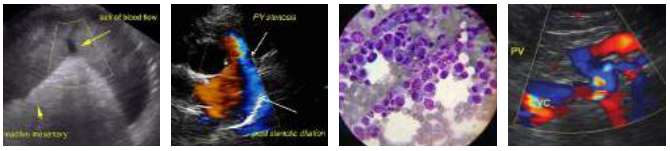
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Hubble Kuny

SPECIES
Canine

BREED
West Highland White Terrier

SEX
Male Neutered

AGE
11 Years

WEIGHT
11 kgs.

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

IMAGING PERFORMED BY
Dr. Belan

HOSPITAL NAME
Glamorgan Animal Clinic

REFERRING VET
Dr. MacAulay

INVOICE
11760kk

DATE
9/3/21

PRESENTING CLINICAL SIGNS

History: Anorexic seen at emergency center and abdominal mass diagnosed.

Abnormal PE/Chem/CBC/UA Results: Elevated SDMA and creatinine as well as amylase lipase and cPL.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

**Forty still images and twelve video clips are available for interpretation.*

Urinary System

Four still images of the urinary bladder are available for interpretation. The bladder is mildly distended with mostly anechoic urine. The wall in the region of the apex is mildly thickened (up to 0.29 cm and irregular). No cystic calculi are observed. There is no evidence of cystic calculi. The region of the trigone and the visible portion of the proximal urethra are normal.

The prostate is normal in size (0.73 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

The left kidney is enlarged (6.03 cm in length) with a slightly irregular shape. The cortex is variably thickened with a mass effect at the medial aspect. The renal cortical parenchyma is heterogeneous in appearance. An area of mineralization is observed just medial to the renal pelvis. Moderate to severe pyelectasia (1.58 cm in the longitudinal plane) is visualized. Proximal hydroureter is present (0.48 cm in diameter). Renal vasculature is normal.

The right kidney is enlarged (approximately 6.53 cm in length) with an irregular shape. The cortex is variably thickened, particularly at the medial aspect. The renal cortical parenchyma is heterogeneous in appearance. Mild pyelectasia is present 0.24 cm in the transverse plane. A5.13 x 4.35 cm hypoechoic to slightly heterogeneous mass is arising from the cranial pole. There is no evidence of nephroliths. The right proximal ureter is slightly dilated (0.18 cm in diameter). Renal vasculature is normal. Surrounding mesentery is hyperechoic.

Adrenal Glands

The left adrenal gland is severely enlarged (2.68 cm x 2.55 cm) and irregular with a mass-effect throughout the gland. The parenchyma is heterogenous with a loss of glandular detail. There is no obvious evidence of vascular invasion. Surrounding mesentery is hyperechoic.

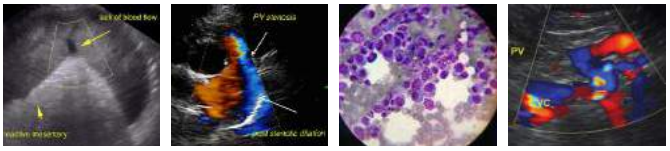
The caudal pole of the right adrenal gland is visualized and is mildly enlarged (0.94 cm) with an irregular shape and hypoechoic parenchyma. There is some loss of glandular detail.

Spleen

The spleen is normal in size (1.66 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. One to two small myelolipomas are observed in the region of the hilus. Splenic vasculature is normal.

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



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Hubble Kuny

SPECIES
Canine

BREED
West Highland White Terrier

SEX
Male Neutered

AGE
11 Years

WEIGHT
11 kgs.

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

IMAGING PERFORMED BY
Dr. Belan

HOSPITAL NAME
Glamorgan Animal Clinic

REFERRING VET
Dr. MacAulay

INVOICE
11760kk

DATE
9/3/21

distended. The wall is normal in thickness. A moderate to large amount of mostly gravity-dependent, echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric wall is mildly thickened (up to 0.72 cm) with a prominent muscularis layer but otherwise has retention of the normal layering pattern. The small intestinal lumen is not dilated. The small intestinal wall is normal in thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

Pancreas

The left and 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

There is no evidence of free fluid. A few prominent lymph nodes are observed in the sublumbar area and adjacent to the ileocolic junction. Surrounding mesentery is hyperechoic.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

