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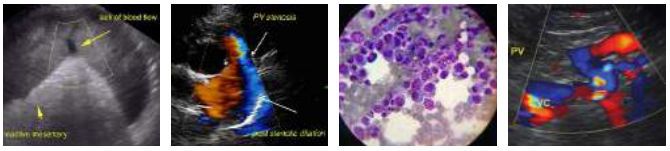


PATIENT
Oscar Carrozza

SPECIES
Canine

BREED
German Shorthair Pointer

SEX
Male Neutered

AGE
9 years

WEIGHT
64 lbs.

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

IMAGING PERFORMED BY
Shari Reffi CVT

HOSPITAL NAME
Shohola VH

REFERRING VET
Dr. DeMeo

INVOICE
11757kk

DATE
9/3/21

PRESENTING CLINICAL SIGNS

History: Follow-up u/s on splenic mass from 4/2021. The patient was sedated for the exam.

Current meds: Ace Tamsulosin, Diazepam for US, Trazadone and Gabapentin given 8:25am.

Abnormal PE/Chem/CBC/UA Results: USG 1.040, Neg urine culture 7/12/21

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is distended. The wall is normal in thickness with a smooth mucosal surface. A small to moderate amount of gravity-dependent, mineralized sand as well as a small amount of suspended echogenic debris is observed within the lumen. The region of the trigone and the visible portion of the proximal urethra are normal.

The prostate is normal in size (1.46 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

The left kidney is normal size (7.25 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 hydroureter. Renal vasculature is normal.

The right kidney is normal size (6.96 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 hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal size (0.59 cm at cranial pole) (0.46 cm at caudal pole) (1.66 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.

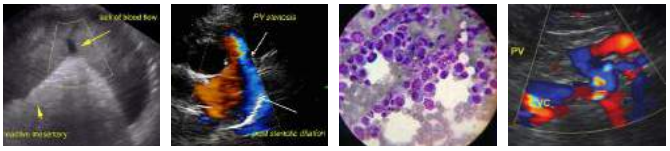
The right adrenal gland is normal size (1.60 cm at cranial pole) (0.84 cm at caudal pole) (3.20 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

An 8.32 x 7.42 cm heterogeneous, cavitated, vascular mass is observed just distal to the hilus. Some of the cavitations contained suspended, echogenic debris. The mass causes capsular expansion. In addition, an approximately 8.00 cm isoechoic swelling/mass is visualized and is thought to be arising from the caudal aspect. The spleen is enlarged overall. The remaining parenchyma is mostly homogeneous in appearance. Splenic vasculature is 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 and is slightly mottled in appearance. No distinct focal lesions are observed. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of



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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 mildly 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

A portion of the pancreas is obscured by the large splenic mass. In the visualized portions, no obvious pathology is observed.

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. 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:

- Splenic masses. Both of which appear larger compared to the previous sonogram. The cavitated mass is particularly concerning for neoplasia (i.e., hemangiosarcoma, hemangioma). The isoechoic swelling could be consistent with malignant or benign pathology.

Secondary Findings:

- Urinary bladder sand.
- The hepatic parenchymal changes are non-specific and are most consistent with benign, age-related pathology; however, metastatic disease cannot be completely excluded.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
2. If there is no evidence of pulmonary metastatic disease, a splenectomy is recommended. Liver biopsies should also be obtained at the time of surgery to assess for micro-metastasis.

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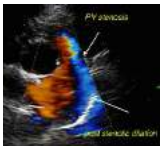
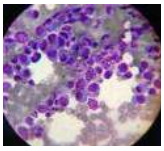
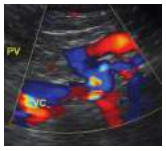

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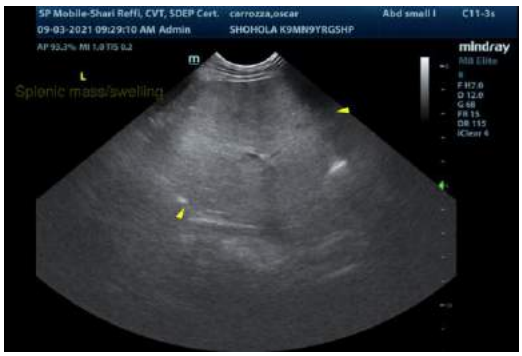

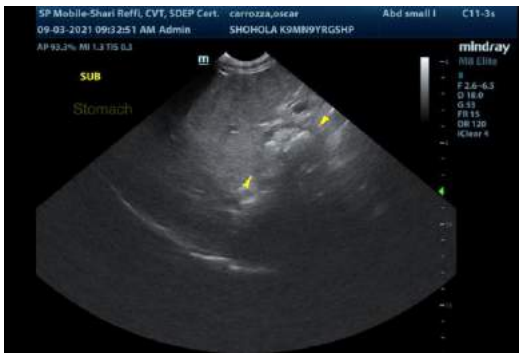

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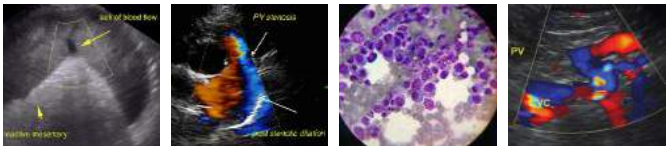

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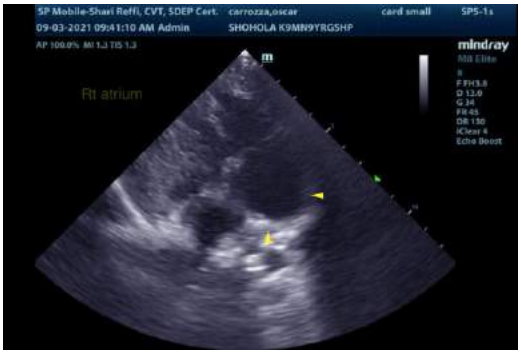

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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