



PATIENT

PRESENTING CLINICAL SIGNS

Cherry Cooper-Martin

History: Weight loss, muscle wasting, not eating well. Abdomen soft with no pain response. Possible firm structure palpated cranially, cannot fully palpate due to location. No meds.

SPECIES

Abnormal PE/Chem/CBC/UA Results: Retics 7.8, PLT 73, Phos 0.7, CA 3.84, ALKP 297, GGT 13, Urine sp. grav - 1.018

Canine

BREED

Lab mix

SEX

Female, spayed

AGE

6 Yrs.

WEIGHT

25 kg.

INTERPRETED BY

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

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

Beatties PH Stoney
Creek

REFERRING VET

Dr. Baskin

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. A scant amount of echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone is normal.

The left kidney is normal size (6.21 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 (7.37 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 (0.65 cm at cranial pole) (0.50 cm at caudal pole) (2.74 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.

One still image of the right adrenal gland is available for interpretation. The right adrenal gland is normal size (1.63 cm at cranial pole) (0.77 cm at caudal pole) (2.74 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 normal in size (1.44 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

Liver

The liver is subjectively prominent in size with slightly swollen peripheral contours. The parenchyma is hypoechoic relative to the spleen and slightly heterogeneous with a coarse echotexture. An approximately 9 cm hypoechoic area/mass is observed adjacent to the diaphragm. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is moderately distended. The wall is thin and smooth. A small amount of mineralized sand +/- tiny choleliths are observed within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

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5/9/23



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The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. 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. There is no evidence of an obstructive pattern.

SPECIES

Pancreas

Canine

The pancreas is somewhat obscured by the severe lymphadenopathy in the cranial abdomen. In the visualized portions, no obvious abnormalities are seen.

BREED

Free Abdomen

Lab mix

Trace free fluid is observed. The lymph nodes throughout the cranial to mid-abdomen are severely enlarged (up to 6.6 cm in length), creating a mass effect. The nodes are rounded and hypoechoic to slightly heterogeneous in appearance. The mesentery surrounding the lymph nodes is hyperechoic. An enlarged rounded lymph node is observed at the aortic trifurcation, measuring 3.2 cm in length.

SEX

Female, spayed

AGE

6 Yrs.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Severe abdominal lymphadenopathy. Neoplasia (i.e., lymphoma) is suspected with a lower possibility of severe lymphadenitis (i.e., pyogranulomatous).
- The hepatic mass/area is also concerning for a neoplastic process (i.e., lymphoma). However, a non-neoplastic lesion (i.e., inflammatory focus) cannot be completely excluded.
- Trace ascites.

Secondary Findings:

- Mineralized gallbladder debris +/- tiny choleliths- non-obstructive.

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(*Small Animal Internal
Medicine*)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- Fine needle aspirates of the enlarged abdominal lymph nodes are recommended (if clotting status is appropriate). 25 gauge needles should be used. If cytology results are inconclusive, more advanced testing (i.e., PARR, biopsies) may be necessary to get a definitive diagnosis.

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. 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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