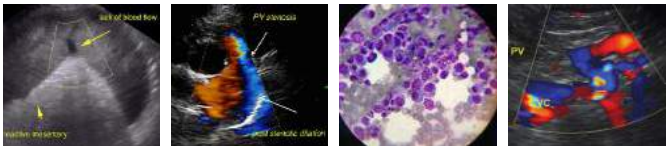
- Suspected infiltrative disease in both kidneys with bilaterally pyelectasia, more severe on the left, and regional retroperitonitis. Neoplasia (i.e., round cell tumor) is suspected with a lower possibility of a severe inflammatory process. Mild left hydroureter.
- Left adrenal mass-effect. Neoplasia is suspected with a lower possibility of benign pathology (i.e., nodular hyperplasia.
- Mild right adrenomegaly, consistent with hyperplasia.

Secondary Findings:

- Gall bladder debris – incidental.
- The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.
- The prominent abdominal lymph nodes are most consistent with reactive lymphadenitis or lymphoid hyperplasia. Neoplastic infiltration is considered less likely.
- The gastric wall changes are most consistent with inflammation with a lower possibility of emerging neoplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
2. Consider a fine needle aspirate of the kidneys (if clotting status and blood pressure are normal). Aspiration should be directed towards the mass-like areas.
3. A urine culture and sensitivity should also be considered.



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Hubble Kuny

SPECIES

Canine

BREED

West Highland White Terrier

SEX

Male Neutered

AGE

11 Years

WEIGHT

11 kgs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Glamorgan Animal Clinic

REFERRING VET

Dr. MacAulay

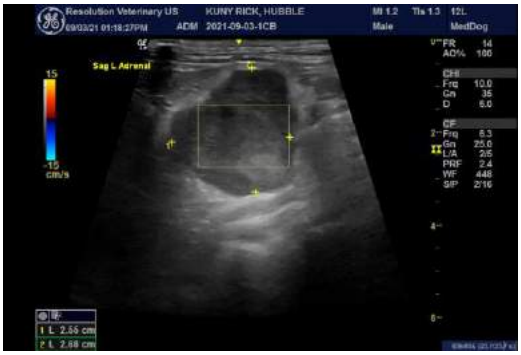
INVOICE

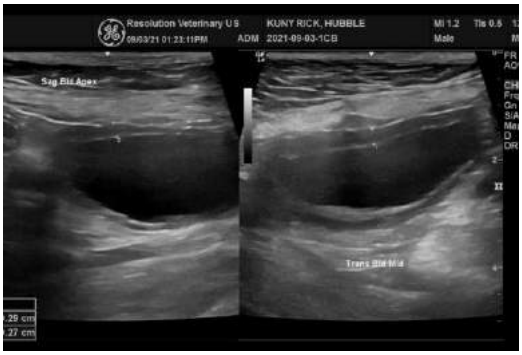
11760kk

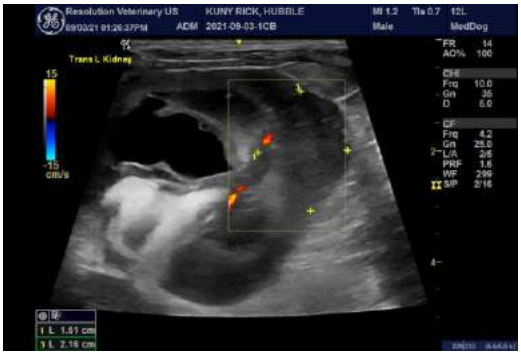
DATE

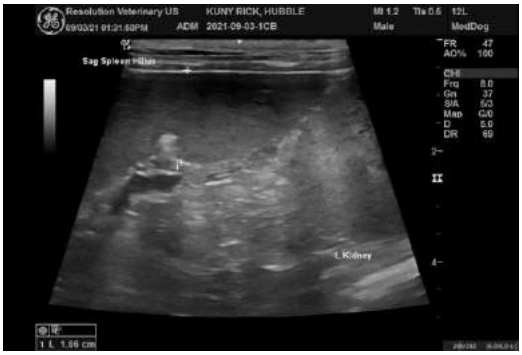
9/3/21

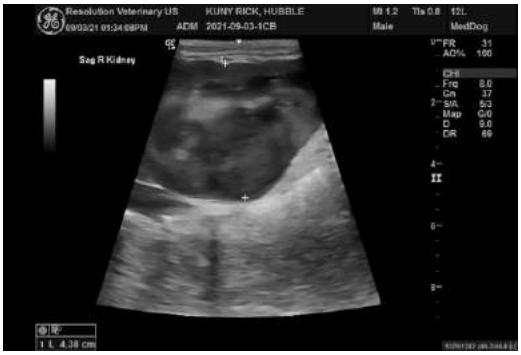
4. Unfortunately, given the severity of the sonographic changes, the patient has a guarded prognosis.

