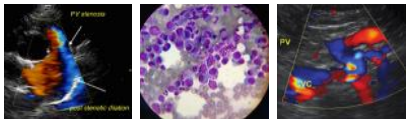
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

DATE
8/2/22

PATIENT
Allie Bayley

SPECIES
Canine

BREED
Corgi

SEX
Spayed Female

AGE
8/1/10

WEIGHT
33.4 Pounds

INTERPRETED BY
Beth Johnson, DVM DACVIM

HOSPITAL NAME
Homeward Bound VS

REFERRING VET
Dr. Williams

INVOICE
16692

PRESENTING CLINICAL SIGNS

History: Lethargic, reduced appetite, breathing hard. On exam abdomen was distended, vitals were within normal limits with normal heart rhythm,
radiographs revealed abdominal mass in cranial abdomen, cardiomegaly, and dorsal tracheal displacement

Current Medications: None listed.
Radiographs: cardiomegaly, dorsal tracheal displacement, abdominal mass.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.
Imaging Performed By: Rachel Brilhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Urinary bladder is adequately 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.

Left kidney is normal is size (6.09 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.

Right kidney is normal is size (6.43 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

Left adrenal gland is normal in size (2.76 cm long x 0.72 cm at cranial pole and 0.79 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Right adrenal gland is normal in size (2.21 cm long x 0.65 cm at cranial pole and 0.78 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Spleen

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). Multifocal well-demarcated hyperechoic homogenous nodules are noted. Splenic vasculature appears normal.

Liver

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. In the mid to caudal left liver, there is a large, approximately 10.0 cm x 11.0 cm in diameter, mixed heterogeneous, partially cavitated vascular mass. Visible vasculature and biliary tree appear normal without distension or congestion.

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 visible stomach wall is normal in thickness and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

The visible small intestines are normal in wall thickness and layering. 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 and layering. Contents are consistent with normal formed feces and gas.

Pancreas

The observed pancreas appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

Free Abdomen

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

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- A large heterogeneous liver mass most consistent with infiltrative neoplasia, such as a sarcoma versus other. Benign lesion can't be ruled out but is considered much less likely.

Secondary Findings

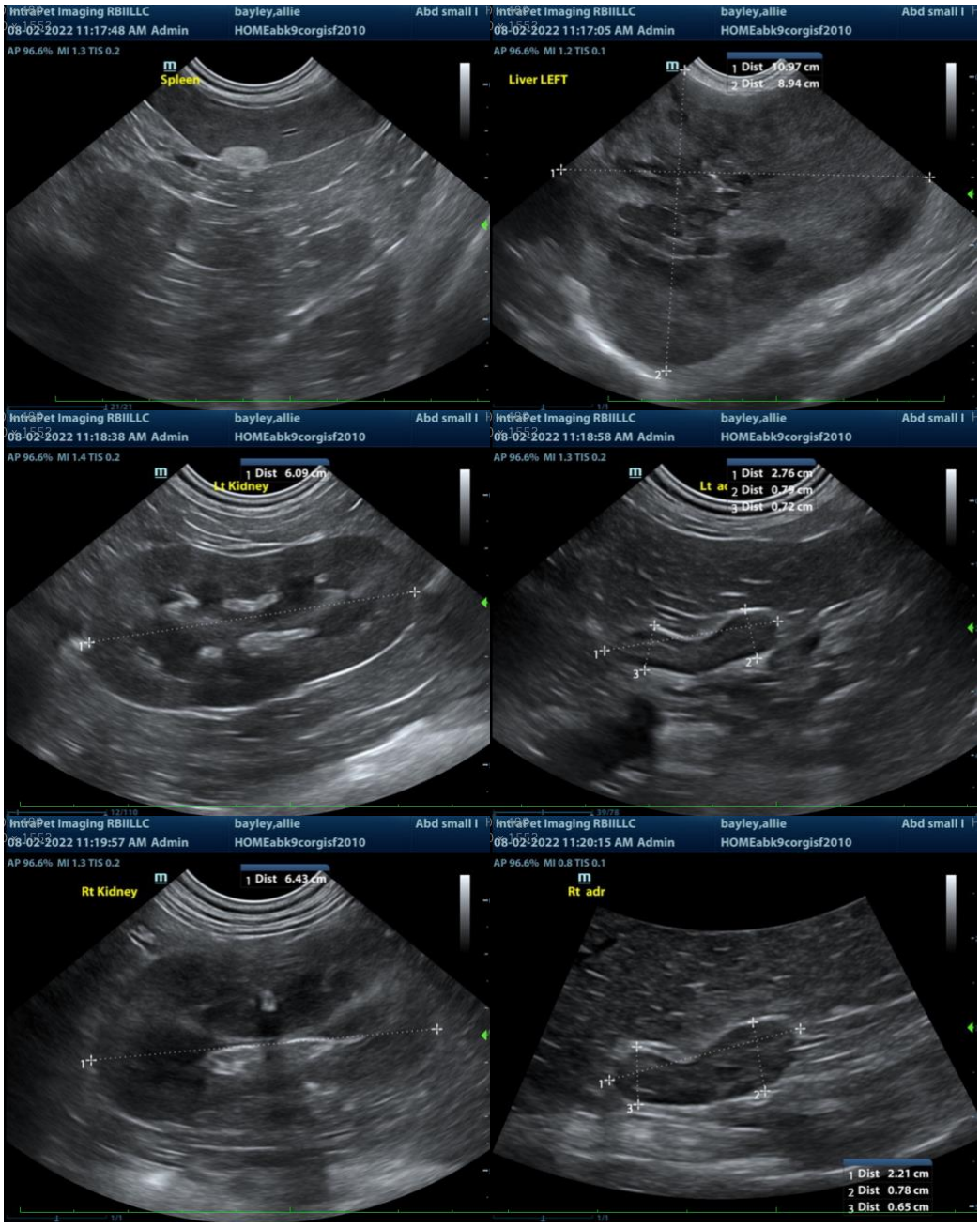
- Hyperechoic splenic nodules – most consistent with benign myelolipomas. Other differentials such as fibrosis or calcification caused by old hematomas or infarcts, chronic inflammation, granulomatous disease or metastatic disease cannot be ruled out, but are considered less likely.

