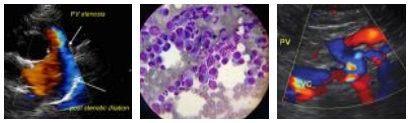
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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DATE

10/1/21

PATIENT

Bubba Long

SPECIES

Canine

BREED

Pit Bull

SEX

Intact Male

AGE

2007

WEIGHT

66 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Churchville VC

REFERRING VET

Dr. Danneberger

INVOICE

13442

PRESENTING CLINICAL SIGNS

History: Presented for second opinion on SQ mass on right leg, starting to affect mobility. Also increased amount of panting, and increased thirst and urination. On physical, notable pot-belly and bilateral hair thinning.

Lab Results: Bloodwork showed elevated ALT and ALP, proteinuria, and low-normal thyroid.
Radiographs: FNA of mass consistent with mast cell tumor.
Date of Previous IntraPet Ultrasound: No previous
Sedation: not needed
Stat Report: not requested

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 were noted. Ureteral papillae were normal. The prostate was uniform, measuring 2.72 cm.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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. An anechoic cyst (0.57 cm) was noted at the caudal pole of the left kidney. The left kidney measured 6.09 cm. The right kidney measured 6.09 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 1.1 cm at the cranial pole and 0.93 cm at the caudal pole. The left adrenal gland measured 3.0 cm x 0.92 cm at the caudal pole and 0.88 cm at the cranial pole.

Spleen

A focal **splenic** nodule was noted at the cranial body of the spleen. The expansive splenic nodule was approximately 2.0 cm, technically a mass, however subjectively appears low-grade. Micronodular changes were noted elsewhere in the spleen. FNA of the primary lesion and general parenchyma recommended.

Liver

The **liver** revealed increased portal markings, swollen contour and heterogeneous parenchymal changes.

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.

Other

A mixed echogenic mass (2.23 cm x 1.85 cm) was noted in the left **testicle**. The right testicle revealed a hypoechoic nodule (1.1 cm).

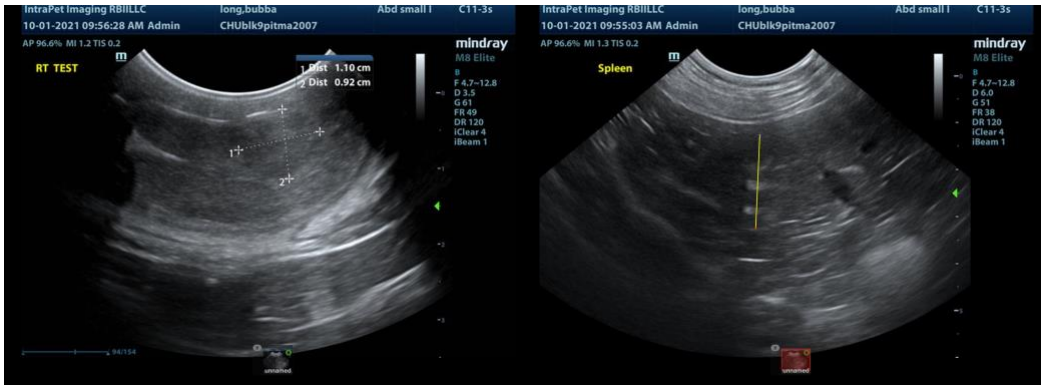
A rapid view of the **heart** revealed no evident pathology.

