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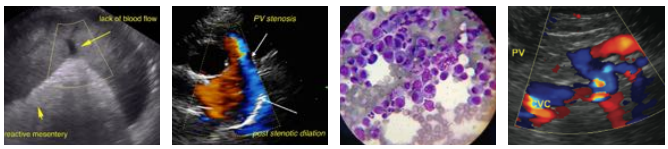

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Marshall Jagid

SPECIES
Canine

BREED
Shih Tzu

SEX
Neutered male

AGE
15 years

WEIGHT
15.5 lbs

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY
Dr. Salas

HOSPITAL NAME
Tenafly VC

REFERRING VET
Dr. Salas

INVOICE
42731

DATE
11/28/22

PRESENTING CLINICAL SIGNS

History: 15 yr old shihtzu- last year had thoracotomy to remove a thymoma. This year his screening labs revealed azotemia and a bnp slightly elevated at 950. he is clinically doing well. Chest rads today reveal a prominent cardiac silhouhette, though VHS =9? and clear lungs. bp show consistent hypertension 231/149, 225/142, 223/142 while under light sedation. UC+S pending. urine reveals quiet sediment with isosthenuria. Abd u/s today- kidneys show some cystic component on R side, splenic nodule present, and a hyperechoic mass in the left cranioabd- could not determine where it originates. pet is asymptomatic and clinically doing well. he does not have a discernable heart murmur, nor coughing, etc.

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 **kidneys** revealed moderate degenerative changes with increased cortical echogenicity. Degenerative changes in the kidneys appeared to be moderate. Multiple cortical cysts and infracts were noted in both kidneys. The left kidney measured 4.07 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 left adrenal gland measured 0.48 cm. The right adrenal gland measured 0.54 cm.

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.

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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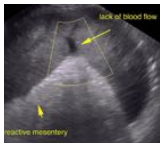
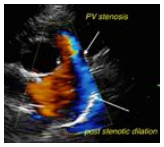
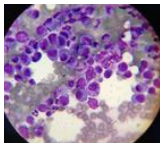
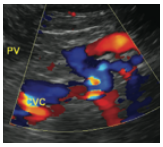

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Gastrointestinal

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.

Free Abdomen

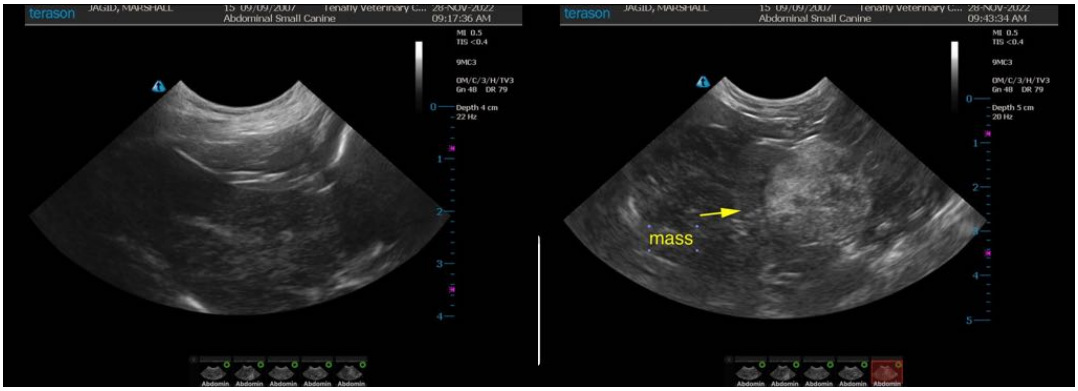
A mixed echogenic, hyperechoic, 2.0 cm mass was noted in the left cranial abdomen. This is presumed to be splenic in origin; however, the resolution was not adequate to completely definitively connect this to the spleen.

ULTRASONOGRAPHIC FINDINGS

Moderate degenerative renal changes with mass, presumed to be splenic in origin.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory splenectomy is indicated. If the azotemia can be stabilized then anti-hypertensives are warranted.



