



PATIENT

Perla Portillo

PRESENTING CLINICAL SIGNS

History of elevated liver values, elevated PSL, waxing and waning V/R. Current meds: metronidazole. Abnormal PE/Chem/CBC/UA Results: ALT - 290, ALP634, calcium 11.9, potassium 5.9, PSL 141.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Maltese

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 pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 3.4 cm. The left kidney measured 3.34 cm with corticomedullary calculi noted. Occasional cortical cyst noted.

AGE

16 Years

Adrenal Glands

WEIGHT

8.8 Pounds

The **left adrenal gland** comprised mass deriving from the cranial pole, measuring 1.4 cm at the cranial pole. The caudal pole measured 0.56 cm. Capsular expansion noted without capsular escape. The **right adrenal gland** was unremarkable.

Spleen

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 were noted.

IMAGING PERFORMED BY

Kelly Vazquez

Liver

HOSPITAL NAME

Animal General
on the Hudson

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** was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele, yet sludge appears to be mildly excessive. No adjunctive inflammation was noted.

REFERRING VET

Dr. Stefanie Lang

Gastrointestinal

INVOICE

33141

The **gastroesophageal** inlet revealed mildly thickened esophagus at 0.54 cm. The gastric fundus revealed a mineralized lesion measuring 1.5 cm. The pylorus and small intestine were unremarkable. The colon was particularly thickened in this patient with slight early loss of mural detail.

Pancreas

DATE

12/1/21

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain



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upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

ULTRASONOGRAPHIC FINDINGS

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Canine

- Thickened esophagus, focal gastric fundic mass (possible gastrinoma), and colitis
- Chronic hepatic changes
- Chronic renal changes with calculi
- Left adrenal mass – likely adenoma, possibility of carcinoma

BREED

Maltese

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The left adrenal mass and gastric mass appear resectable. Endoscopy and colonoscopy could be considered given the chronic upper GI and colonic changes. Serum gastric level warranted. Low-grade esophagitis also suspected. Guarded prognosis. GI protectant protocol warranted until further diagnostics can be performed. Blood pressure measurements indicated given the left adrenal lesion.

SEX

Spayed Female

AGE

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WEIGHT

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DABVP, Cert. IVUSS

IMAGING PERFORMED BY

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HOSPITAL NAME

Animal General
on the Hudson

REFERRING VET

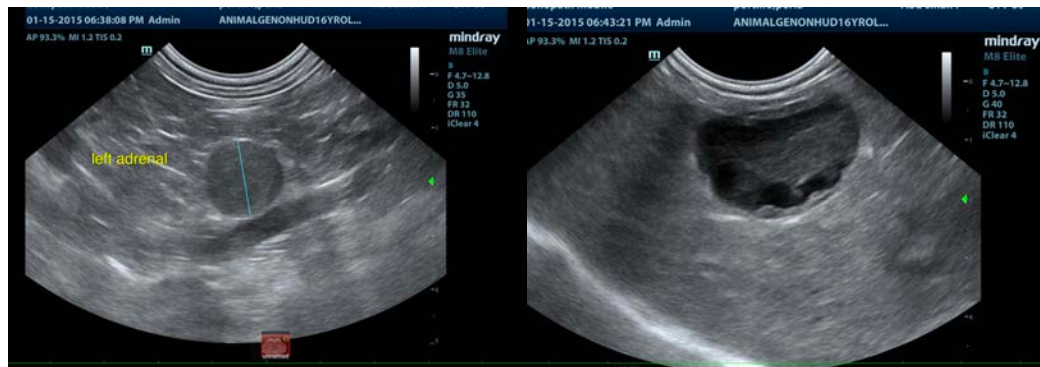
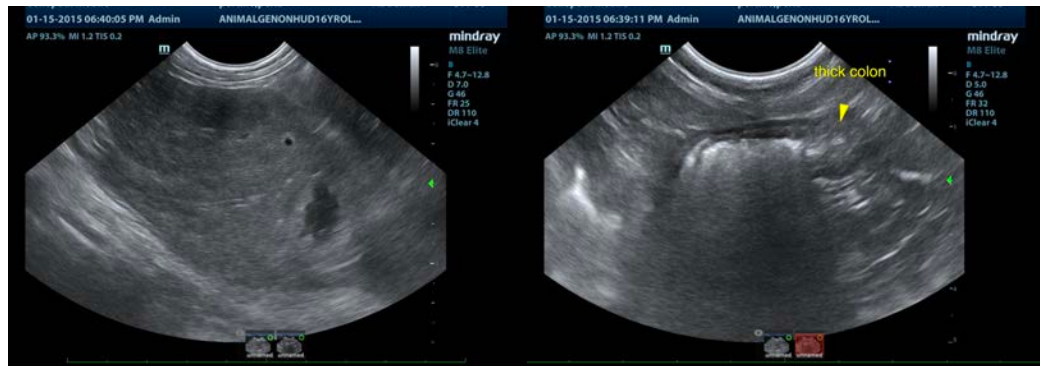
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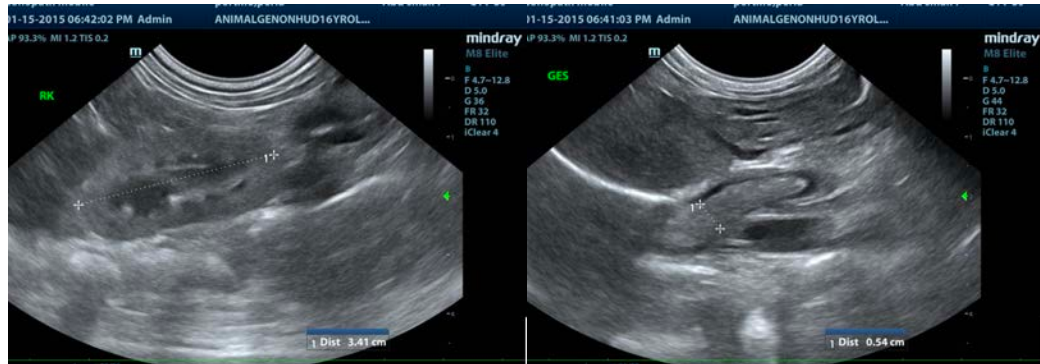
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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