



**PATIENT PRESENTING CLINICAL SIGNS**

Mila House History of lung mass, well controlled vomiting suspect gastroenteritis, pancreatitis cant rule out metastasis

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Spayed female

The **urinary bladder** revealed an apical mural mass that measured 2.0 cm. This appears resectable. The cystourethral junction, urethra and trigone appeared unremarkable.

**SEX**

Spayed Female

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Minor mineralization was noted in the kidneys. The right kidney measured 4.17 cm. The left kidney measured 3.68 cm.

**AGE**

11 years

**WEIGHT**

9.9 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 1.5 x 0.52 cm at the caudal pole and 0.36 cm at the cranial pole. The right adrenal gland measured 1.22 x 0.86 cm at the cranial pole and 0.62 cm at the caudal pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Jenn

**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.

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Maniar

**Liver**

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. 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.

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**PATIENT**

**Gastrointestinal**

Mila House

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.

**SPECIES**

Canine

**BREED**

Spayed female

**Pancreas**

The left limb of the **pancreas** was hypoechoic and irregular. The pancreas measured 1.5 cm in width with enhanced surrounding mesentery.

**SEX**

Spayed Female

**ULTRASONOGRAPHIC FINDINGS**

Chronic active pancreatitis pattern.

**AGE**

11 years

Geriatric abdomen with apical bladder mass. Carcinoma versus mural lymphoma or round cell neoplasia. Leiomyosarcoma is a minor potential.

**WEIGHT**

9.9 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Further definition of the lung mass with chest CT would be ideal. Apical bladder wall resection is warranted depending upon thoracic diagnostics. The pancreas does not appear to be neoplastic in nature; however, the bladder mass does appear neoplastic.

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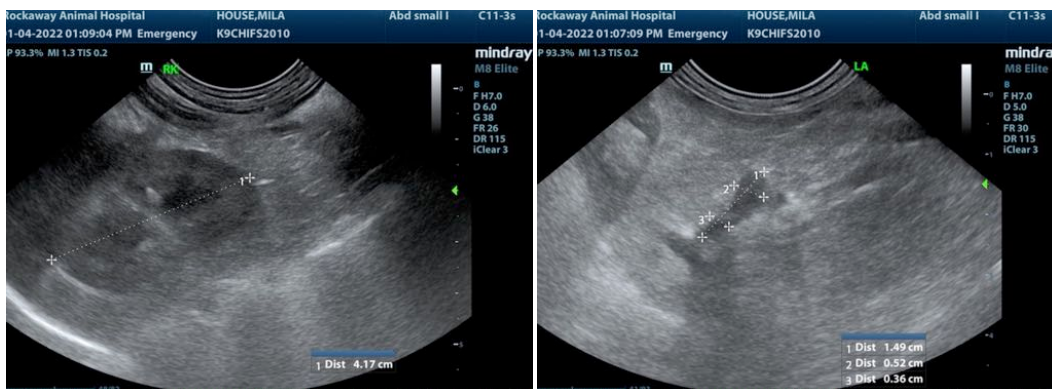
Dr. Maniar

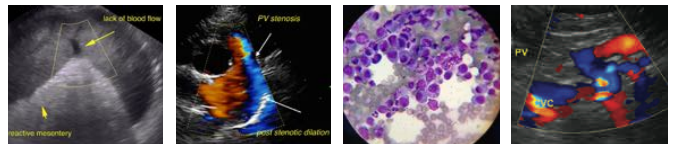
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**PATIENT**

Mila House

**SPECIES**

Canine

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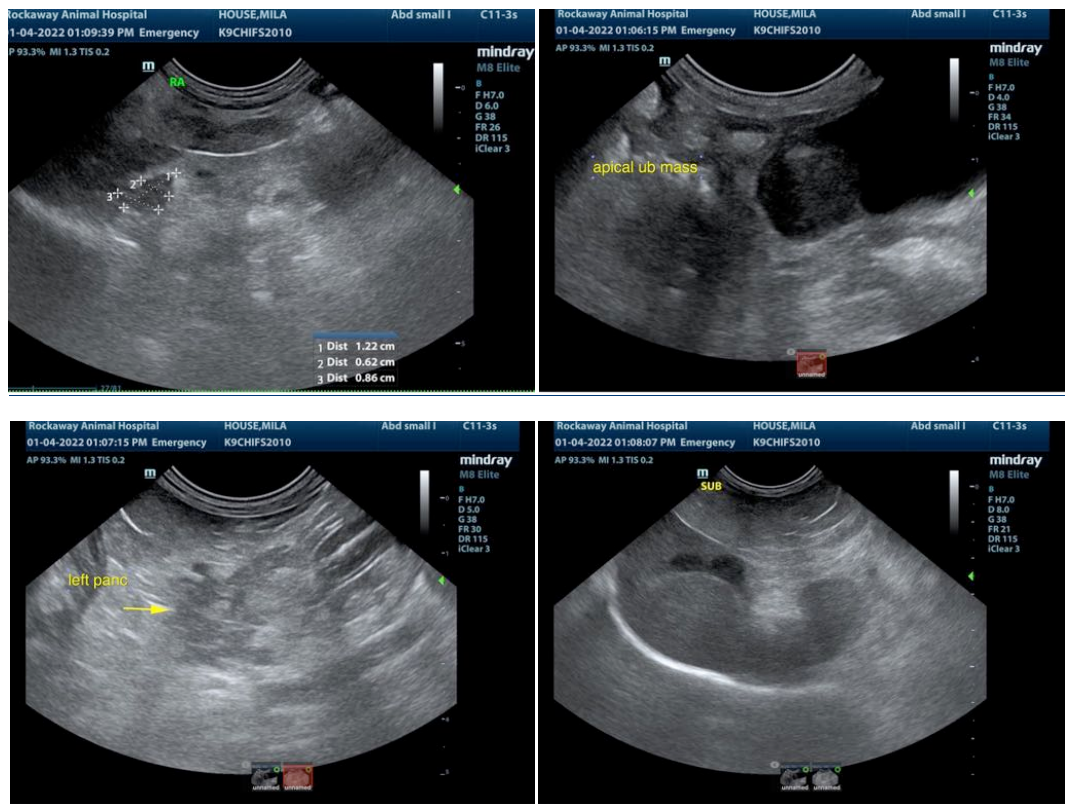
Spayed Female

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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.

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