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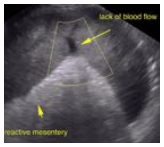
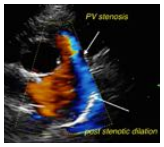
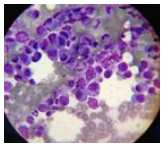
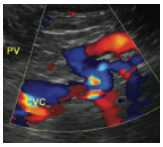

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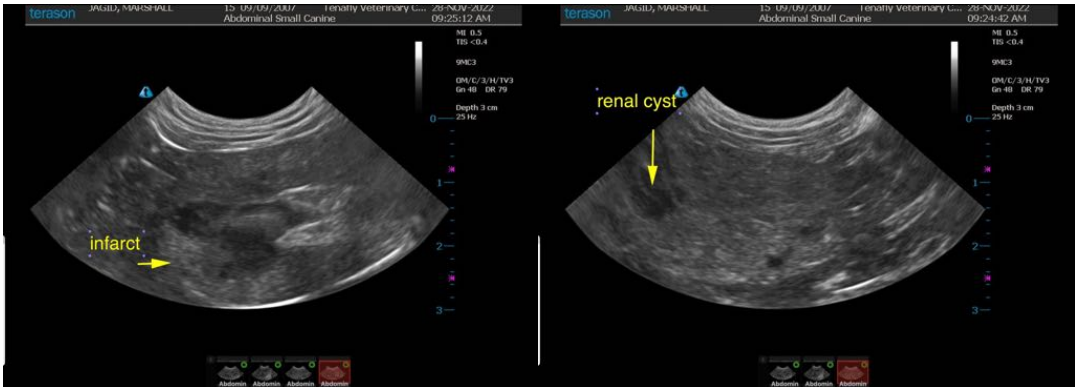

