

**DATE PRESENTING CLINICAL SIGNS**

6/22/22

Presented for cough; pt has a gr III murmur and radiographs reveal cardiomegaly and interstitial pattern lungs. Circumscribed opacity caudal liver- gall bladder vs mass; mm pale and increased respiratory effort.

PATIENT

Dexter Riessett

Current Medications: None listed.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Declined, not required.
Stat Report: Declined.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED**

Cavalier King Charles

Urinary System

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

Neutered Male

Prostate (neutered) is normal in size, echotexture and echogenicity for a neutered male.

AGE

7/31/14

The right kidney is normal in size (4.76 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.

WEIGHT

26.4 Pounds

The left kidney is normal in size (4.73 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.

INTERPRETED BYBeth Johnson, DVM
DACVIM**Adrenal Glands**

The right adrenal gland is normal in size (1.69 cm long x 0.52 cm at the cranial pole and 0.50 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

IMAGING PERFORMED BY

Rachel Brilhart RDMS

The left adrenal gland is normal in size (1.83 cm long x 0.51 cm at the cranial pole and 0.55 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

HOSPITAL NAME

Eldersburg VH

Spleen

The spleen is largely normal in appearance (shape, echotexture and echogenicity); however, it is volume contracted. Hydration status assessment is recommended.

REFERRING VET

Dr. James

Liver

The liver is subjectively enlarged (swollen contour). Mild parenchymal remodeling with diffusely mildly coarse architecture and increased portal markings is present. No focal nodules or masses are observed. However, the mid caudal liver is very rounded with an emerging mass-like appearance. Visible vasculature appears distended and congested, but the biliary tree appears normal without distention or congestion.

INVOICE

38985

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.

Gastrointestinal

The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is mildly distended with very echogenic reverberation artifact from intraluminal gas. There is no

evidence of obstruction, foreign material or infiltrative disease; however, complete visualization of far wall is partially inhibited by gas. Pyloric outflow tract appears patent.

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

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

Pancreas

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.

Free Abdomen

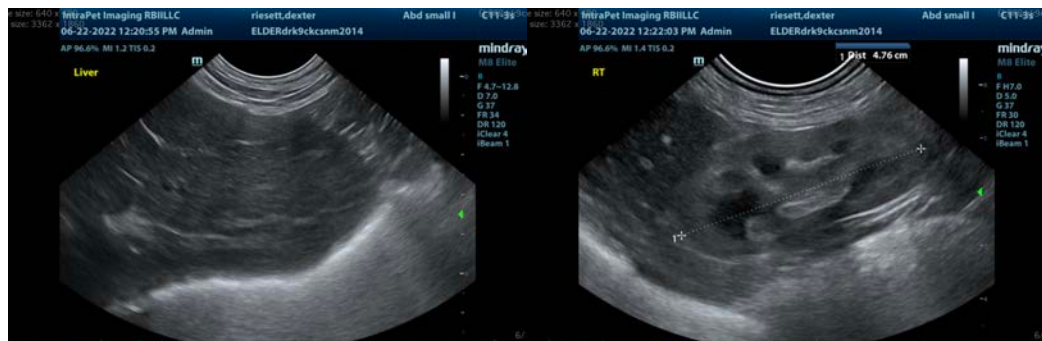
No appreciable free fluid or lymphadenopathy noted in these abdominal images. However, comet tails/ring downs are noted at the level of the diaphragm, suggestive of concurrent pulmonary pathology, as is reportedly suspected based on underlying cardiac disease.

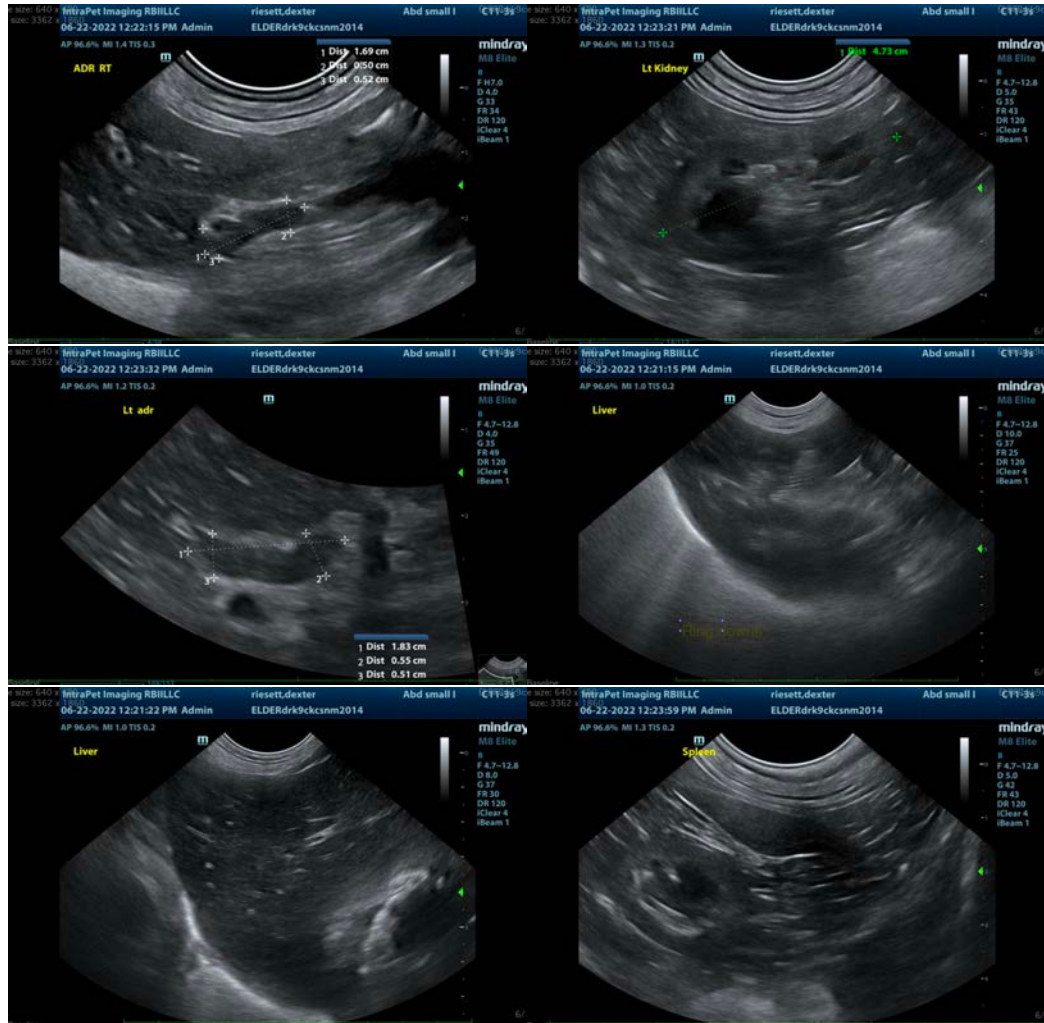
ULTRASONOGRAPHIC FINDINGS

- Hypoechoic hepatomegaly with rounded, emerging mass-like appearance to the mid caudal liver – This appearance is consistent with an acute hepatopathy or acute cholangiohepatitis. Infiltrative neoplasia (round cell neoplasia) should also be considered.
- Volume contracted spleen
- Comet tails and ring downs combined with subjectively decreased contractility and enlarged left atrium as well as venous congestion – all consistent with cardiac pathology, as was suspected.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- 3-view thoracic radiographs and full echocardiogram is recommended.
- A fine needle aspirate of the liver is recommended if coagulation status is appropriate, if and when patient is stable to do so.





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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