**PATIENT**

Tails Shetty

SPECIES

Canine

BREED

Poodle Mix

SEX

Neutered male

AGE

5 years

WEIGHT

64 lbs

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**IMAGING PERFORMED BY**

Amy Mayhew LVT

HOSPITAL NAME

SVS Imaging Michigan

REFERRING VET

Dr. Gentile

INVOICE

42763

DATE

2/13/23

PRESENTING CLINICAL SIGNS

History: Current Medications: Apoquel 16 mg EOD, Cetirizine 20 mg EOD Patient History: 1-2 weeks duration of polyuria/polydipsia. Drinking ~ 120 oz (3500 ml) / day.

Abnormal PE/Chem/CBC/UA Results: Rectal is unremarkable. Anal sacs are small and symmetrical, expressed a small amount of normal exudate. Preputial salivary staining Diagnostics: CBC - NEU 3.01 (3.62-12.3), PLT 78 Manual Blood Smear - Platelet count 84k. Normal erythrocyte morphology. Few segmented neutrophils present. Chem - BUN 31 (9.0-29), Ca > 15.3 (9.0-12.2), CHOL > 450 (120-310) Lytes - Mg 1.4 (1.5-2.4) T4 - WNL 4Dx - Negative UA (cysto) - SpG 1.000, pH 5, RBC 0-1/hpf, Calcium oxalate crystals 5-10/hpf Chest Radiographs - Normal cardiac silhouette. No signs of metastasis or mineralization. Assessment: Polyuria/Polydipsia Neutropenia, Thrombocytopenia - r/o immune-mediated disease Uremia, mild Hypercalcemia - r/o Vitamin D toxicosis, Parathyroid disease, neoplasia Hypercholesterolemia Hypomagnesia Hyposthenuria, Calcium oxalate crystalluria - suspect secondary to systemic hypercalcemia Malignancy profile to MSU pending. FNA of enlarged cervical LN/cytology pending

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 normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex. The capsules were acceptably uniform without significant irregularities. The right kidney measured 6.11 cm. The left kidney measured 6.67 cm with trace pyelectasia.

Adrenal Glands

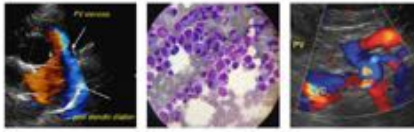
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 0.52 cm at the cranial pole and 0.66 cm at the caudal pole. The left adrenal gland measured 0.51 cm at the cranial pole and 0.63 cm at the caudal pole.

Spleen

An isoechoic, incidental nodule was noted and measured 0.84 cm at the caudal pole at the caudal pole of the spleen. This is likely benign or accessory malformation.

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Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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. The mesenteric lymph nodes were mildly enlarged.

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

The iliac lymph node was enlarged, round and measured 1.57 cm.

Thyroids

The salivary glands appeared normal in this patient. There was no obvious parathyroid adenoma. The regions of the thyroids were imaged with no evidence of pathology. In the region of the thyroid region an overlying, hypoechoic 1.5 x 1.0 cm structure consistent with lymph node was noted. The thyroid lobes were not clearly visualized. The esophagus and salivary glands appeared normal.

ULTRASONOGRAPHIC FINDINGS

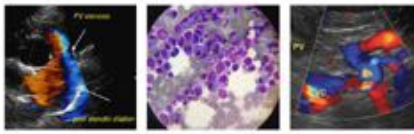
Cervical and iliac lymphadenopathy.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of both lesions is indicated to assess for paraneoplastic hypercalcemia. Hypercalcemia panel is indicated. Cranial mediastinal imaging is also indicated to assess for cranial mediastinal lymph node enlargement/sternal lymph node enlargement. If cytology is benign then primary hyperparathyroidism is suspected. Further imaging of the thyroids and parathyroids are indicated.

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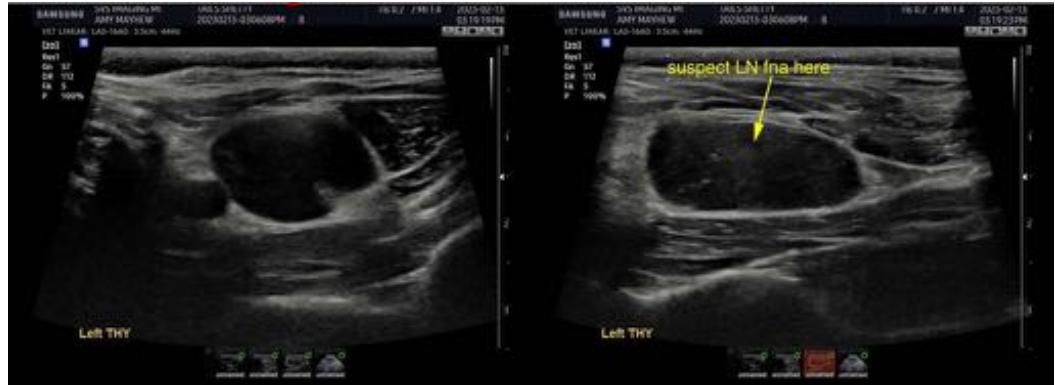
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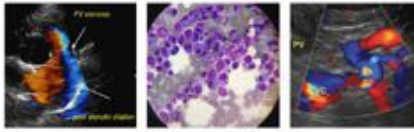
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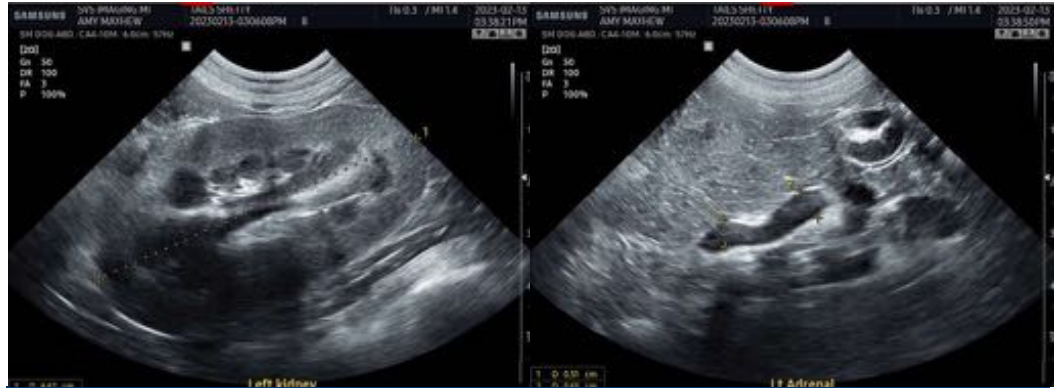
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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