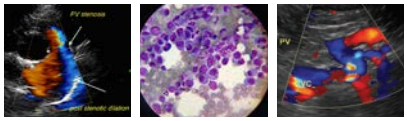
IMAGING PERFORMED BY

IntraPet.com



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

DATE

1/6/23

PATIENT

Guiness Kroneberger

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed Female

AGE

9/1/09

WEIGHT

68.6 Pounds

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

HOSPITAL NAME

Jacksonville VH

REFERRING VET

Dr. Kablis

INVOICE

44056

PRESENTING CLINICAL SIGNS

1/4/2023 2 episodes- most recent being 1/3/23/more pronounced- of heavy breathing. Pacing. Unable to settle.

Current Medications: Gabapentin 100mg 2 PO BID, Galliprant 60mg 1 PO SID (discontinued for now)
Lab Results: 11/21/22 ALT 133 ALKPHOS 382 Ca 11.5 HCT 43 ALB 4.6
1/4/22 ALT 153 ALKPHOS 697 HCT 36.7 ALB 4.8.
Radiographs: 1/4/22 Chest Rads NSF , abdominal rads- area of liver/spleen poor detail. Possible Mass? Fluid?
Date of Previous IntraPet Ultrasound: No previous.
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** presented normal thicknesses and normal tone. The urethra was dilated up to 0.86 cm. 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 were noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measures 7.41 cm.

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 right adrenal gland measured 3.64 cm x 0.78 cm at the caudal pole and 0.80 cm at the cranial pole. The left adrenal gland measured 3.25 cm x 0.72 cm at the caudal pole and 0.66 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. These changes are consistent with normal age-related alteration. Hyperechoic and hypoechoic nodular changes, likely benign. 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 were noted.

Liver

The **liver** revealed an expansive isoechoic mass measuring 6.3 cm, occupying the right medial liver. The remainder of the liver was heterogeneous. Increased portal markings noted and isoechoic nodular changes. The right medial liver mass deviated the gallbladder ventrally and it does have a mass effect upon it.

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

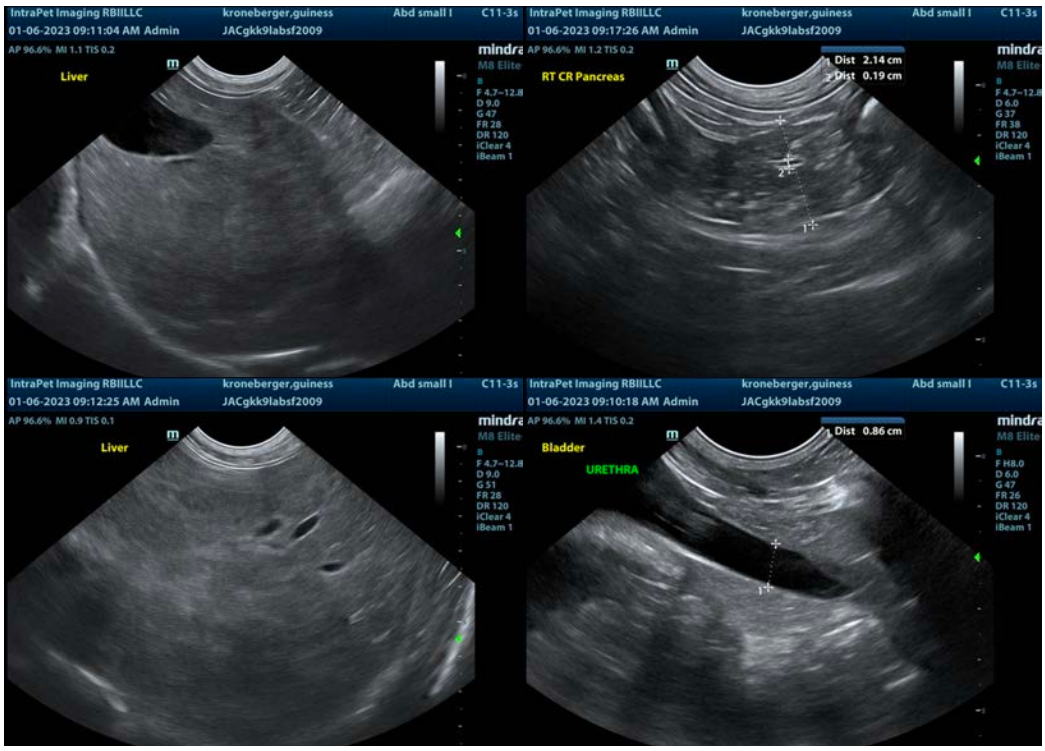
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

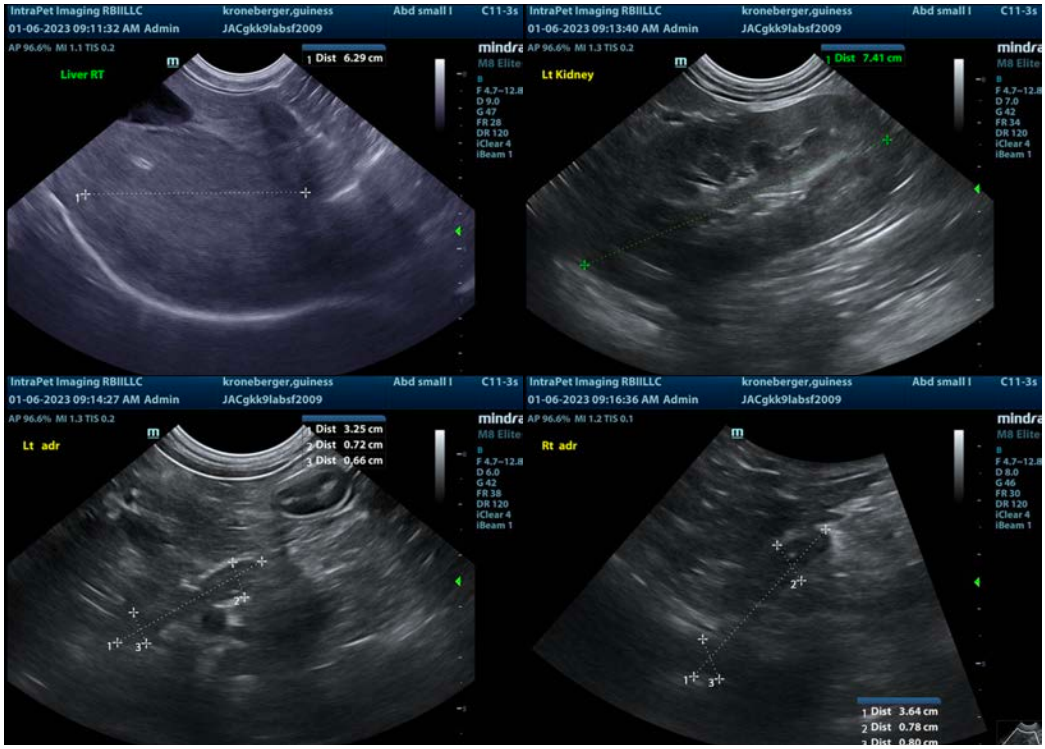
ULTRASONOGRAPHIC FINDINGS

- Right medial liver mass – hepatoma versus carcinoma or round cell neoplasia, with mild nodular hyperplasia/vacuolar hepatopathy
- Nodular spleen
- Poor urethral tone

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mass in the right medial liver is consistent with hepatoma. However, round cell neoplasia and carcinoma cannot be ruled out. The mass is no resectable in its position. Right and left-sided hepatic FNA indicated. Assessment for incontinence or distal urethral pathology indicated.





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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