

**DATE PRESENTING CLINICAL SIGNS**

9/27/22

Distended full cranial abdomen- tense on palpation.

PATIENT

Current Medications: Gabapentin 300mg every 8-12 hours for pain with back legs.

Lab Results: ALKP elevated, abnormalities with Lipase, Cholesterol and Red blood cell size, no anemia.

Radiographs: Enlarged spleen and possible mass effect, no obvious signs of mets in thorax.

Date of Previous IntraPet Ultrasound: No previous.

Loki Evans

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

SPECIES

Imaging Performed By: Andi Parkinson, BS, RDMS.

Canine

BREED**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System**

Rottweiler

The urinary bladder wall is 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.

SEX

Male, neutered

The prostate is normal in size (1.02 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

AGE

5/20/2012

The left kidney is normal size (7.10 cm in length); normal shape and architecture with smooth peripheral margins. 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, infarcts or hydroureter.

WEIGHT

61.8 lbs.

The right kidney is normal size (7.06 cm in length); normal shape and architecture with smooth peripheral margins. 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, infarcts or hydroureter.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland is normal size (0.73 cm at cranial pole) (0.66 cm at caudal pole) (2.78 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

Animal Care Center

The right adrenal gland is normal size (0.41 cm at cranial pole) (0.57 cm at caudal pole) (2.18 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. Beavers

Spleen

The spleen is normal to slightly prominent in size (2.24 cm in width at the level of the hilus). At the medial aspect, an approximately 4 cm swelling/bulge is observed. The parenchyma throughout the spleen is slightly mottled in appearance. Splenic vasculature appears normal with no evidence of thrombosis.

INVOICE

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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. The gall bladder lumen is mildly distended. The wall is normal in thickness. A moderate amount of aggregated echogenic to mineralized partially dependent debris/sludge is observed within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is mildly distended with ingesta. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is segmentally dilated with chyme. 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. A 0.85 cm medial iliac lymph node is visible.

Other

A brief echocardiogram reveals no obvious evidence of pericardial effusion.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

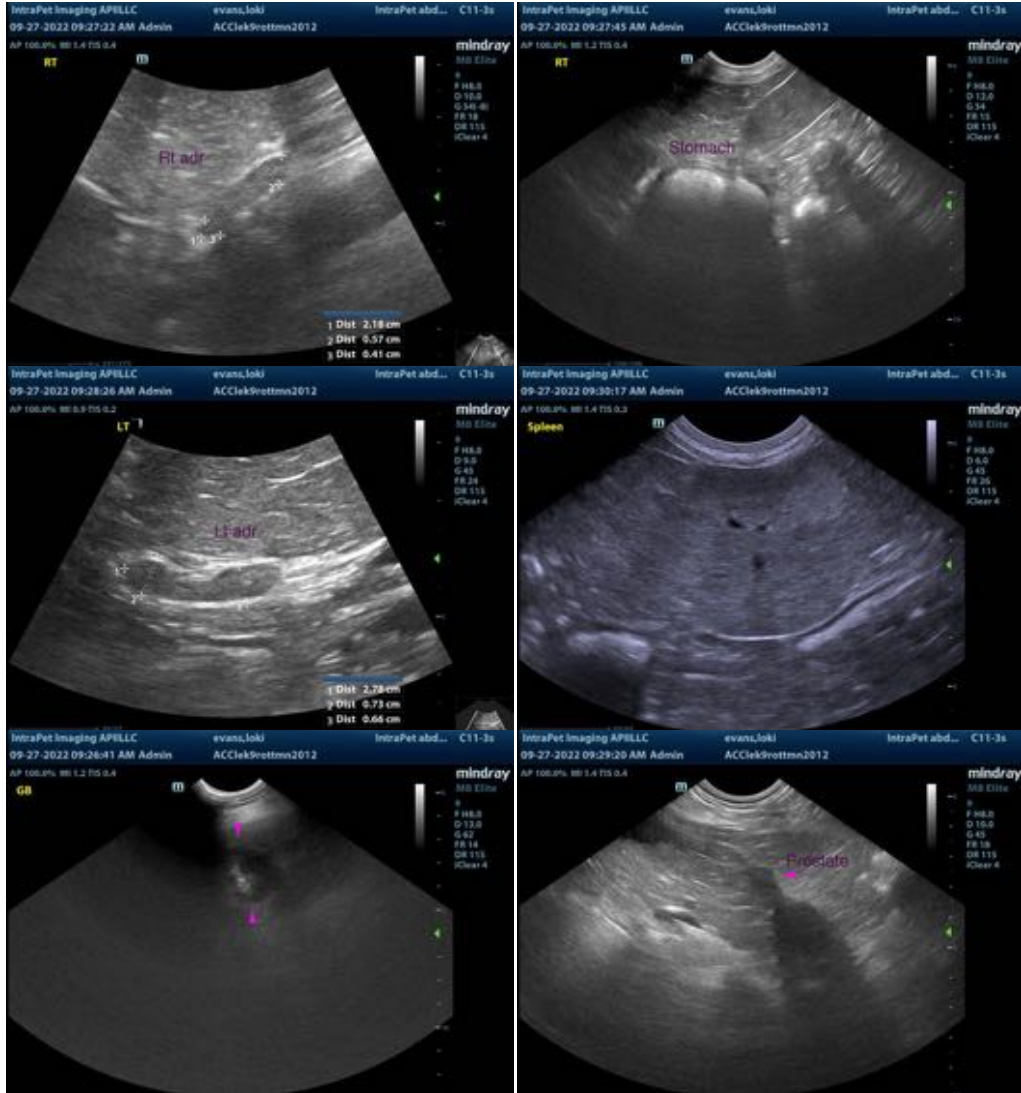
- The splenic changes, including the medial swelling could be consistent with a benign process (i.e., lymphoid hyperplasia, extramedullary hematopoiesis, splenitis or antigenic stimulation). Alternatively, emerging neoplasia (i.e., round cell tumor, sarcoma) is possible.

Secondary Findings:

- Minor, bilateral, degenerative renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider a fine needle aspirate of the spleen (if clotting status is appropriate). A 25 gauge needle should be used.
- If the patient is experiencing persistent abdominal pain, also consider the following:
 1. Urine culture and sensitivity to assess for occult pyelonephritis.
 2. A cPLI to evaluate for pancreatitis.
 3. Orthopedic and neurologic examinations to assess for non-metabolic causes of pain, which may be referring to the abdomen.



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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