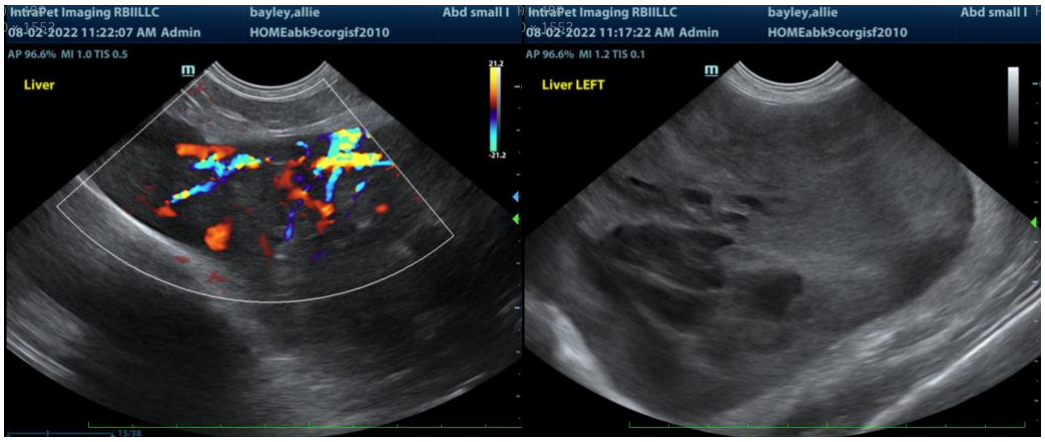
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Three view thoracic radiographs are recommended for further assessment of cardio-pulmonary status as well as to further evaluate for any evidence of metastatic disease, if not recently evaluated.

An echocardiogram is recommended, if not recently evaluated.

A fine needle aspirate of the liver mass could be considered, if patient coagulation status is appropriate. However, given the risk for rupture, hemorrhage, necrosis, etc., surgical excisional liver lobectomy/biopsy is recommended. The mass appears to be caudal with normal liver visible, however, if definitive surgical planning is desired, a presurgical planning abdominal CT scan could be considered.


IntraPet Imaging RBIILLC
bayley,allie
Abd small I
08-02-2022 11:17:48 AM Admin
HOMEabk9corgisf2010
AP 96.6% MI 1.3 TIS 0.2
Spleen
IntraPet Imaging RBIILLC
bayley,allie
Abd small I
08-02-2022 11:17:05 AM Admin
HOMEabk9corgisf2010
AP 96.6% MI 1.2 TIS 0.1
Liver LEFT
1 Dist 10.97 cm
2 Dist 8.94 cm
IntraPet Imaging RBIILLC
bayley,allie
Abd small I
08-02-2022 11:18:38 AM Admin
HOMEabk9corgisf2010
AP 96.6% MI 1.4 TIS 0.2
Lt Kidney
1 Dist 6.09 cm
IntraPet Imaging RBIILLC
bayley,allie
Abd small I
08-02-2022 11:18:58 AM Admin
HOMEabk9corgisf2010
AP 96.6% MI 1.3 TIS 0.2
1 Dist 2.76 cm
2 Dist 0.79 cm
3 Dist 0.72 cm
IntraPet Imaging RBIILLC
bayley,allie
Abd small I
08-02-2022 11:19:57 AM Admin
HOMEabk9corgisf2010
AP 96.6% MI 1.3 TIS 0.2
Rt Kidney
1 Dist 6.43 cm
IntraPet Imaging RBIILLC
bayley,allie
Abd small I
08-02-2022 11:20:15 AM Admin
HOMEabk9corgisf2010
AP 96.6% MI 0.8 TIS 0.1
Rt adr
1 Dist 2.21 cm
2 Dist 0.78 cm
3 Dist 0.65 cm



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 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.

Beth Johnson, DVM DACVIM
Beth.Johnson@SonoPath.com