**PATIENT**

Maya Erban

**PRESENTING CLINICAL SIGNS**

History: Annual bloodwork abnormalities

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Elevated BUN, creatinine, and liver enzymes.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****Urinary System****BREED**

Standard Poodle

The urinary bladder is moderately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

**SEX**

Spayed Female

The right kidney is normal in size (7.3 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

**AGE**

12 Years

The left kidney is normal in size (7.55 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

**Adrenal Glands****WEIGHT**

56 Lbs.

The right adrenal gland is normal in size (3.67 cm long x 1.26 cm cranial, 0.72 cm caudal), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

The left adrenal gland is normal in size (2.23 cm long x 0.44 cm cranial, 0.54 cm caudal), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

**INTERPRETED BY**Beth Johnson, DVM  
DACVIM**Spleen**

Spleen is subjectively enlarged in size with rounded margins but intact capsule. Parenchyma is homogeneously coarse/mottled in echotexture and normal to hypoechoic in echogenicity. Splenic vasculature appears normal. A 2.0 cm x 3.0 cm hypoechoic non-capsule disrupting mass was noted. Multifocal well-demarcated hyperechoic homogenous nodules were present.

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**Liver**

The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. Visible vasculature and biliary tree appear normal without distension or congestion. A 2.0 cm mixed but primarily hyperechoic mass was noted in the deep liver.

**HOSPITAL NAME**

SVS Imaging QC

The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

**REFERRING VET**

Dr. Barbara Shields

**Gastrointestinal**

The stomach wall is normal in thickness (canine &lt; 0.5 cm and feline &lt; 0.4 cm) and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent. No appreciable lymphadenopathy in these images.

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The visible small intestines are normal in wall thickness and layering (canine duodenum &lt; 0.5 cm and feline duodenum &lt; 0.4 cm; other &lt; 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

**DATE**

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**PATIENT**

Maya Erban The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

**SPECIES*****Pancreas***

Canine

The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

**BREED*****Free Abdomen***

Standard Poodle

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy.

**SEX****ULTRASONOGRAPHIC FINDINGS**

Spayed Female

- A mixed but primarily hyperechoic liver mass in the left liver, differentials for which include both benign conditions, such as nodular hyperplasia, as well as primary hepatic neoplasia and/or round cell neoplasia or metastatic neoplasia.

**AGE**

12 Years

- Coarse splenomegaly can be associated with congestion caused by sedation (if sedated) but can also be associated with diffuse infiltrative disease. Both benign conditions such as extramedullary hematopoiesis, lymphoid hyperplasia, amyloidosis (leave amyloidosis out if canine) as well as infiltrative neoplastic diseases such as round cell neoplasia should be considered.

**WEIGHT**

56 Lbs.

- The hyperechoic splenic nodules are most consistent with benign myelolipomas. Other differentials such as fibrosis or calcification caused by old hematomas or infarcts, chronic inflammation, granulomatous disease or metastatic disease cannot be ruled out, but are less likely. Hypoechoic splenic nodules/mass, differentials for which include benign extramedullary hematopoiesis, nodular hyperplasia, hematoma, etc. However, infiltrative neoplasia, such as sarcoma and/or even round cell neoplasia can mimic benign lesions and cannot be definitively ruled out.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

Sarah Pender, CVT

**HOSPITAL NAME**

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Dr. Barbara Shields

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recommendations for this patient include a fine needle aspirate of the liver mass and the splenic mass, if patients coagulation status is appropriate. Other recommendations, given the reported azotemia and increased liver enzymes, include a urinalysis +/- urine culture (if indicated, based on urinalysis results), blood pressure and testing for leptospirosis. If not recently evaluated, three-view thoracic radiographs are also recommended.



