


PATIENT

Lance McRae

PRESENTING CLINICAL SIGNS

History: Over last few days has been increasingly lethargic, anorexic, yellowish watery stools. Seems to need to lay down after only taking a few steps. Owner noticed abdomen looking distended today.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Urinary System
BREED

German shepherd

The urinary bladder is mildly distended. The wall is of appropriate thickness for the level of repletion. A small amount of suspended echogenic debris is observed within the lumen. The region of the trigone is normal.

SEX

Male, neutered

The prostate is not definitively visualized due to its pelvic location.

AGE

11 Yrs.

The left kidney is normal size (6.85 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.

WEIGHT

76 lbs.

The right kidney is normal size (6.92 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 region of the adrenal glands is evaluated. No obvious pathology is observed.

INTERPRETED BY

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

Spleen

A >9 cm irregular cavitated ruptured mass is observed in the mid-abdominal cavity and is suspected to be arising from the spleen. The more normal appearing splenic tissue has irregular peripheral contours and mottled parenchyma. Splenic vasculature appears normal with no evidence of thrombosis.

**IMAGING
 PERFORMED BY**

Crystal Hill

Liver

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and subtly mottled in appearance. No distinct focal lesions are observed. 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. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

HOSPITAL NAME

The Maples AH

Gastrointestinal
REFERRING VET

Dr. Kazienko

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.

INVOICE

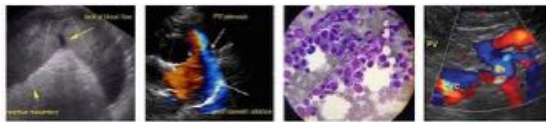
11990

Pancreas

The region of the pancreas is somewhat obscured by the large abdominal mass, however no obvious pathology is observed in this region.

DATE

9/1/2021



PATIENT *Free Abdomen*

Lance McRae A large amount of echogenic free fluid is present. The mesentery throughout the abdomen is hyperechoic and slightly irregular. The abdominal lymph nodes are normal/not visible.

SPECIES *Other*

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

BREED

German shepherd

ULTRASONOGRAPHIC FINDINGS

SEX

Male, neutered

- Cavitated mid-abdominal mass, suspected to be of splenic origin. Neoplasia (i.e., hemangiosarcoma, hemangioma) is suspected with a lower possibility of benign pathology (i.e., hematoma).
- Suspected hemoabdomen.
- The hepatic parenchymal changes are most consistent with age-related remodeling. However, micrometastatic disease cannot be excluded.

AGE

11 Yrs.

WEIGHT

76 lbs.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- If there is no evidence of pulmonary metastatic disease, consider a splenectomy with submission of the spleen for histopathology. A liver biopsy should also be obtained to assess for metastatic disease.

