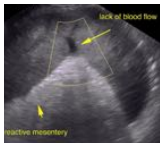
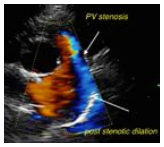
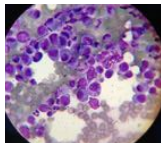
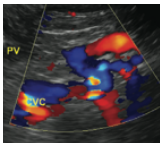
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™





SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Bryson Rachels

SPECIES
Canine

BREED
Boston Terrier

SEX
Neutered male

AGE
13 years

WEIGHT
19.8 lbs

INTERPRETED BY
Dr Brittany Sinclair, BVSc(hons), DACVECC

IMAGING PERFORMED BY
Ashley Whitesell

HOSPITAL NAME
Dickson AC

REFERRING VET
Dr. Lichty

INVOICE
42620

DATE
2/7/23

PRESENTING CLINICAL SIGNS

History: history of protein in urine, now PU/PD, heart murmur 5/6
Abnormal PE/Chem/CBC/UA Results: Alk phos went from 497 to 856 from September to January after a short course of carprofen (a few days) .Mild elevation of ALT(276) in January. USG 1010 (was 1036 in September). x-ray showed mid abdominal mass.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and visible pelvic urethra were of normal thickness. The ureters were not visible which is normal. There was normal wall layering with no masses, uroliths or abnormal thickening visualized. Urine was anechoic. No evidence of inflammatory or neoplastic changes were noted.

The kidneys have a smooth capsule and with mild hazing of corticomedullary definition with approximate maintenance of normal ratio (cortex 1/3 of medulla). No evidence of pelvic dilation was present. The left kidney measured 4.7 cm and the right kidney measured 4.3 cm.

Adrenal Glands

Both adrenal glands were visualized and recognized. Both were enlarged and hypoechoic. The phrenic vasculature, glandular echogenicity and detail were unremarkable. The left adrenal gland measured 1.86 cm in length and 0.59 cm at the caudal pole and 0.61 cm at the cranial pole. The right adrenal gland measured 1.99 cm in length and 0.61 cm at the caudal pole and 0.7 cm at the cranial pole.

Spleen

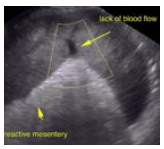
Head of spleen contains spherical heterogenous somewhat cavitary mass measuring 2.8x3.3cm with capsular bulging and no visible cavitation. Body of spleen contains larger somewhat poorly defined roughly spherical mass with mottled parenchyma and areas of cavitation measuring 4.6x6.3cm. Remainder of spleen contains multifocal variably sized hyperechoic nodules most consistent with benign myelolipomas.

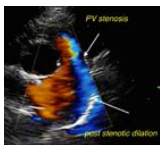
Liver

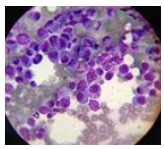
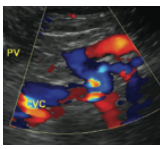
The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed. The gall bladder is moderately distended with anechoic fluid, with hyperechoic non-shadowing gravity dependent debris present. There is no surrounding free fluid or signs of active inflammation.

Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness of with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed. The





SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Bryson Rachels

SPECIES

Canine

BREED

Boston Terrier

SEX

Neutered male

AGE

13 years

WEIGHT

19.8 lbs

INTERPRETED BY

Dr Brittany Sinclair, BVSc(hons), DACVECC

IMAGING PERFORMED BY

Ashley Whitesell

HOSPITAL NAME

Dickson AC

REFERRING VET

Dr. Lichty

INVOICE

42620

DATE

2/7/23

visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed. The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The base and limbs of the pancreas were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour and parenchyma were normal. No overt evidence of active inflammatory or neoplastic disease was noted.

Lymph Nodes

No clinically significant lymphadenopathy or abnormalities noted.

