



PATIENT

Mocha Scully

PRESENTING CLINICAL SIGNS

Hematochezia for 2 weeks. Anal pass palpated. O reports PUPD. Glaucoma.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: 8/29: alp 306, alt 783, elevated triglyceride and cholesterol (not fasted). Susp hepatic malignancy.

BREED

Mix

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.

SEX

Spayed Female

Kidneys are overall normal in size and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased cortical echogenicity and mild loss of corticomedullary distinction, expected in this age patient. There is no evidence of pyelectasia or infarcts observed. The left kidney measures 6.8 cm. The right kidney measures 6.4 cm. Non-obstructive areas of mineralization/nephroliths are noted in both kidneys.

AGE

15 Years

Adrenal Glands

WEIGHT

45 Pounds

The right adrenal gland is normal in size (1.0 cm at the cranial pole and 0.65 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

The left adrenal gland is normal in size (0.68 cm at the cranial pole and 0.86 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Spleen

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Dr. Sorbo

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.

Liver

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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. A 7-8 cm heterogeneous mixed cavitated mid caudal liver mass is noted. Visible vasculature and biliary tree appear normal without distension or congestion.

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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.

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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.

DATE

9/15/22

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



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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.

SPECIES

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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.

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Free Abdomen

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

SEX

Spayed Female

Medial iliac lymphadenopathy is suspected characterized by round, hypoechoic nodules/structures between the trigone of the bladder and the colon.

PRIMARY FINDINGS

AGE

15 Years

- **Heterogeneous, cavitated liver mass** – concerning for infiltrative malignant neoplasia such as primary hepatocellular carcinoma or sarcoma, round cell neoplasia is possible considered slightly less likely. Benign hematoma, nodular hyperplasia, etc., is possible but considered much less likely.

WEIGHT

45 Pounds

- **Suspect sublumbar lymphadenopathy** – Both reactive lymphadenopathy as well as metastatic neoplasia are differentials, given the reported colorectal mass.

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SECONDARY FINDINGS

- Age related kidney changes with non-obstructive nephrolithiasis bilaterally.

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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.

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A fine needle aspirate of the liver mass could be considered if patient's coagulation status is appropriate, prior to considering surgery to address both the liver mass as well as the reported colorectal mass.

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However, given the involvement of the liver and the colorectal area as well as suspected sublumbar lymphadenopathy, combined with the mid liver location of the liver mass potentially involving the porta hepatis, surgical excisional of all the gross disease may not be probable, in which case alternative therapies including potentially chemotherapy and/or palliative care may be a more attainable option.

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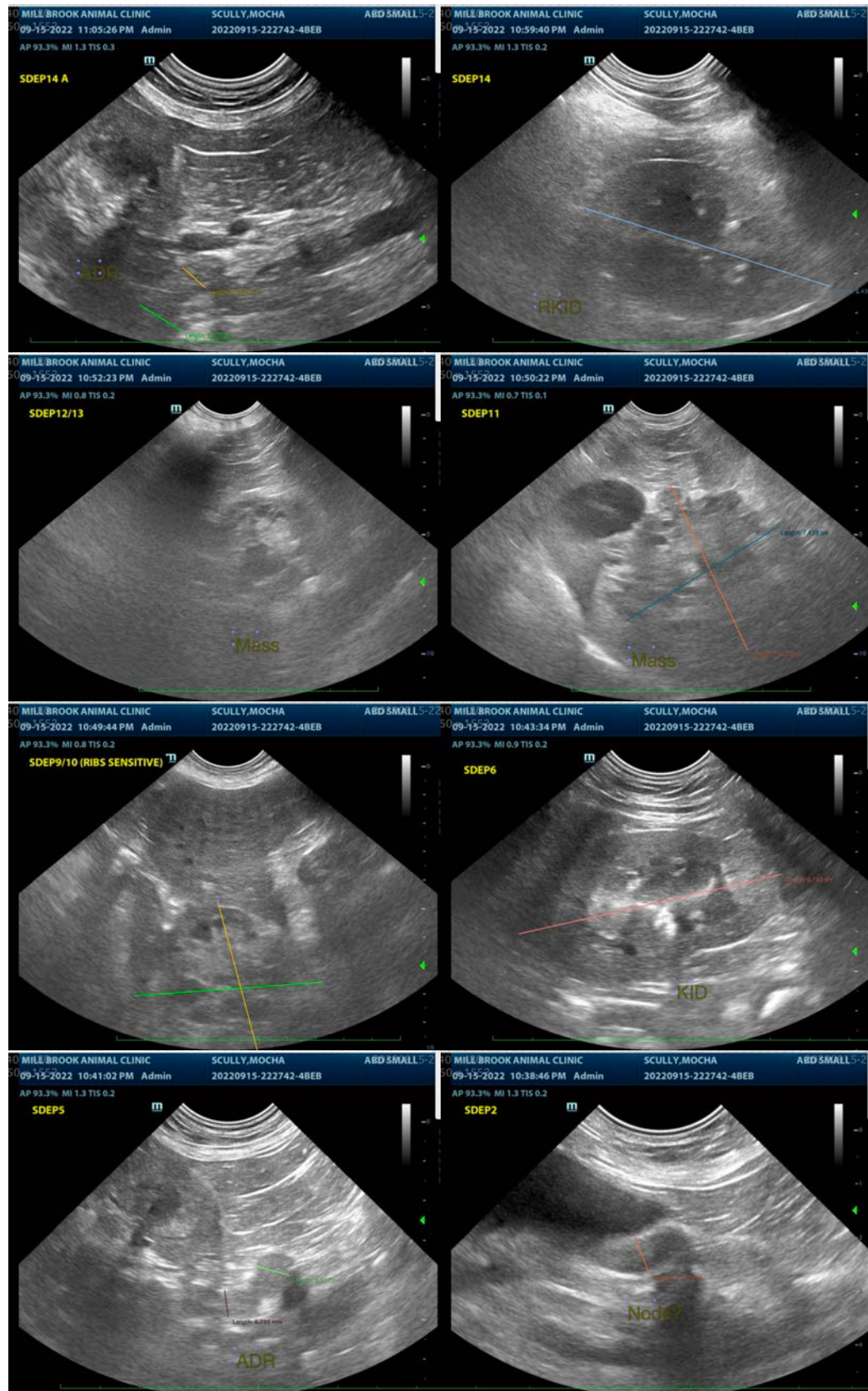
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

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Beth Johnson, DVM, DACVIM

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SEX

Spayed Female

AGE

15 Years

WEIGHT

45 Pounds

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