**DATE PRESENTING CLINICAL SIGNS**

1/27/23

Chronic vomiting and inappetence. Diagnosed diabetic since April 2022. Hx of allergies. Glaucoma with enucleation and early glaucoma in other eye.

PATIENT

Bradley Siler

Current Medications: Vetsulin- 7U SQ q12hr, Diclofemac Sodium Solution 1.1% Ophthalmic, Dorzolamide HCl/Timolol maleate Ophthalmic solution, Optimmune for eye

Lab Results: 1/2/23- CBC/Chem- mild hypoglycemia, mildly elevated BUN, elevated ALP and ALT, hypercholesterolemia, elevated lipase (pancreatitis vs other pancreatic vs other) SNAP CPL- abnormal-pancreatitis

SPECIES

Canine

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

BREED

Shih Tzu Mix

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System****SEX**

Neutered male

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes was noted. Ureteral papillae were normal.

AGE

8/19/11

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 4.3 cm.

WEIGHT

19.5 lbs

Adrenal Glands**INTERPRETED BY**Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 right adrenal gland measured 2.02 x 0.75 cm at the caudal pole and 0.77 cm at the cranial pole. The left adrenal gland measured 2.11 x 0.74 cm at the caudal pole and 0.74 cm at the cranial pole.

HOSPITAL NAME

Festival VC

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

REFERRING VET

Dr. Prange

INVOICE

42375

Liver

An expansive, mixed, hypoechoic, undifferentiated 5.3 x 4.4 cm highly vascular mass was noted. The mass was deriving from the gallbladder and expanded to the regional liver. The mass extended caudally and impinged upon the pyloric outflow. The left liver was fairly uniform. Regional inflammation was noted. Significant vascularity was noted on power Doppler assessment.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated

normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

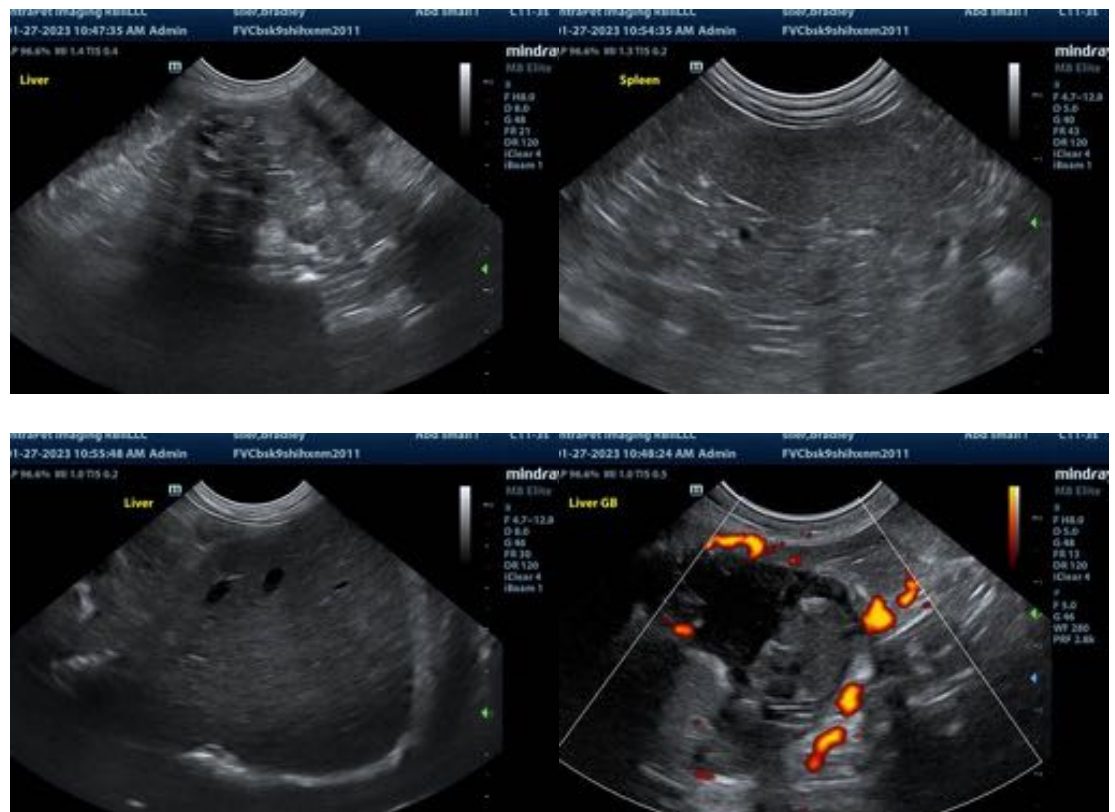
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

Gallbladder/liver mass expanding into the regional liver. Highly vascular. Suspect carcinoma. Age related abdominal changes noted elsewhere.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT evaluation is recommended for surgical planning. I suspect carcinoma. This is potentially resectable. FNA of the mass is indicated as well. Cholangiosarcoma or similar neoplasia is suspected.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
 Eric.Lindquist@SonoPath.com