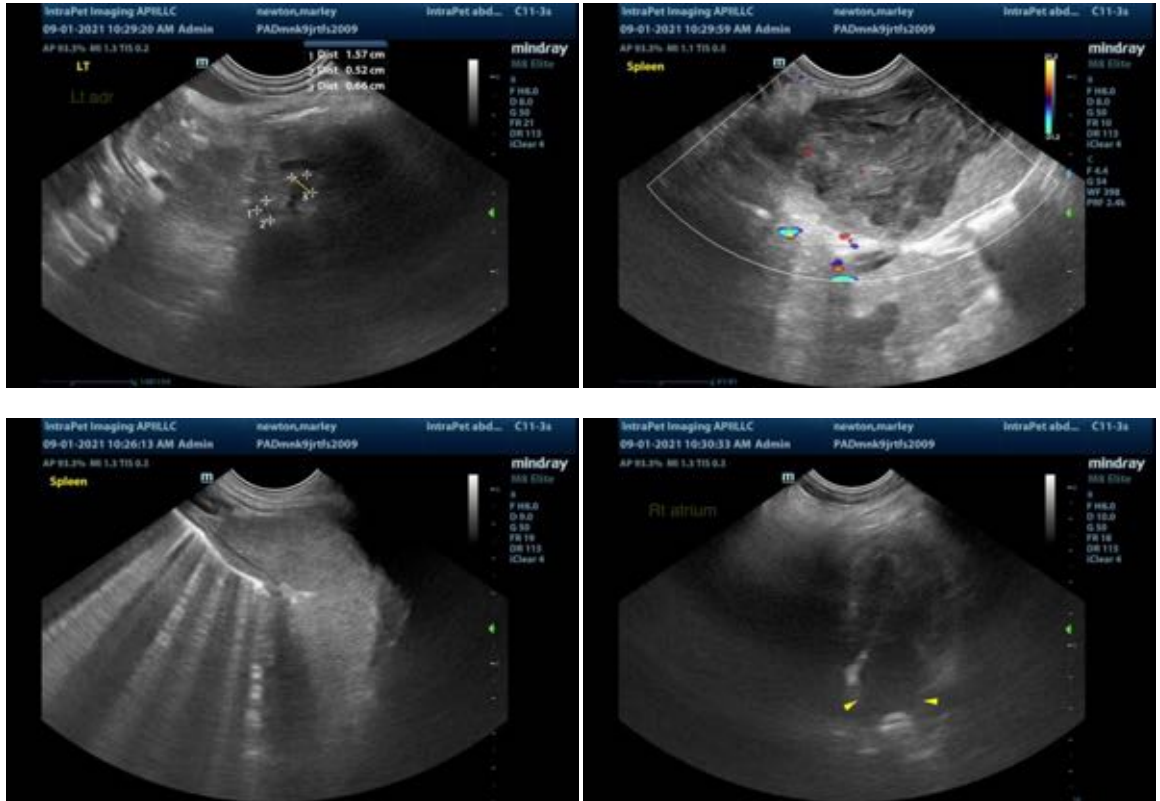
- Bilateral age-related renal changes with dystrophic mineralization.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Consider a splenectomy with submission of the spleen as well as hepatic tissue samples for histopathology.







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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