



PATIENT

Scout Daggy

PRESENTING CLINICAL SIGNS

History: Enlarged LNs seen on in-house scan.
Abnormal PE/Chem/CBC/UA Results: Ca 14.2, AST 72

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Mixed breed

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is distended. A small amount of aggregated hyperechoic to mineralized suspended debris is observed within the lumen. 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 (1.08 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

AGE

9 Yrs.

The left kidney is normal size (6.80 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

The right kidney is normal size (6.37 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland is normal size (0.39 cm at cranial pole) (0.56 cm at caudal pole) (2.03 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.

IMAGING PERFORMED BY

Jessica Miller

The right adrenal gland is normal size (0.76 cm at cranial pole) (0.46 cm at caudal pole) (2.34 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

All Creatures Great
and Small

Spleen

The spleen is normal in size (2.09 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.

REFERRING VET

Dr. Mitrovic

Liver

The liver is subjectively normal in size with normal curvilinear peripheral contour. The parenchyma is hypoechoic relative to the spleen and diffusely homogeneous in appearance. No focal lesions are observed. There is an increase in portal markings. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is moderately distended. The wall is thickened (up to 0.43 cm), irregular and hyperechoic. Luminal contents are mostly anechoic. The cystic and common bile ducts are normal/not seen.

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Gastrointestinal

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The gastric lumen is mildly to moderately distended with ingesta. 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. No obstructive disease is noted.

SPECIES

Canine

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.

BREED

Mixed breed

Free Abdomen

SEX

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Trace free fluid is observed. At the level of the aortic trifurcation and extending towards the pelvis, several enlarged rounded heterogeneous lymph nodes are visualized, some of which are cavitated. The largest node is >7 cm. The mesentery surrounding the nodes is hyperechoic.

AGE

9 Yrs.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Severe caudal abdominal lymphadenopathy. Neoplasia (i.e., lymphoma) is suspected with a lower possibility of a severe inflammatory process (i.e., pyogranulomatous lymphadenitis). Adjacent peritonitis is present.

Secondary Findings:

- The hepatic and gallbladder changes are most consistent with cholangiohepatitis/cholecystitis respectively. The gallbladder wall is characteristic for a "porcelain" gallbladder, which is commonly seen with cholecystitis but in rare instances, can occur with biliary carcinoma. Correlations with the patient's liver values is recommended.

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Medicine*)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- Ultrasound-guided fine needle aspirates of the more solid caudal abdominal lymph nodes are recommended if clotting status is appropriate. If results are inconclusive, flow cytometry or surgical biopsies may be necessary to get a definitive diagnosis.

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BREED

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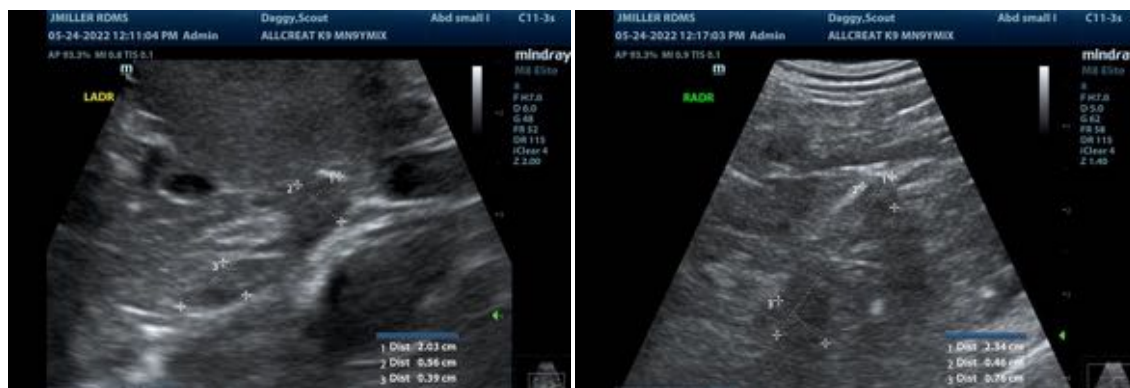
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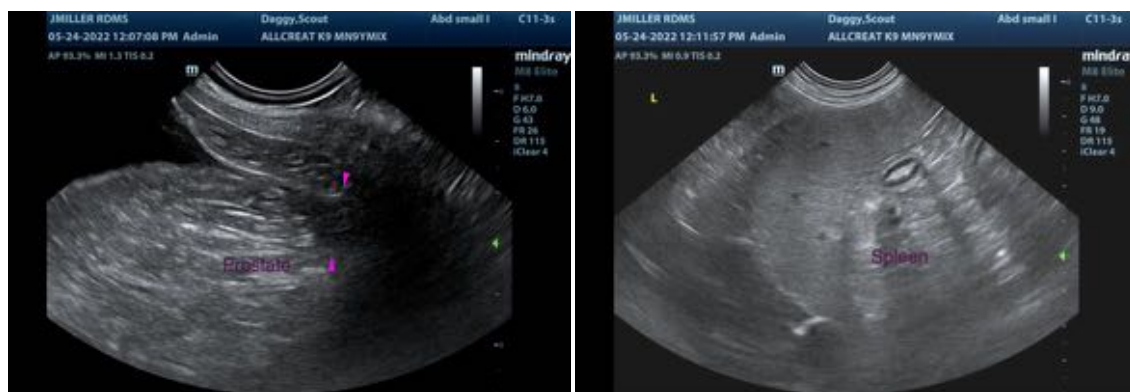
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The information and recommendations provided are based on the images presented by the referring



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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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