



PATIENT

Mara Sheehan

PRESENTING CLINICAL SIGNS

History: Patient presented on 3/17/23 for not eating as much as normal, and not taking treats. Patient has been eating grass for the past 7 days and acting "dull". Otherwise drinking normal, normal bowel movements.

SPECIES

Canin

Abnormal PE/Chem/CBC/UA Results: Radiographs were taken and a suspicious area mid-ventral abdomen was noted on both sides but the VD showed Right side medial abdomen.

BREED

Labrador Mix

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.

SEX

Spayed female

The kidneys have a smooth capsule and with hazing of corticomedullary definition to the point of inability to determine cortical/medullary ratio. Left kidney is small compared to the right kidney and subjectively for patients size. Hyperechoic shadowing is visible bilaterally in renal pelvises with no dilation consistent with non-obstructive nephrolithiasis. The left kidney measured 4.4 cm and the right kidney measured 5.61 cm.

AGE

13 years

WEIGHT

53.4 lbs

Adrenal Glands

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 2.08 cm in length and 0.58 cm at the cranial pole and 0.61 cm at the caudal pole. The right adrenal gland measured 1.32 cm in length and 0.42 cm at the cranial pole and 0.42 cm at the caudal pole.

INTERPRETED BY

Dr Brittany Sinclair, BVSc(hons), DACVECC

IMAGING PERFORMED BY

Dr. Caughman

Spleen

The spleen had a generally smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma and smooth capsule, with normal splenic vasculature with no signs of congestion or thrombosis. Perivascular hyperechoic nodules visualized most consistent with benign myelolipomas. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarct changes were noted.

HOSPITAL NAME

Dogwood AH

REFERRING VET

Dr. Caughman

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. Gallbladder is moderately distended with normal wall thickness and anechoic contents. Common bile duct is non-distended and tapers normally

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DATE

3/21/23



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Gastrointestinal

Mara Sheehan

In an unlabeled image suspected to have been acquired on the left side of the abdomen, a small intestinal mass is visualized. There is complete loss of wall layering with severely thickened intestinal wall measuring at least 1.6cm surrounded by hyperechoic mesentery. Intestinal lumen in this area is distended with fluid. In a separate clip this luminal thickening is visualized to originate from small intestine (as opposed to colon).

SPECIES

Canin

The stomach contains gas shadowing. 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.

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Labrador Mix

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.

SEX

Spayed female

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.

AGE

13 years

Lymph Nodes

WEIGHT

53.4 lbs

No clinically significant lymphadenopathy or abnormalities noted.

INTERPRETED BY

Free Abdomen

Dr Brittany Sinclair,
BVSc(hons), DACVECC

A scant amount of free fluid was noted in the abdomen.

IMAGING PERFORMED BY

ULTRASONOGRAPHIC FINDINGS

Dr. Caughman

Primary Findings

HOSPITAL NAME

Dogwood AH

1. Small intestinal mass
2. Scant free fluid
3. Perivascular splenic myelolipomas
4. Degenerative renal changes with nephrolithiasis

REFERRING VET

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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. Small intestinal mass is focal with the remainder of small intestine and GI tract appearing normal. The most common intestinal tumors in dogs include lymphoma, adenocarcinoma, leiomyoma or leiomyosarcoma. Other tumor types are possible as well as benign processes such as intestinal wall abscess, migrating foreign body, granuloma, histoplasmosis, pythiosis, etc. Percutaneous intestinal FNA could be attempted, though some tumors do not exfoliate well. The presence of scant effusion is likely secondary to inflammation but the possibility of leakage of abdominal contents cannot be definitively ruled out. Consideration for emergent abdominal exploratory surgery with plan for resection and anastomosis of the mass should be considered.

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Splenic changes are a common age related change and nodules are most consistent with benign myelolipomas. but infiltrative disease (lymphoma, MCT, other) cannot be definitively ruled out. No significant disruption of architecture noted to suggest significant pathology. Fine needle aspirate could be considered to further characterize parenchymal changes if clinically indicated, especially if any weight loss is noted or for baseline cytological assessment.

SPECIES

Canin

Renal changes are likely age related degenerative changes. Correlate clinical significance with blood work/urinalysis findings and clinical signs. Nephroliths may act as a nidus of infection and predispose to urinary tract infections. They have the potential to move into the ureters or bladder causing obstructive nephropathy.

BREED

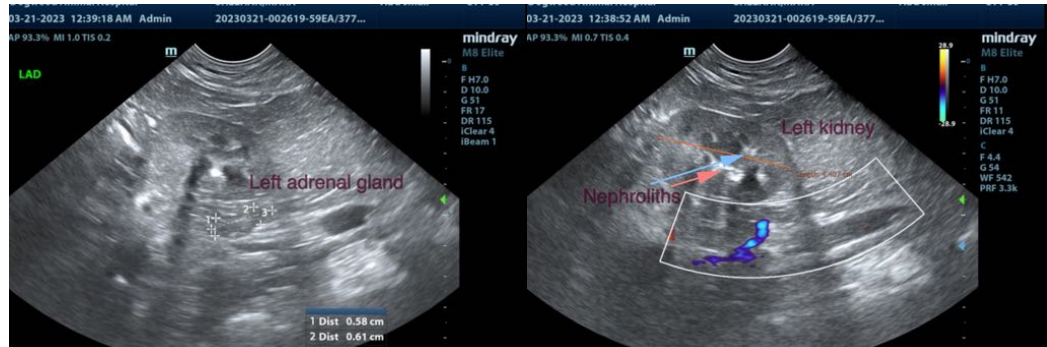
Labrador Mix

SEX

Spayed female

AGE

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WEIGHT

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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.

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

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