PATIENT

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SPECIES

Canine

BREED

Standard Poodle

SEX

Spayed Female

AGE

12 Years

WEIGHT

56 Lbs.

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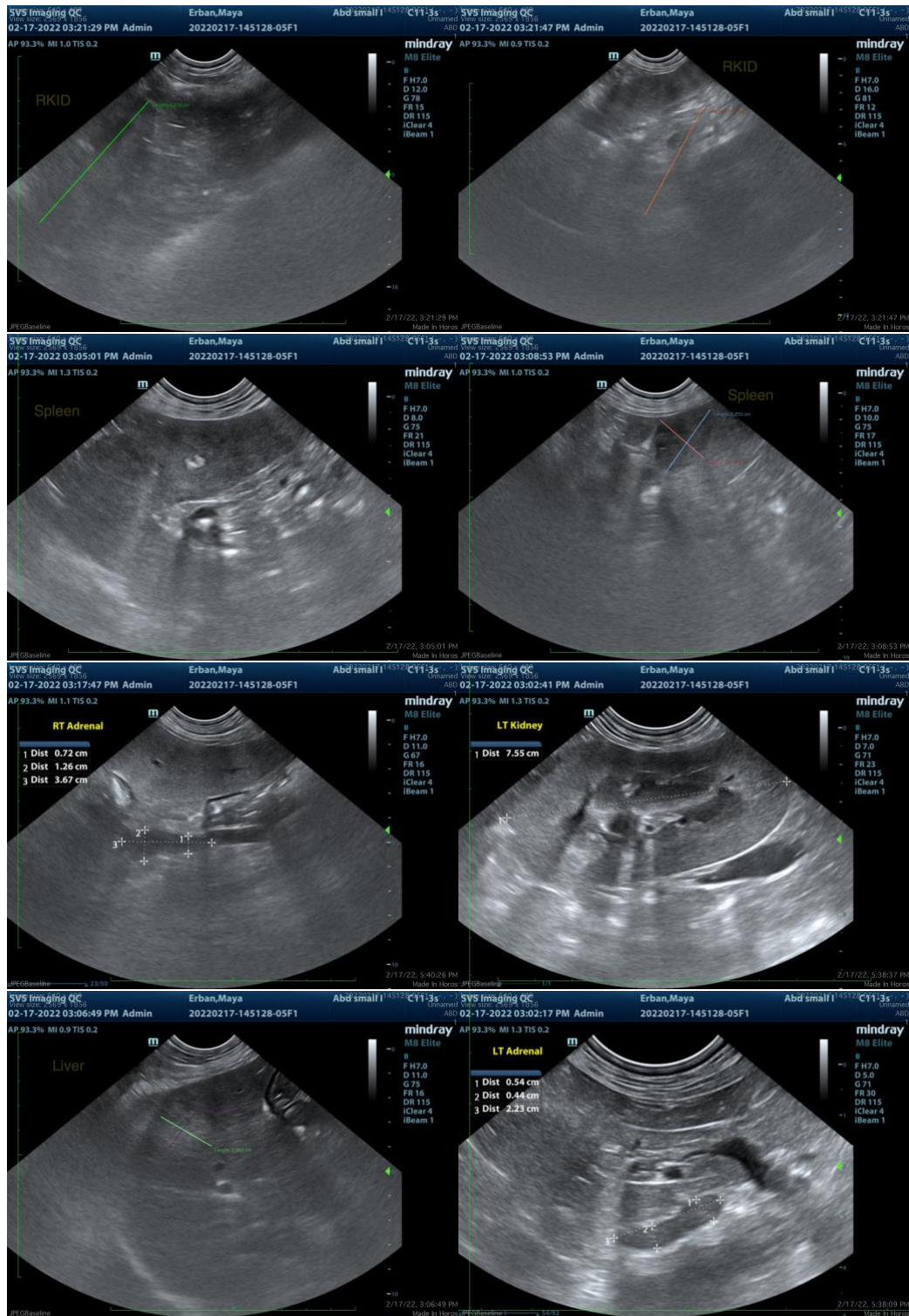
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Thank you for this referral. If the clinical or image interpretation does not parallel your findings or if I

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svsimaging.net 309-737-3070



Clinical Sonography & Telecytology

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

**PATIENT**

can be of any further assistance please contact me.

Maya Erban

**Beth Johnson**, DVM, DACVIM

Beth.Johnson@sonopath.com

**SPECIES**

Canine

**BREED**

Standard Poodle

**SEX**

Spayed Female

**AGE**

12 Years

**WEIGHT**

56 Lbs.

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