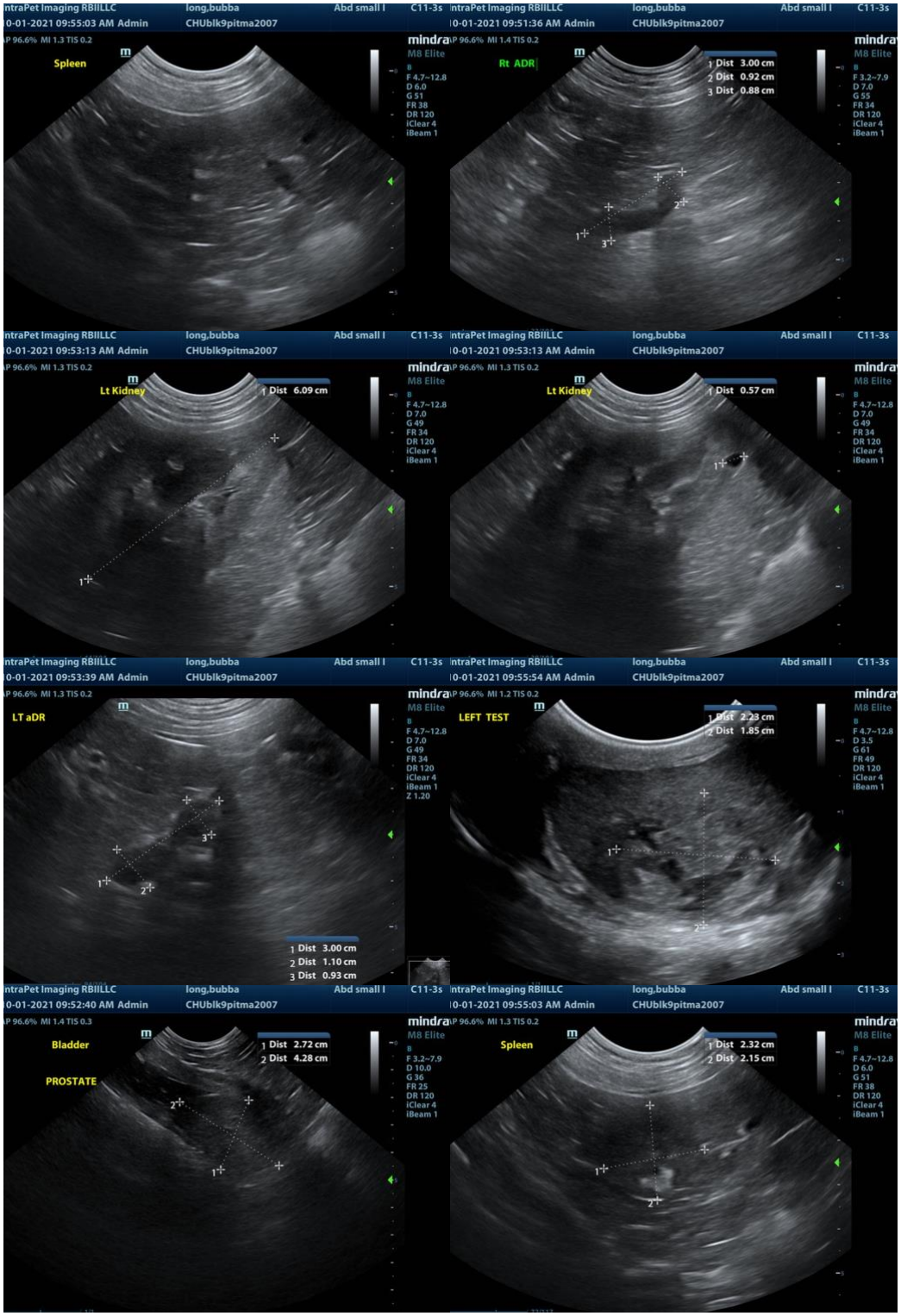
ULTRASONOGRAPHIC FINDINGS

- Age-related renal changes
- Undefined nodular splenic changes with cranial splenic mass
- Chronic inflammatory hepatopathy liver pattern, minor potential for neoplasia
- Left testicular mass and right testicular hypoechoic nodule, seminoma, Leydig cell tumor or Sertoli cell tumor possible

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend screening FNA of the spleen and liver in this patient of the general spenic parenchyma and focal nodule/mass as well as the general hepatic parenchyma. If benign, then neutering would be indicated with bilateral testicular biopsies. Splenectomy could also be considered, however, round cell neoplasia, stromal tumor, benign hyperplasia all possible causes of the splenic lesion.




ntraPet Imaging RBIILLC
long,bubba
Abd small I
C11-3s
0-01-2021 09:55:03 AM Admin
CHUblk9pitma2007
P 96.6% MI 1.3 TIS 0.2
mindra
M8 Elite
Spleen
ntraPet Imaging RBIILLC
long,bubba
Abd small I
C11-3s
0-01-2021 09:51:36 AM Admin
CHUblk9pitma2007
P 96.6% MI 1.4 TIS 0.2
mindra
M8 Elite
Rt ADR
1 Dist 3.00 cm
2 Dist 0.92 cm
3 Dist 0.88 cm
ntraPet Imaging RBIILLC
long,bubba
Abd small I
C11-3s
0-01-2021 09:53:13 AM Admin
CHUblk9pitma2007
P 96.6% MI 1.3 TIS 0.2
mindra
M8 Elite
Lt Kidney
1 Dist 6.09 cm
ntraPet Imaging RBIILLC
long,bubba
Abd small I
C11-3s
0-01-2021 09:53:13 AM Admin
CHUblk9pitma2007
P 96.6% MI 1.3 TIS 0.2
mindra
M8 Elite
Lt Kidney
1 Dist 0.57 cm
ntraPet Imaging RBIILLC
long,bubba
Abd small I
C11-3s
0-01-2021 09:53:39 AM Admin
CHUblk9pitma2007
P 96.6% MI 1.3 TIS 0.2
mindra
M8 Elite
LT aDR
1 Dist 3.00 cm
2 Dist 1.10 cm
3 Dist 0.93 cm
ntraPet Imaging RBIILLC
long,bubba
Abd small I
C11-3s
0-01-2021 09:55:54 AM Admin
CHUblk9pitma2007
P 96.6% MI 1.2 TIS 0.2
mindra
M8 Elite
LEFT TEST
1 Dist 2.23 cm
2 Dist 1.85 cm
ntraPet Imaging RBIILLC
long,bubba
Abd small I
C11-3s
0-01-2021 09:52:40 AM Admin
CHUblk9pitma2007
P 96.6% MI 1.4 TIS 0.3
mindra
M8 Elite
Bladder
PROSTATE
1 Dist 2.72 cm
2 Dist 4.28 cm
ntraPet Imaging RBIILLC
long,bubba
Abd small I
C11-3s
0-01-2021 09:55:03 AM Admin
CHUblk9pitma2007
P 96.6% MI 1.3 TIS 0.2
mindra
M8 Elite
Spleen
1 Dist 2.32 cm
2 Dist 2.15 cm

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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