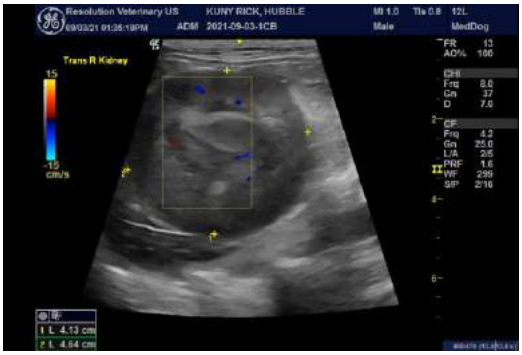


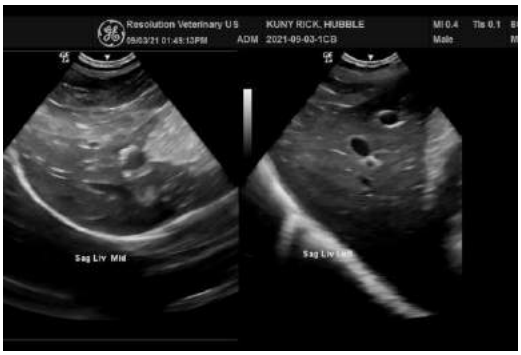


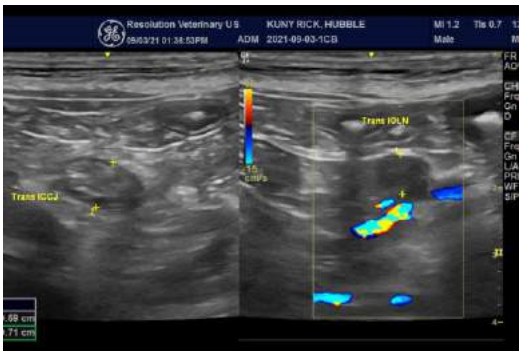




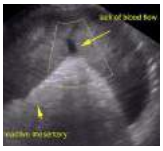
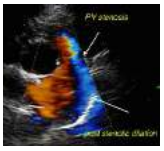
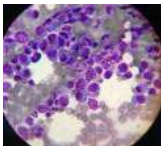
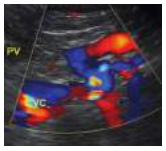








SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Hubble Kuny

SPECIES

Canine

BREED

West Highland White Terrier

SEX

Male Neutered

AGE

11 Years

WEIGHT

11 kgs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Belan

HOSPITAL NAME

Glamorgan Animal Clinic

REFERRING VET

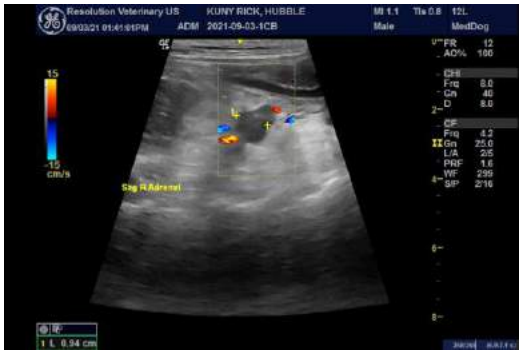
Dr. MacAulay

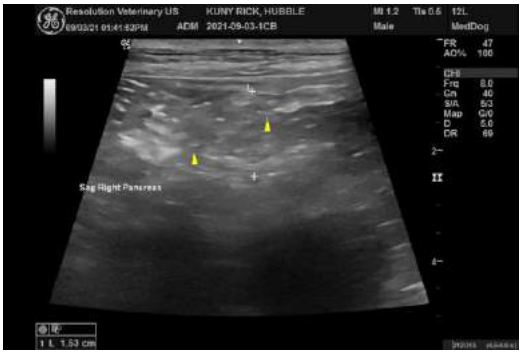
INVOICE

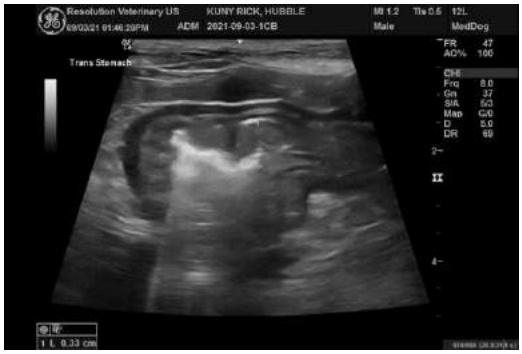
11760kk

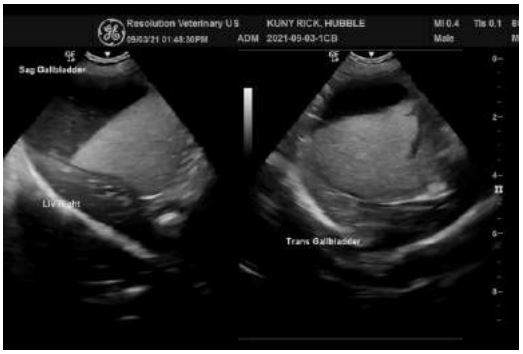
DATE

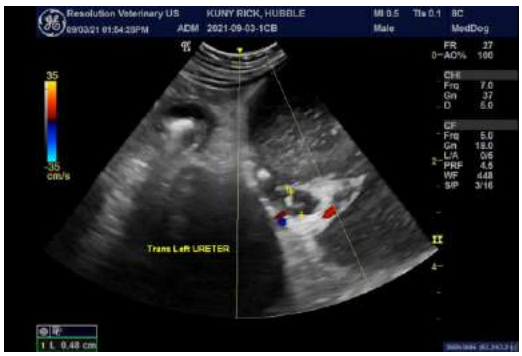
9/3/21

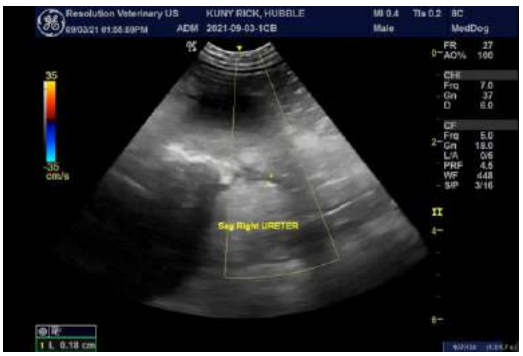


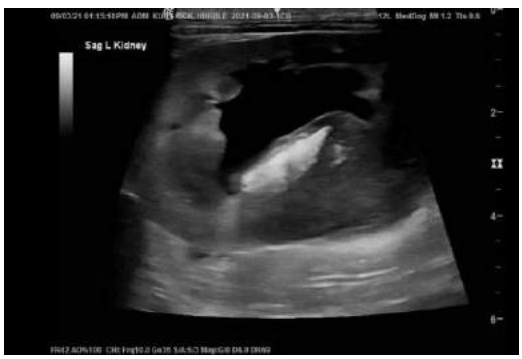


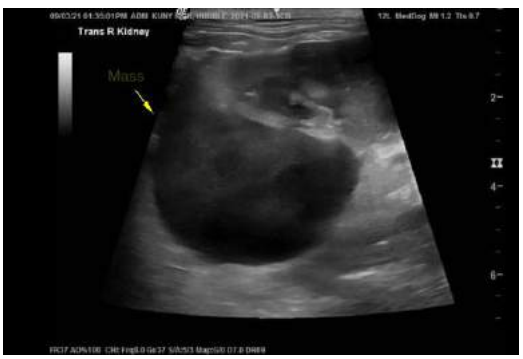








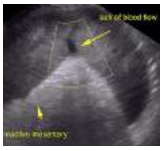
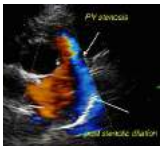
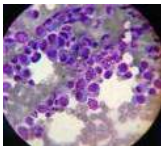
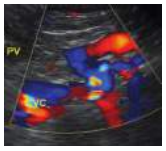




The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

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

PATIENT
Hubble Kuny

SPECIES
Canine

BREED
West Highland White Terrier

SEX
Male Neutered

AGE
11 Years

WEIGHT
11 kgs.

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

IMAGING PERFORMED BY
Dr. Belan

HOSPITAL NAME
Glamorgan Animal Clinic

REFERRING VET
Dr. MacAulay

INVOICE
11760kk

DATE
9/3/21