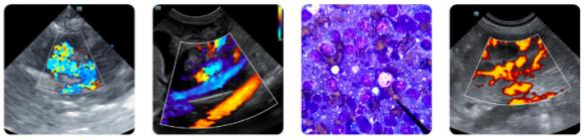


PATIENT

Chella Cerciello

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed Female

AGE

10

WEIGHT

37

INTERPRETED BY

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal Hospital

REFERRING VET

Dr. Maniar

INVOICE

13715

DATE

02/12/26

PRESENTING CLINICAL SIGNS

- re check prev u/s 11/13/25 Checking sizes of R adrenal mass and L adrenal nodule Current meds Vetoryl Owner reports doing well at home Has 2 lipomas that might need to be removed

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra to a depth of 2.0 cm 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 **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. The left kidney measured 5.0 cm in length. The right kidney measured 5.4 cm in length.

Adrenal Glands

The **right adrenal gland** was enlarged in size measuring 2.5 cm width at the cranial pole and 0.92 cm width at the caudal pole with irregular shape. The right adrenal gland revealed a persistent mass effect at the cranial pole measuring 2.7 cm x 2.8 cm with capsular expansion without capsular escape or vascular invasion.

The **left adrenal gland** was enlarged in size (at the time of the previous ultrasound) measuring 0.74 cm width at the cranial pole and 1.31 cm width at the caudal pole with a 1.55 cm x 1.2 cm nodule at the caudal pole. The left adrenal gland is now progressively enlarged to 2.65 cm x 1.13 cm width at the caudal pole and 0.98 cm width at the cranial pole. The caudal pole remained the same, yet the cranial pole has increased in size.

Loss of structural detail was noted in both adrenal glands.

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 were noted.

Liver

The **liver** was uniformly swollen. The liver presented with minor coarse architecture with mildly increased portal markings and subtle, mixed echogenic changes. This is consistent with vacuolar hepatopathy and some level of remodeling and history of inflammatory component. There was no

PATIENT

Chella Cerciello

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed Female

AGE

10

WEIGHT

37

INTERPRETED BY

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal Hospital

REFERRING VET

Dr. Maniar

INVOICE

13715

DATE

02/12/26

overt suspicion of neoplasia. The gallbladder was unremarkable. The vena cava was free of evident of pathology.

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.

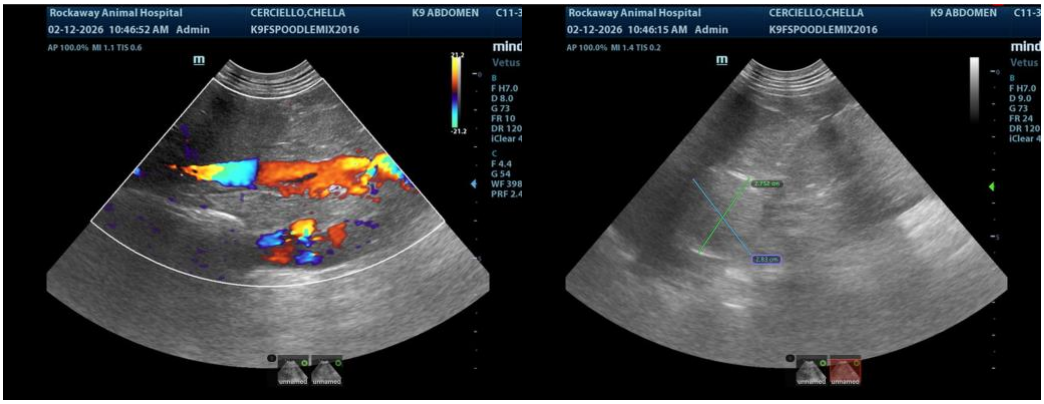
ULTRASONOGRAPHIC FINDINGS

- Age-related renal changes.
- Right adrenal mass0 bilateral hyperplasia, adenoma, adenocarcinoma, pheochromocytoma.
- Nodular left adrenal gland- bilateral hyperplasia, possibility of adenocarcinoma or pheochromocytoma.
- Vacuolar hepatopathy pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Serial blood pressure is warranted. The adrenal glands will increase in size on Vetoryl therapy. Persistent monitoring every 3-4 months of the adrenal presentation is recommended. If hypertension is an issue, then urine metanephrine level is indicated. Eventual right adrenalectomy may be appropriate.

I am more concerned about the capsular expansion and mass effect of the right adrenal gland opposed to the left adrenal gland, however, heterogenous changes and nodular changes of the left adrenal gland appear to be evident and growing as well.



