



PATIENT	PRESENTING CLINICAL SIGNS
Atla Overly	History: Progressive weight loss, recent development of peruanas fistulas Abnormal PE/Chem/CBC/UA Results: No significant changes on recent labwork
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	Urinary bladder is only mildly distended and contains primarily anechoic contents with some echogenic and mineral suspended debris noted. The apical urinary bladder wall is diffusely thick, measuring 0.72 cm thick. Mucosa is hyperechoic and irregular. In the trigone, the tissue extends 1.2 cm into the lumen and appears potentially mineralized. This could be urinary bladder mineral overlying benign inflammatory wall, but there is some concern for a mineralized mass.
German Shepherd	
SEX	Left kidney is normal is size (7.1 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
Spayed Female	
AGE	Right kidney is normal is size (5.76 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
13 Years	
WEIGHT	Adrenal Glands
50 Pounds	Left adrenal gland is normal in size (0.51 cm at cranial pole and 0.57 cm at caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.
INTERPRETED BY	Right adrenal gland is normal in size (0.84 cm at cranial pole and 0.74 cm at caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.
Beth Johnson, DVM DACVIM	Spleen
IMAGING PERFORMED BY	Spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). A 4.5 cm mixed cavitated partially mineralized mass was noted medial to the spleen, that appears to be just off of the tail of the spleen. Splenic vasculature appears normal.
Jack Reese	Liver
HOSPITAL NAME	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. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.
Willow Run VC	
REFERRING VET	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.
Molly Arnold, DVM	Gastrointestinal
INVOICE	The stomach wall is normal in thickness (canine < 0.5 cm and feline < 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.
16088	
DATE	The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3
6/14/22	



PATIENT

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contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

SPECIES

Canine

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

BREED

German Shepherd

Pancreas

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.

SEX

Spayed Female

Free Abdomen

There is no appreciable of free fluid or lymphadenopathy noted in these images.

AGE

13 Years

ULTRASONOGRAPHIC FINDINGS

- A heterogeneous splenic mass, concerning for infiltrative neoplasia, such as sarcoma versus round neoplasia versus other. A benign mass is possible but considered less likely.
- Diffusely thick irregular urinary bladder wall with mineral luminal debris, differentials for which include chronic cystitis with urinary bladder sand/mineral. However, given the focal thickening in the trigone area, that appears to be partially mineralized, infiltrative neoplasia has to be considered.

WEIGHT

50 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommendations for this patient include:

INTERPRETED BY

Beth Johnson, DVM
DACVIM

1. Three-view thoracic radiographs for further evaluation of possible metastatic disease, if not recently evaluated.
2. Regarding the splenic mass, a fine needle aspirate could be considered, if patients coagulation status is appropriate or a surgical splenectomy could be pursued, given the risk of hemorrhage, etc. even with benign masses.
3. To further investigate the urinary bladder wall changes, a urinalysis and urine culture are recommended, as well as submission of urine to look for BRAF gene mutation, which is associated with urinary bladder cancer. Prior to submission of BRAF, another option would be to allow full distention of the urinary bladder and then reassess the trigone area, potentially with power doppler, which might eliminate the suspicion of a mass without having to submit urine for BRAF.
4. In the meantime, medical management of the perianal fistula is recommended with considerations for management, including pain management, as well as antibiotics for secondary infections. In addition to both topical and oral Atopica or modified cyclosporin +/- transition to a hydrolyzed diet, in case there is an allergic component.

IMAGING PERFORMED BY

Jack Reese

HOSPITAL NAME

Willow Run VC

REFERRING VET

Molly Arnold, DVM

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Ultimately, all of these findings may be incidental and unrelated to the chronic underlying weight loss. Underlying gastrointestinal disease could be present and contributing to the weight loss, especially if weight loss is in the face of a good appetite. If that's the case, a gastrointestinal malabsorption panel, including TLI,PLI, cobalamin and folate is recommended (to Texas A & M GI

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PATIENT

Laboratory) for further assessment of the gastrointestinal health.

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SPECIES

Canine

BREED

German Shepherd

SEX

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AGE

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WEIGHT

50 Pounds

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IMAGING PERFORMED BY

Jack Reese

HOSPITAL NAME

Willow Run VC

REFERRING VET

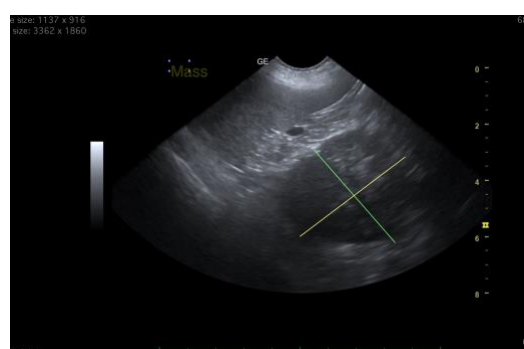
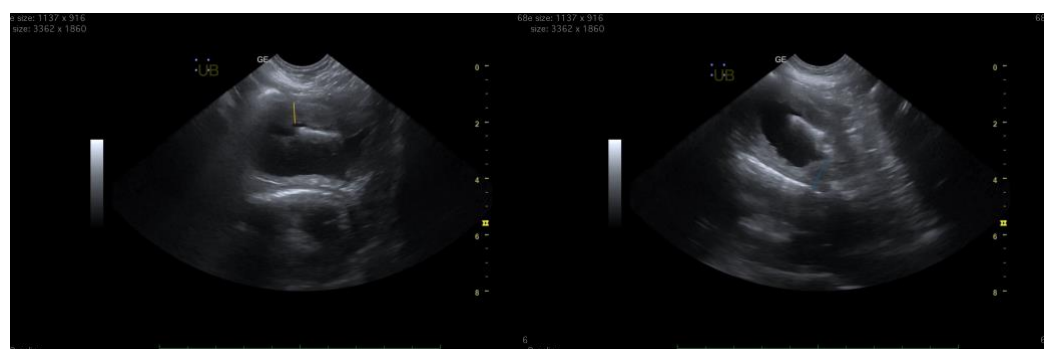
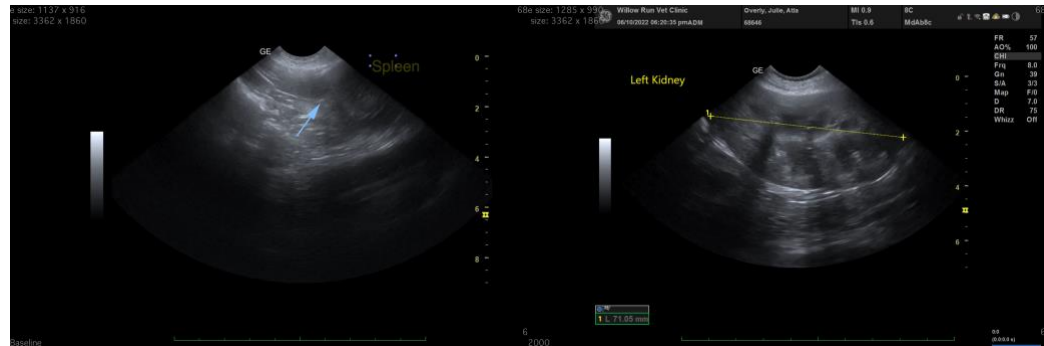
Molly Arnold, DVM

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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



PATIENT

visible in the image/video clips provided.

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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

Beth Johnson, DVM DACVIM

BREED

Beth.Johnson@SonoPath.com

German Shepherd

SEX

Spayed Female

AGE

13 Years

WEIGHT

50 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

**IMAGING
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