

**DATE**

12/6/21

**PRESENTING CLINICAL SIGNS**

History: Received cytology results back and mass did come back consistent with a mast cell tumor which is a type of cancer. Discussed potential for imaging such as x-ray and ultrasound to screen for development of masses elsewhere.

**PATIENT**

Sophie Johnson

Date of Previous IntraPet Ultrasound: No previous IntraPet scans.  
Sedation: Not required to complete full diagnostic ultrasound.  
Stat Report: Not requested.

**SPECIES**

Canine

**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.

**BREED**

Pitbull Terrier

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. The left kidney measured 6.17 cm with pelvic mineralization that measured 0.3 cm. The right kidney measured 6.75 cm.

**SEX**

Spayed Female

**AGE**

9/3/08

**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 3.11 x 0.81 cm at the caudal pole and 0.73 cm at the cranial pole. The right adrenal gland measured 2.88 x 0.81 cm at the caudal pole and 0.86 cm at the cranial pole.

**WEIGHT**

55.8 lbs

**INTERPRETED BY**

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

**Spleen**

The **spleen** revealed multi-focal, heterogenous parenchymal changes with moderate remodeling. The spleen was mildly to moderately enlarged.

**IMAGING PERFORMED BY**

Rachel Brillhart RDMS

**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.

**HOSPITAL NAME**

Banfield Pet Hospital  
of City Plaza

**REFERRING VET****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.

**INVOICE**

### **Pancreas**

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

### **Heart**

Rapid view of the heart revealed no evidence of pathology in the right auricle or pericardium.

### **ULTRASONOGRAPHIC FINDINGS**

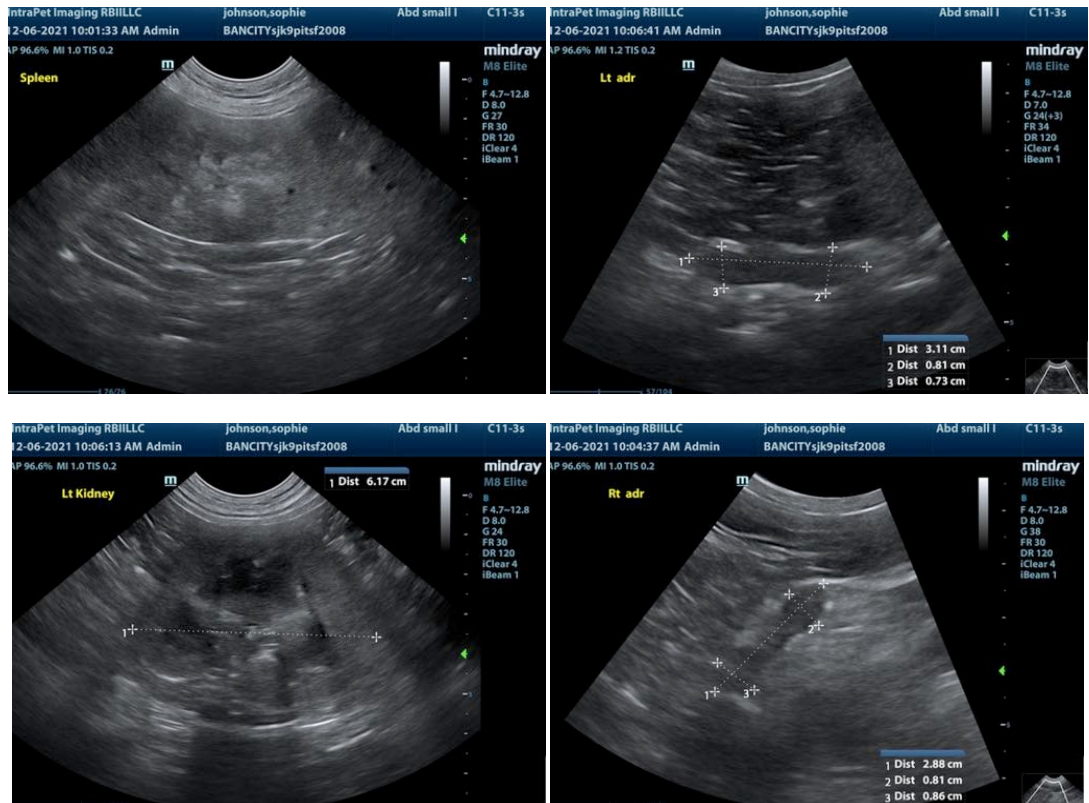
Undefined splenic remodeling and nodular changes.

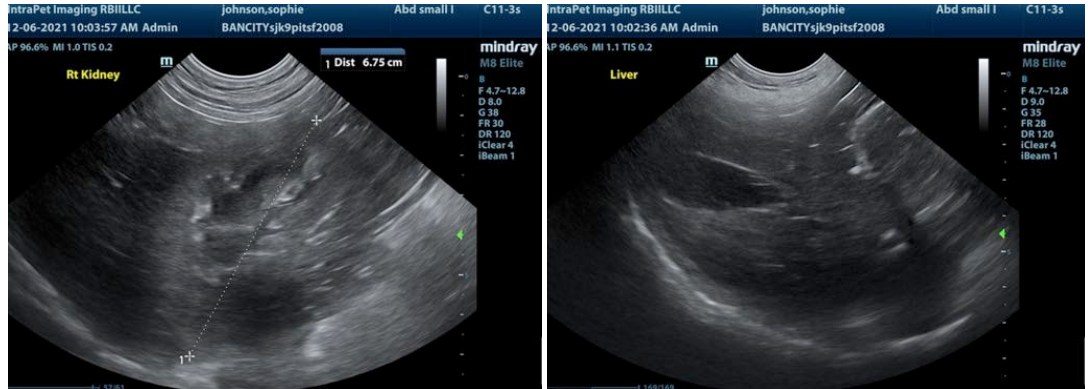
Pronounced hyperplasia versus round cell neoplasia or other neoplastic event is possible.

Otherwise, geriatric abdomen.

### **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

FNA of the spleen is recommended. Three view chest radiographs are recommended to assess for thoracic metastatic disease. However, there is a strong potential that the splenic changes are benign and hyperplasia oriented.





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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