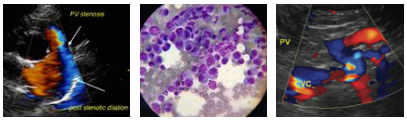
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

DATE

1/27/23

PATIENT

Taz Rapp

SPECIES

Canine

BREED

Australian Shepherd Mix

SEX

Neutered male

AGE

4/22/08

WEIGHT

54.3 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

HOSPITAL NAME

Festival VC

REFERRING VET

Dr. Greenfield

INVOICE

42372

PRESENTING CLINICAL SIGNS

Urinary incontinence while sleeping. Previously diagnosed adrenal tumor and kidney disease. Eating/drinking normally, maybe eating a little less. Unsteady in hind legs. Physical exam otherwise unremarkable.
Current Medications: None current.
Lab Results: Elevated kidney and liver values.
Date of Previous IntraPet Ultrasound: 11/12/21. See attached.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.
Imaging Performed By: Rachel Brilhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

The residual prostate was uniform and measured 1.13 cm.

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. Mineralization was noted in the kidneys. The left kidney measured 5.18 cm. The right kidney measured 5.03 cm.

Adrenal Glands

The right **adrenal gland** was increased in size, nodular and irregular measuring 4.24 x 2.68 cm at the cranial pole and 1.36 cm at the caudal pole. The left adrenal mass has increased in size by 4.34 x 3.08 cm at the caudal pole and 1.38 cm at the cranial pole.

Spleen

The **spleen** was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. Mild, ,hyperechoic lipogranulomatous change was noted. These changes are consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Hypoechoic nodular changes were noted and appear progressive compared to the prior sonogram. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

Gastrointestinal

The **stomach** revealed shadowing material that measured 4.6 cm. The small intestine and colon were unremarkable.

Pancreas

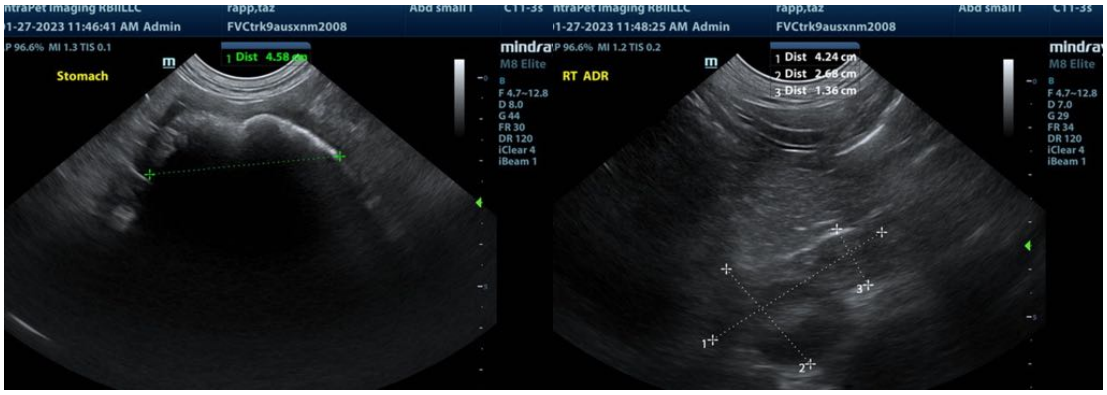
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

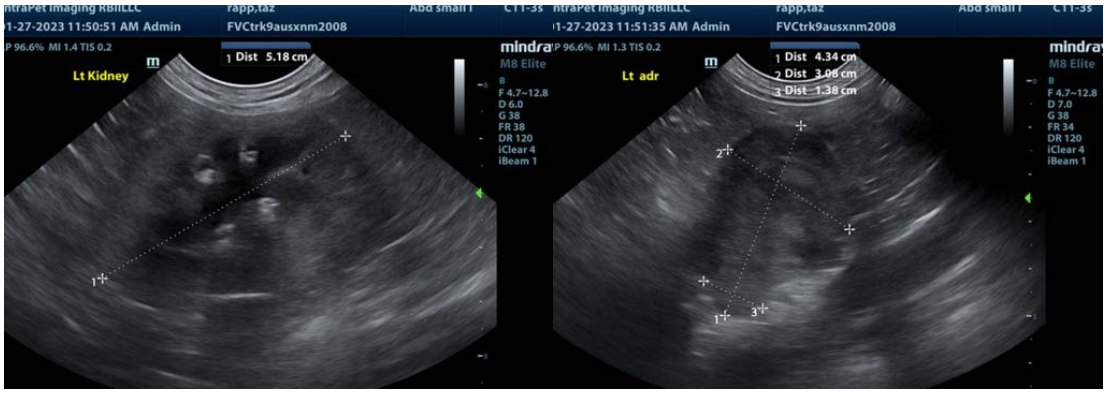
ULTRASONOGRAPHIC FINDINGS

Full stomach with soft shadowing foreign matter, Suspect foreign body.
Progressive adrenal masses. Bilateral carcinoma, pheochromocytoma, adenomatous changes are possible in either gland.
Moderate degenerative renal changes.
Benign hepatopathy with nodular changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Serial blood pressure measurements are warranted. Urine catecholamine is warranted if the sonographer is comfortable with the procedure. 25-gauge FNA of both adrenal glands can be considered. FNA of the liver nodules are recommended. Justification to gastrotomy and left adrenalectomy can be considered depending on the clinical status of the patient. Concurrent inflammatory hepatopathy to be defined by FNA or surgical biopsies. The kidneys appear near end stage; however, 72 hour IV fluid protocol and blood pressure measurements are warranted. If severe hypertension is present then I would be strongly concerned for pheochromocytoma in the left +/- right adrenal gland. There is a mild potential for metastatic disease.





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
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