INTERPRETED BY

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

IMAGING PERFORMED BY

Crystal Hill

HOSPITAL NAME

The Maples AH

REFERRING VET

Dr. Kazienko

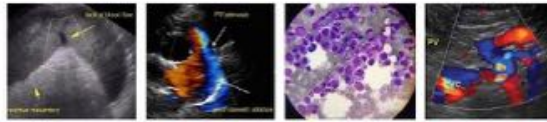
INVOICE

11990

DATE

9/1/2021





PATIENT

Lance McRae

SPECIES

Canine

BREED

German shepherd

SEX

Male, neutered

AGE

11 Yrs.

WEIGHT

76 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Crystal Hill

HOSPITAL NAME

The Maples AH

REFERRING VET

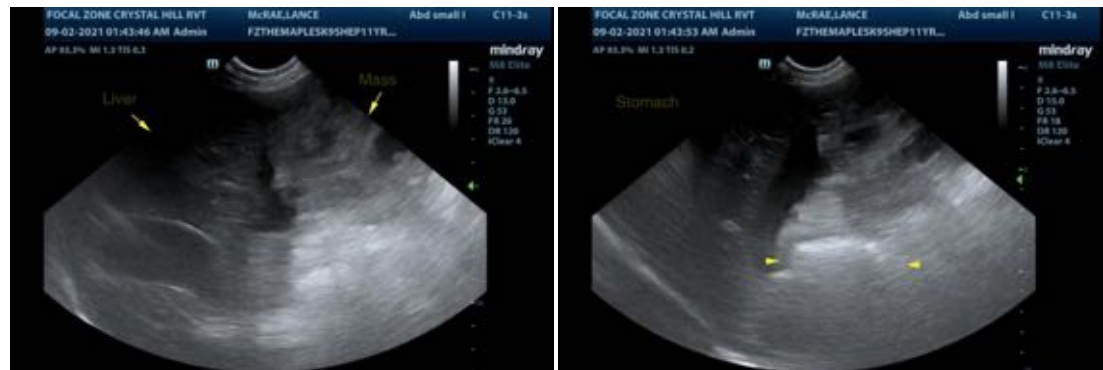
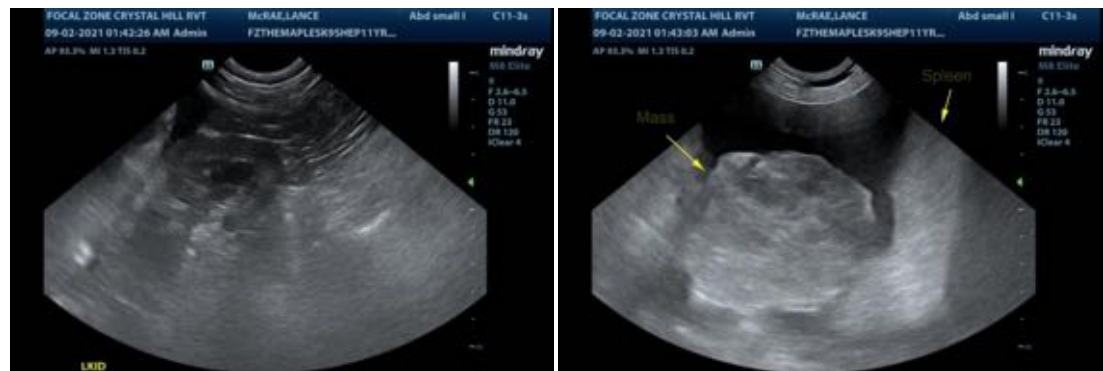
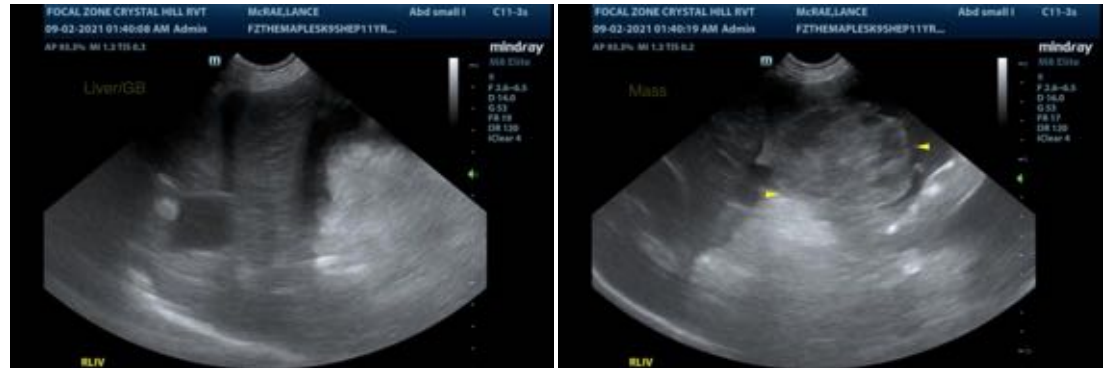
Dr. Kazienko

INVOICE

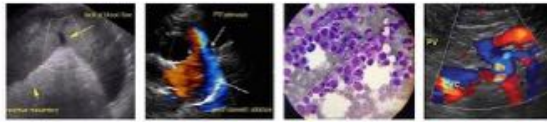
11990

DATE

9/1/2021



The information and recommendations provided are based on the images presented by the referring



PATIENT

Lance McRae

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.

SPECIES

Canine

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

BREED

German shepherd

Andrea.nicastro@sonopath.com

SEX

Male, neutered

AGE

11 Yrs.

WEIGHT

76 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Crystal Hill

HOSPITAL NAME

The Maples AH

REFERRING VET

Dr. Kazienko

INVOICE

11990

DATE

9/1/2021