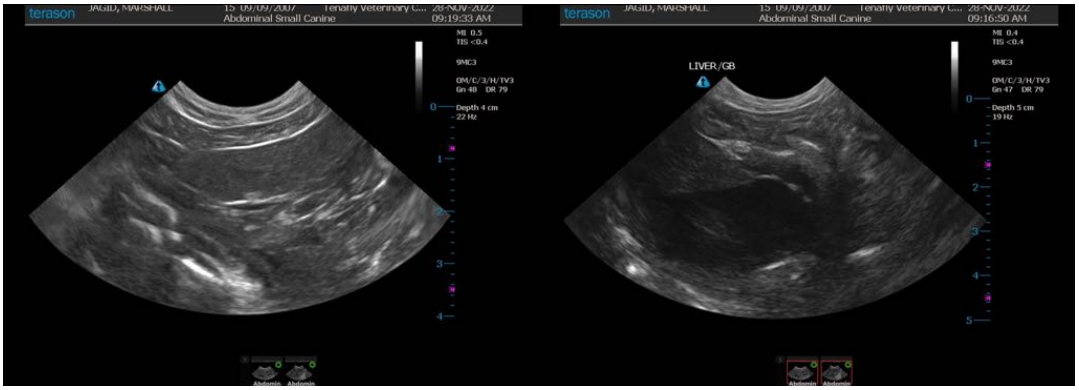

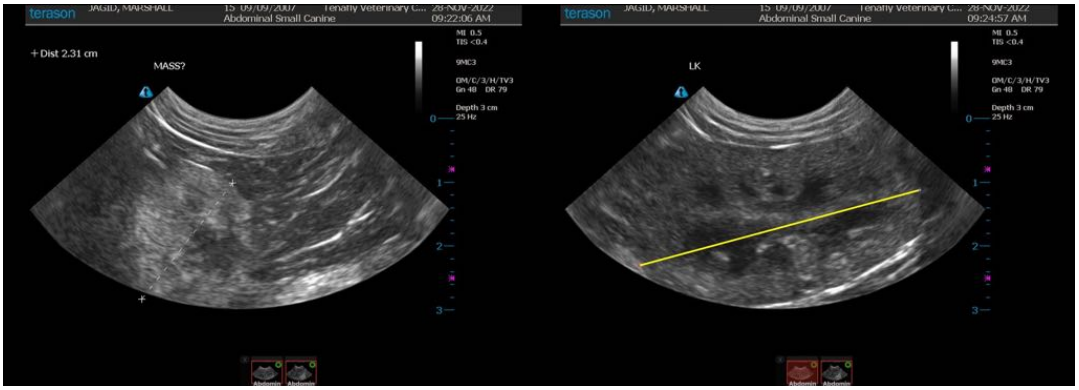

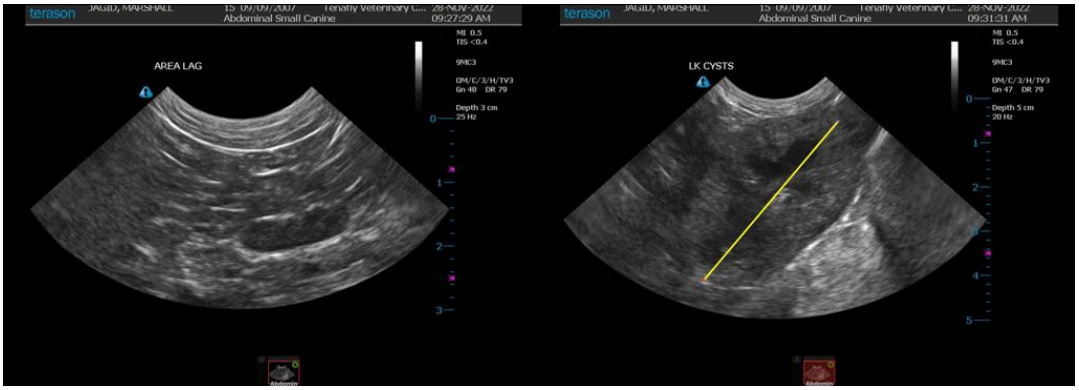

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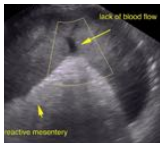
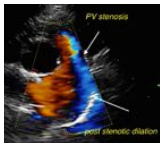
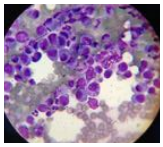
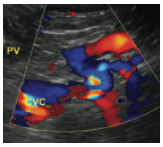

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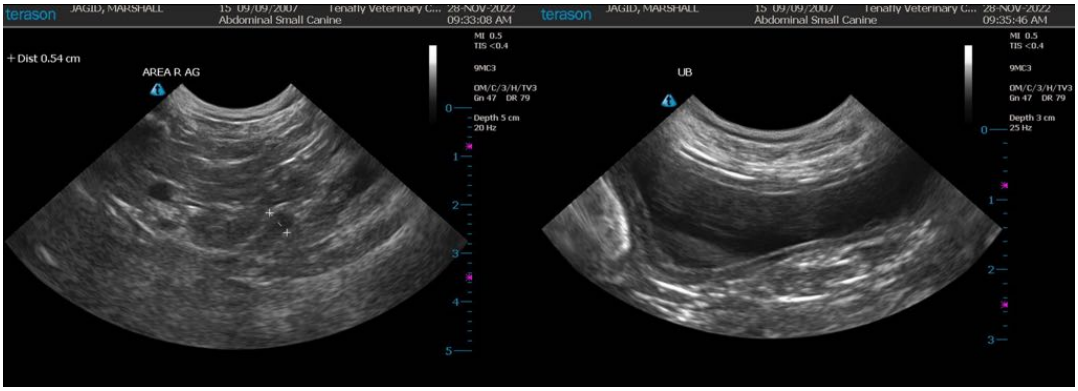

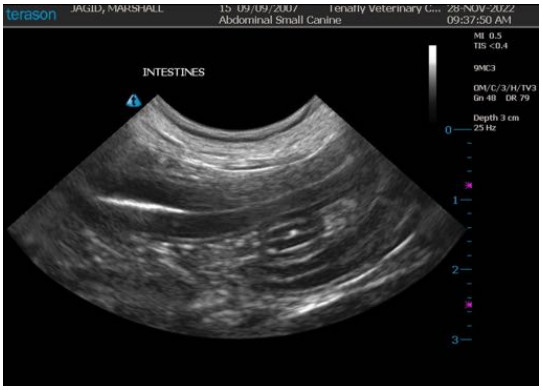

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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