



PATIENT PRESENTING CLINICAL SIGNS

Kelly Cerniglia

History: Clinically doing well at home, Has a history of a couple UTI's and a possible small bladder polyp

SPECIES

Abnormal PE/Chem/CBC/UA Results: Few trichoepitheliomas, BCS 4/9- stable Globulins 4.6 g/dL, BUN 39mg/dL, Creatinine 1.5 mg/dL CBC WNL, T4 1.8ug/dL Fecal neg USG 1.051 Radiographs shows approx 10 cm x 9 cm cranial abdominal mass just caudal to stomach

Canine

BREED

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Mix

Urinary System

SEX

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.

Spayed female

AGE

The kidneys have a smooth capsule and with hazing of corticomedullary definition to the point of inability to determine cortical/medullary ratio with pinpoint areas of cortical mineralization. No evidence of pelvic dilation was present. The left kidney measured 6.55 cm and the right kidney measured 6.79 cm.

12 years

WEIGHT

Adrenal Glands

55 lbs

Both adrenal glands were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 2.41cm ln x 0.56cm cd x 0.64cm at the cranial pole. The right adrenal gland measured 1.77 cm in length x 0.64 cm at the caudal pole and 0.59 cm at the cranial pole.

INTERPRETED BY

Dr Brittany Sinclair, BVSc(hons), DACVECC

IMAGING PERFORMED BY

Spleen

Dr. Ammeraal

Large complex partially cavitated spherical mass in left cranial abdomen measuring at least 8.6 x 6.5cm which appears to be originating from the head of the spleen.

HOSPITAL NAME

Liver

Sova AH

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.

REFERRING VET

Dr. Ammeraal

INVOICE

Gastrointestinal

43352

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 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

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3/20/23



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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.

SPECIES

Canine

Pancreas

BREED

Mix

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.

SEX

Spayed female

Lymph Nodes

No clinically significant lymphadenopathy or abnormalities noted.

AGE

12 years

Free Abdomen

No masses or free fluid were noted.

WEIGHT

55 lbs

ULTRASONOGRAPHIC FINDINGS

Primary Findings

1. Splenic mass
2. Degenerative renal changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Mass in spleen is cystic and concerning for neoplasia with primary differential being hemangiosarcoma. Splenic aspirate could be done to further characterize, though cavitory masses are at higher risk of bleeding, potentially seeding cancer cells in the abdomen, and potentially of being non-diagnostic. Whether benign or malignant, all cavitory splenic masses are at risk of rupture and if no signs of metastasis are present in the chest and abdomen, splenectomy with histopathology should be considered.

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Primary splenic tumors include angiogenic tumors, lymphoid/round cell tumors, and nonangiogenic, nonhematopoietic tumors. Angiogenic tumors include hemangiosarcoma and hemangiomas. Hemangiomas are benign, whereas HSAs are the most common malignant splenic tumor in dogs. Lymphoid and other round cell tumors may include lymphoma, leukemia, mast cell tumor, plasma cell tumor/multiple myeloma, and histiocytic sarcoma. Nonangiogenic, nonhematopoietic tumors encompass a long list of uncommon splenic neoplasms, such as leiomyoma, leiomyosarcoma, extraskelatal osteosarcoma, chondrosarcoma, fibrosarcoma, lipoma, liposarcoma, myosarcoma, rhabdomyosarcoma, undifferentiated sarcoma, melanoma, carcinoma, peripheral nerve sheath tumor, myelolipoma, and mixed mesenchymal sarcoma (mesenchymal).

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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



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

SPECIES

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

BREED

Mix

SEX

Spayed female

AGE

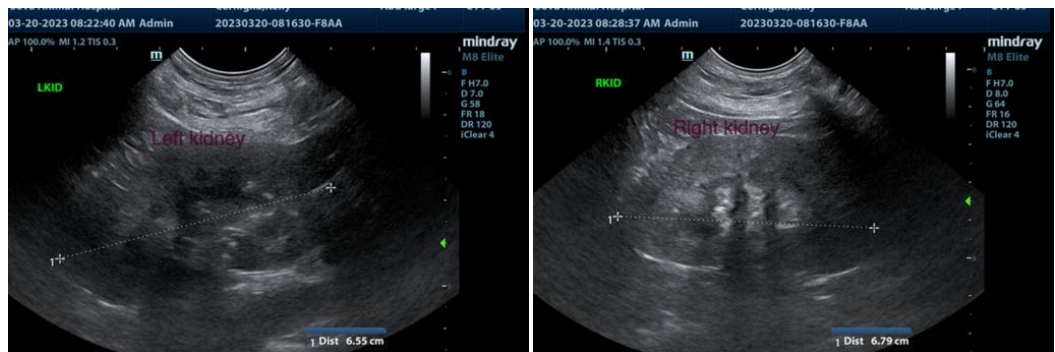
12 years

WEIGHT

55 lbs

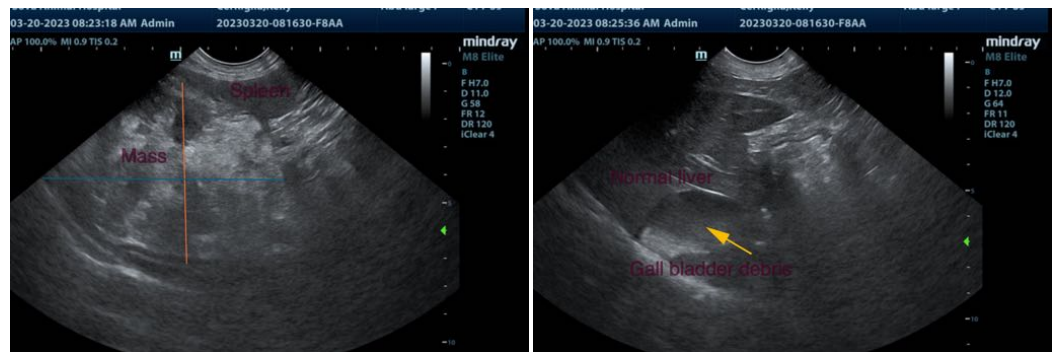
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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