

**DATE**

2/20/23

PRESENTING CLINICAL SIGNS

Presented for about 7 lbs weight loss over a 6 month period. Chronic diarrhea noted. Underweight with large neck mass on right side of neck. Ataxia noted
Current Medications: None.

PATIENT

Bella Bizarro

Lab Results: nsf on fecal, nsf on superchem/cbc. fna of mass:

Endocrine/neuroendocrine neoplasia most compatible with thyroid carcinoma (see comment) COMMENT: This is representative of an endocrine/neuroendocrine neoplasia which is most probably of thyroid origin. The vast majority of thyroid tumors in the canine are carcinoma. Other considerations would include a carotid body tumor.

SPECIES

Canine

Histologic evaluation of the mass is recommended to confirm cytologic impression. t4 1.9, ft4 30.1

Date of Previous IntraPet Ultrasound: No previous.

Sedation: dexmed 0.005mg/kg + torb 0.2mg/kg IV.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

BREED

Chihuahua Mix

SEX

Intact female

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.

AGE

4/2/09

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. Non-obstructive corticomedullary calculi were noted. The left kidney measured 4.57 cm. the right kidney measured 4.59 cm.

WEIGHT

13 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 1.82 x 0.81 caudal and 0.56 cm at the cranial pole.

HOSPITAL NAME

Everhart VH

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.

REFERRING VET

Dr. Betta

INVOICE

42877

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.

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

Diffuse hyperechoic changes were present in the area of the **pancreas**. The pancreatic remodeling was evident with multifocal to diffuse hyperechoic changes. These changes are consistent with fibrosis, amyloid, saponification of fat and may contain areas of low-grade chronic active inflammation especially if pain on imaging (+ Murphy sign) was present +/- focal subxiphoid palpation reveals pain response. No overt masses were noted.

Free Abdomen

The uterine stump was evident and appears to be consistent with a spayed female. The uterine stump measured 0.34 cm. The ovaries were not visualized.

Thyroid

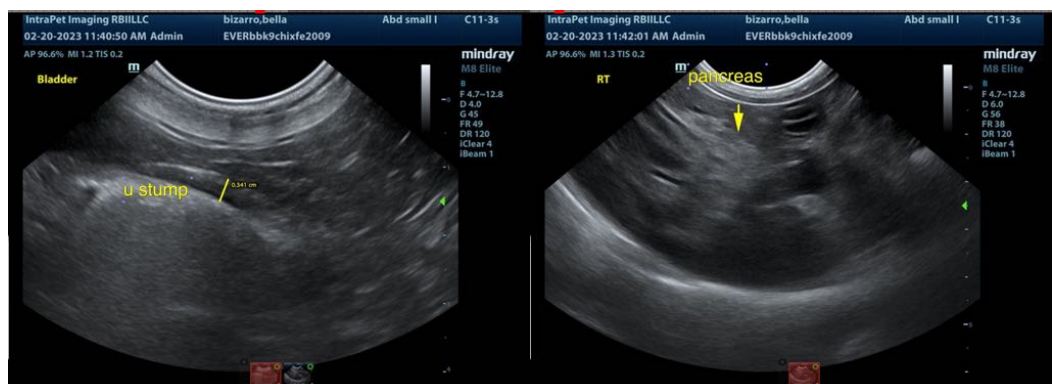
The right thyroid lobe revealed a moderately vascular nodular mass that appeared encapsulated and measured approximately 6.2 x 3.5 cm. The mass appears encapsulated. The left thyroid lobe was unremarkable and uniform measuring 1.9 x 0.49 cm.

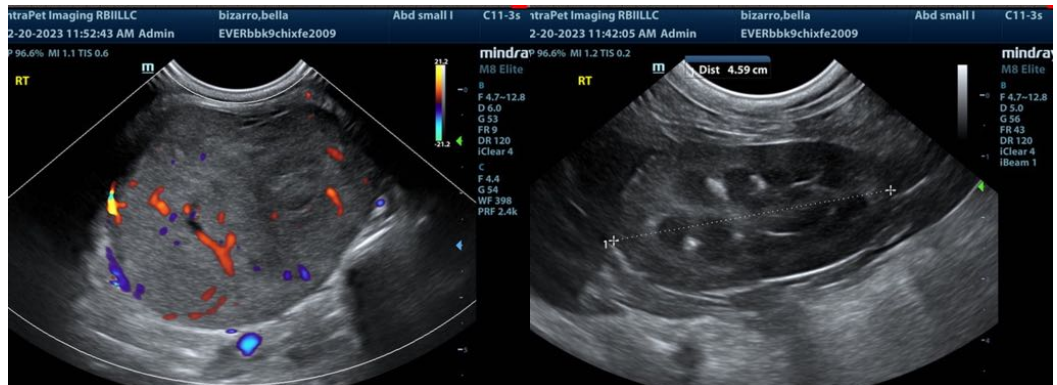
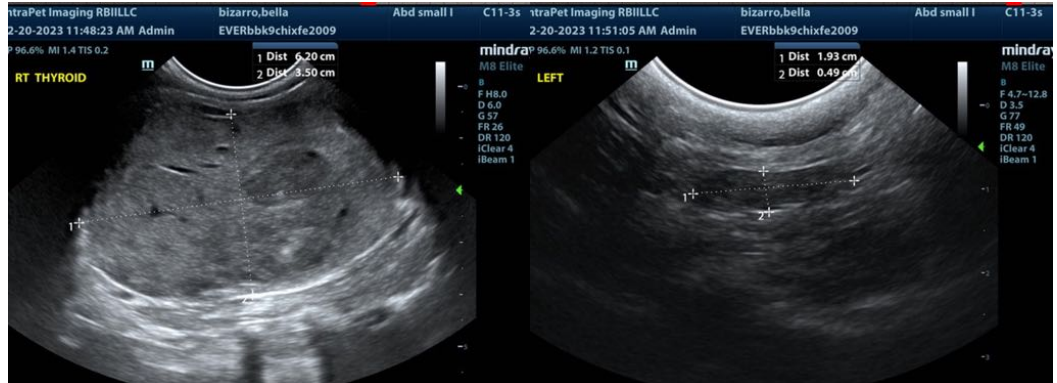
ULTRASONOGRAPHIC FINDINGS

Geriatric abdomen with mild pancreatic remodeling.
Non-obstructive nephrolithiasis and mild degenerative renal changes.
Right thyroid mass.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The right thyroid mass appears encapsulated and potentially resectable. There was no obvious tissue proliferation noted. It appears isolated to the right thyroid lobe. I suspect carcinoma. Right thyroidectomy is recommended. Chest radiographs are warranted to assess for metastatic disease.





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.

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