

**DATE PRESENTING CLINICAL SIGNS**

8/2/23

Large R-sided liver mass--likely hepatocellular carcinoma, Mild anemia (appears non-regen but suspect regen w/improvement) --R/O blood loss (GI bleeding suspect with the change to BUN) vs anemia of chronic disease vs mild bleeding from liver mass vs other. Elevated ALT/ALP (ALP>ALT) --suspect secondary to liver mass, Elevated GGT--R/O same as above, Elevated BUN w/normal creat--R/O GI bleeding, early renal, spurious, other. Addison's disease (treated). Recent acute GI upset--R/O acute gastroenteritis, secondary to liver mass (less likely), other. History of: Infrequent focal seizures (last Jan 2021), Mild weight loss (corrected), Demodex injai infection (treated).

PATIENT

Billy Yates

SPECIES

Canine

Current Medications: None listed.

Date of Previous IntraPet Ultrasound: 2/15/23. See attached.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Andi Parkinson, BS, RDMS.

BREED

Beagle

SEX

Neutered Male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**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.

AGE

6/14/09

The prostate is unable to be well visualized in these images.

WEIGHT

11.6 kg

The right kidney is normal in size (5.89 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

The left kidney is normal in size (6.0 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.

HOSPITAL NAME

Nexus Vet Specialists

Adrenal Glands

The adrenal glands are difficult to fully visualize in these images, likely owing to small size secondary to the reported hypoadrenocorticism.

REFERRING VET

Dr. Steele

Spleen

The 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). No focal nodules or masses are observed. Splenic vasculature appears normal.

INVOICE

44579

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. In the mid to right caudal liver, a 12.6-13.0 cm x 6.6 cm irregular, multilobulated, heterogeneous, partially cystic, primarily hyperechoic mass is present. Visible vasculature and biliary tree appear normal without distension or congestion.

Gallbladder is moderately distended with anechoic bile as well as suspended and gravity dependent echogenic debris. The wall is smooth without visible thickening. There is no evidence of cystic or CBD dilation. There is no evidence of effusion or inflammation.

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 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 (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

There is no evidence of free peritoneal effusion noted in these images.

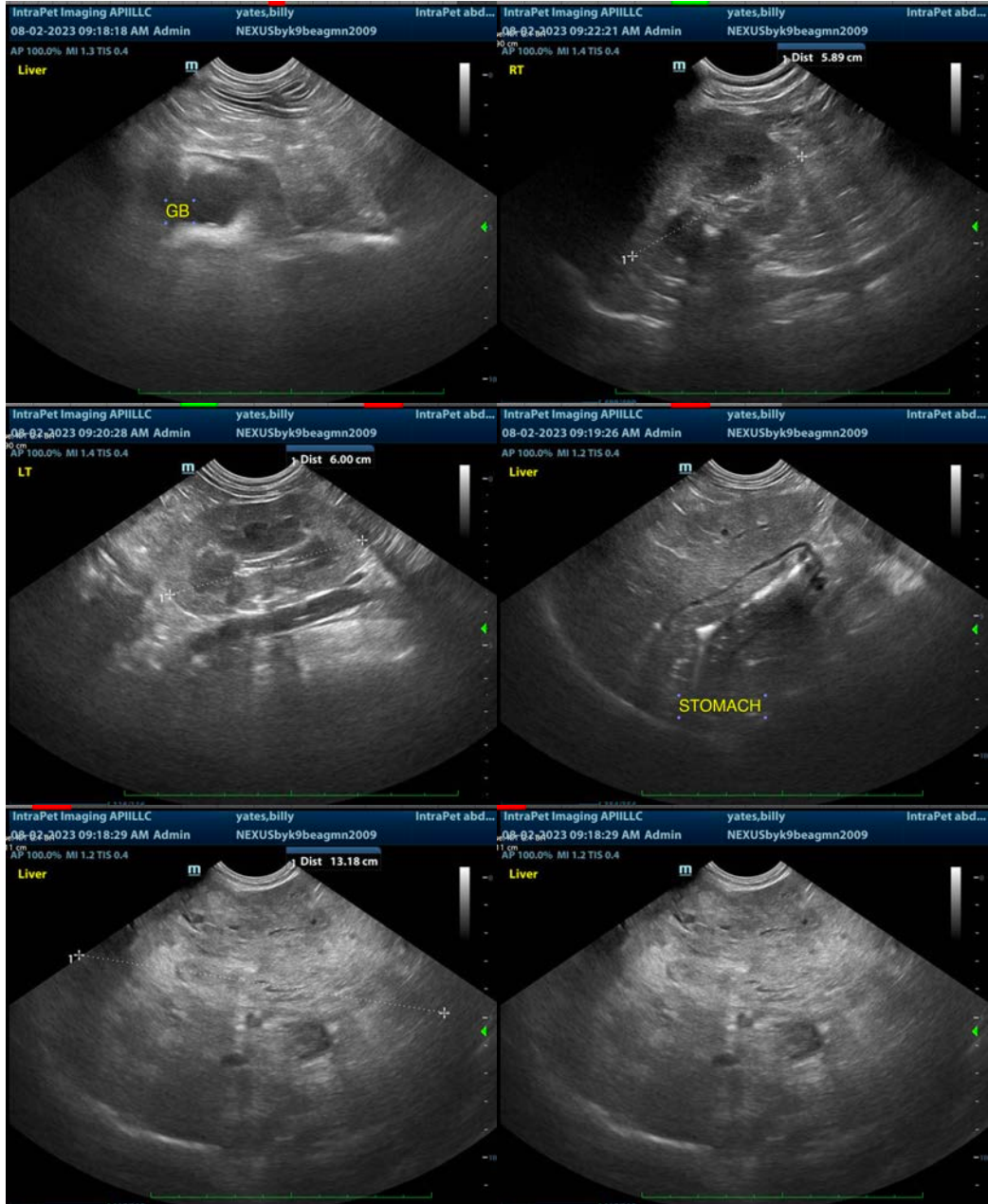
There is no apparent lymphadenopathy noted in these images.

ULTRASONOGRAPHIC FINDINGS

- The previously noted liver mass is slightly larger in size at 12.6-13.0 cm x 6.6 cm today compared to previous measurements of 10.9 cm x 5.8 cm.
- Static gallbladder debris
- Suspect flat/small adrenal glands secondary to patient's reported hypoadrenocorticism.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommendations regarding this exam will be implemented by attending internist, Dr. Cara Steele.





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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