Free Abdomen

No masses or free fluid were noted.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

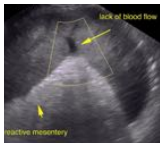
1. Splenic masses
2. Bilateral adenomegaly
3. Gall bladder debris
4. Degenerative renal changes

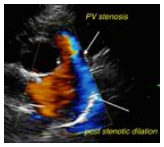
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

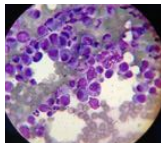
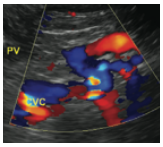
The presence of multiple splenic masses with cavitary are most concerning for a neoplastic process with hemangiosarcoma being a top differential. Histiocytic sarcoma, lymphoma, or other neoplasia, or less likely a benign process (granuloma, degenerating hematoma, other) are possible. Splenic aspiration could be considered to further differentiate. Ultimately, whether benign or malignant, splenic masses are at risk of rupture and splenectomy should be considered.

Adrenomegaly is bilateral and may represent stressful illness or hormonal stimulation as is seen with pituitary dependent hyperadrenocorticism. If corresponding clinical signs are present, testing for hyperadrenocorticism should be considered (ACTH stimulation test vs LDDST).

Gall bladder debris is likely an incidental finding and is often subclinical and often does not warrant specific treatment or further investigation. Correlate clinical significance with bloodwork findings and clinical signs. Serial imaging for monitoring could be considered especially if liver enzymes subsequently become elevated. If otherwise clinically indicated, investigation for endocrinopathy such as





SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Bryson Rachels

SPECIES

Canine

BREED

Boston Terrier

SEX

Neutered male

AGE

13 years

WEIGHT

19.8 lbs

INTERPRETED BY

Dr Brittany Sinclair, BVSc(hons), DACVECC

IMAGING PERFORMED BY

Ashley Whitesell

HOSPITAL NAME

Dickson AC

REFERRING VET

Dr. Lichty

INVOICE

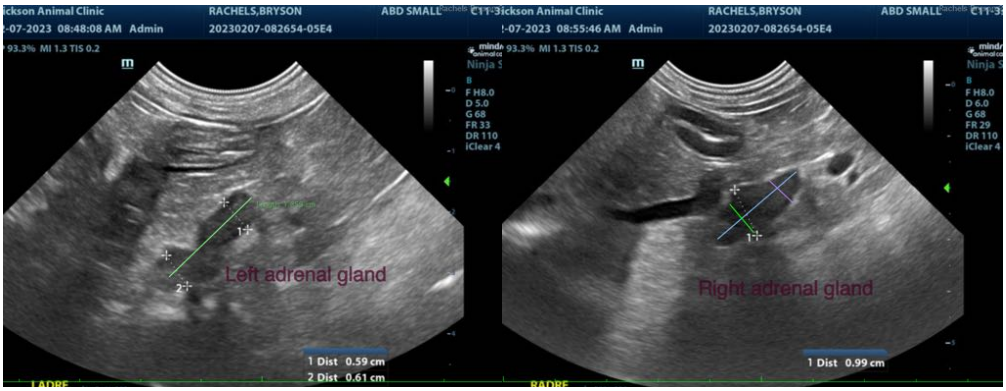
42620

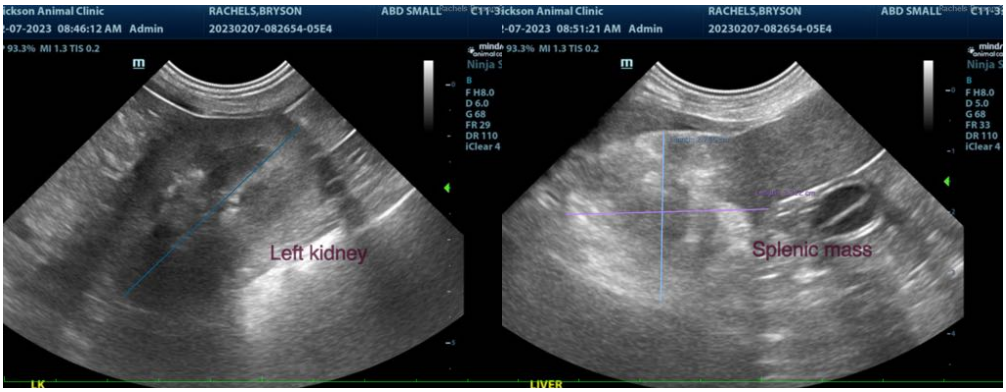
DATE

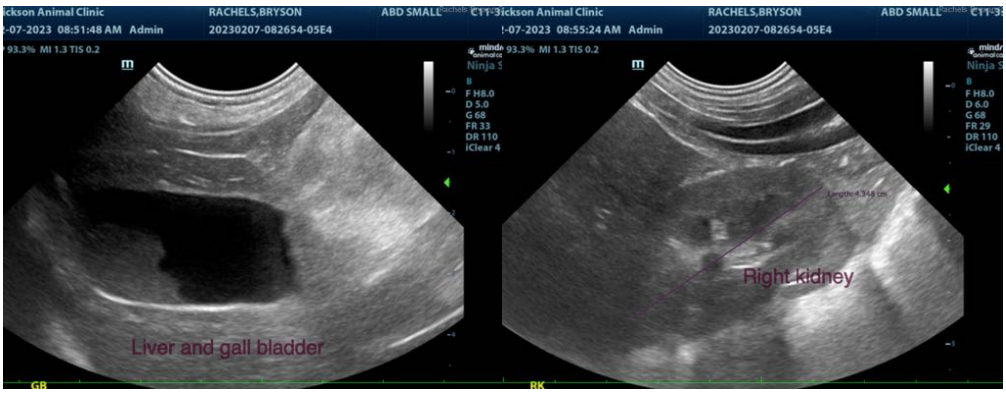
2/7/23

hyperadrenocorticism or hypothyroidism could be considered as an underlying cause predisposing to gall bladder debris accumulation.

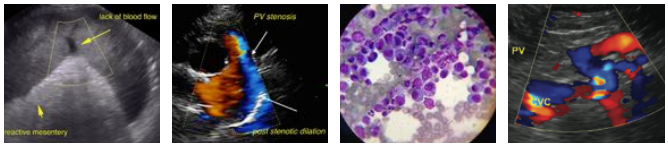
Renal changes are likely age related degeneration. Correlate clinical significance with blood work/urinalysis findings and clinical signs.







SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Bryson Rachels

SPECIES

Canine

BREED

Boston Terrier

SEX

Neutered male

AGE

13 years

WEIGHT

19.8 lbs

INTERPRETED BY

Dr Brittany Sinclair, BVSc(hons), DACVECC

IMAGING PERFORMED BY

Ashley Whitesell

HOSPITAL NAME

Dickson AC

REFERRING VET

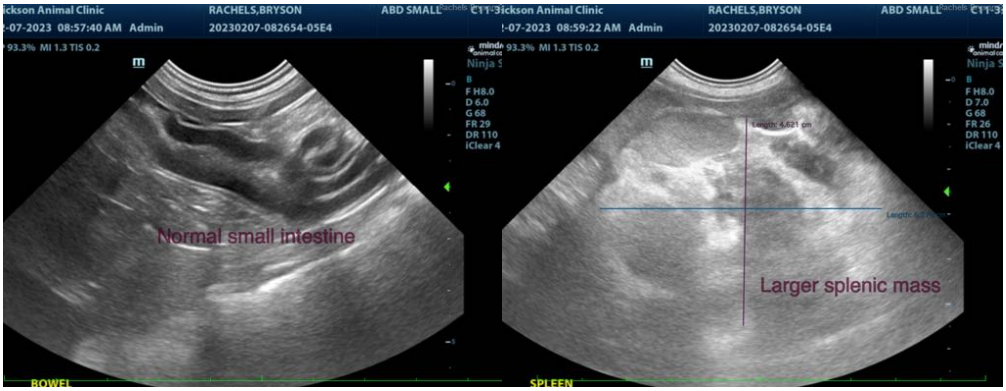
Dr. Lichty

INVOICE

42620

DATE

2/7/23



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.

Dr Brittany Sinclair, BVSc(hons), DACVECC
info@SonoPath.com