PATIENT

Chella Cerciello

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed Female

AGE

10

WEIGHT

37

INTERPRETED BY

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal Hospital

REFERRING VET

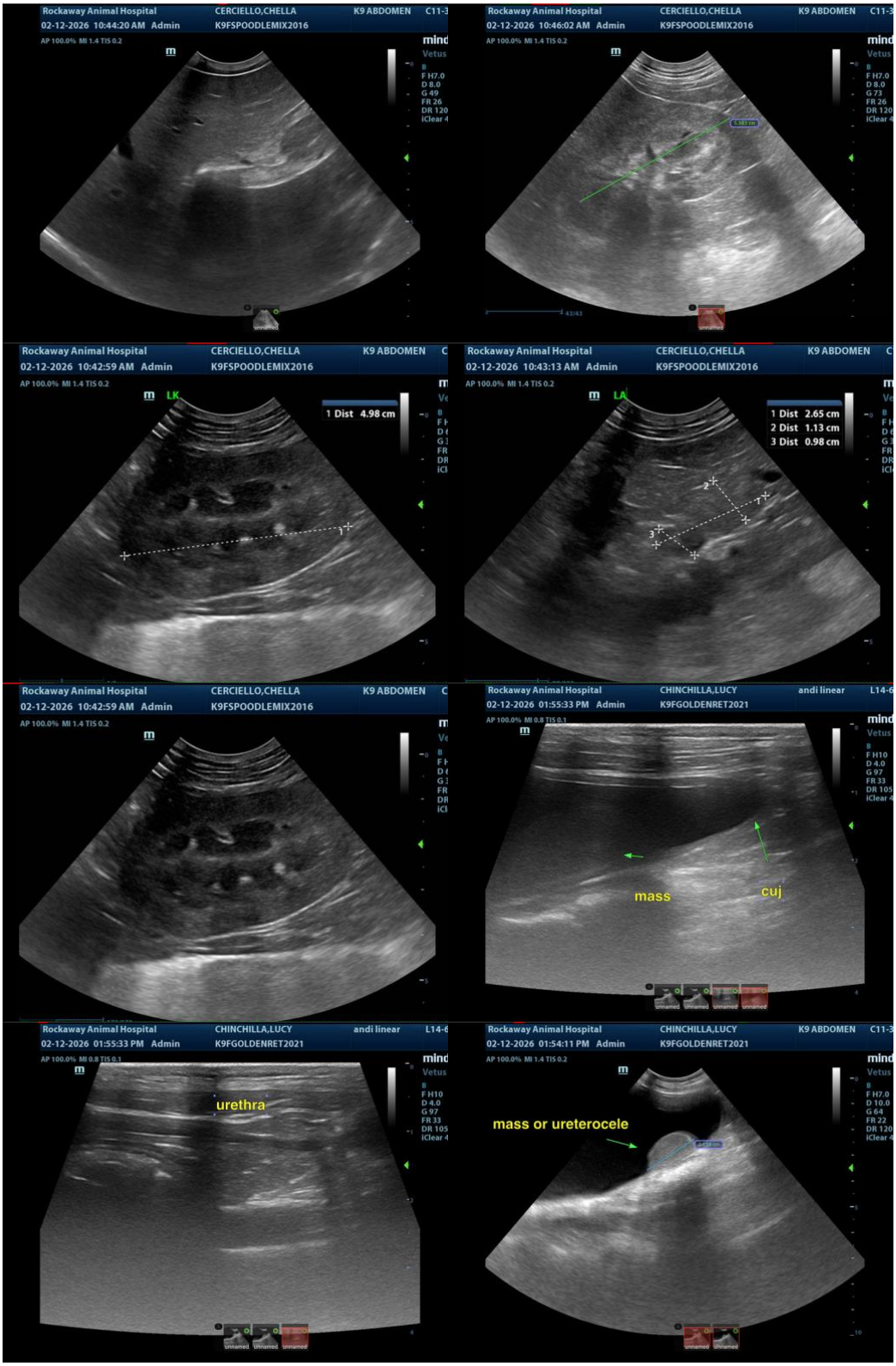
Dr. Maniar

INVOICE

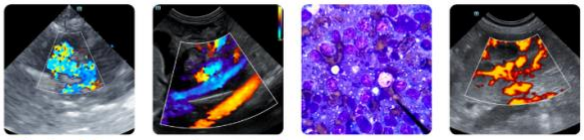
13715

DATE

02/12/26



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Chella Cerciello

SPECIES

Canine

BREED

Poodle Mix

SEX

Spayed Female

AGE

10

WEIGHT

37

INTERPRETED BY

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal Hospital

REFERRING VET

Dr. Maniar

INVOICE

13715

DATE

02/12/26

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(CFM), Cert. IVUSS,

CEO, Owner, Founder -- SonoPath.com

info@SonoPath.com