



PATIENT

Sadie Rouzer

SPECIES

Canine

BREED

Mix

SEX

Spayed female

AGE

14 years

WEIGHT

51 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Grau

HOSPITAL NAME

Fredon AH

REFERRING VET

Dr. Grau

INVOICE

42937

DATE

2/23/23

PRESENTING CLINICAL SIGNS

History: annual exam, owner described episode of weakness in November, otherwise doing well except for some incontinence

Abnormal PE/Chem/CBC/UA Results: mild mod generalized muscle loss, distended abd with palpable mid abd organomegaly, splenic mass on radiograph, owner wants to understand extent of problem, mets etc

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 and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 6.0 cm and was normal.

Adrenal Glands

The region of the **right adrenal gland** revealed hypoechoic, irregular structure. I suspect adrenal enlargement/mass, yet the resolution was poor. The structure measured 2.5 cm in width. The left adrenal gland was not visualized.

Spleen

There are portions of normal visible **spleen**. However, the mass appears to be deriving from it. A large, moderately complex midabdominal mass was noted in this patient and measured approximately 12-14 cm. This appears to be deriving from the spleen.

Liver

The **liver** was uniformly swollen with minor, excessive gallbladder debris and over distension with dependent and suspended bile without evidence of overt mucocele formation. However, excessive sludge was present. The liver presented 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 overt suspicion of neoplasia.



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Gastrointestinal

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Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. A minor amount of gastric fluid accumulation was present. 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.

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Pancreas

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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.

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Free Abdomen

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There was no free fluid noted. In one view a structural cranial to the left kidney was noted. The structure was irregular and hypoechoic.

WEIGHT

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ULTRASONOGRAPHIC FINDINGS

Hypoechoic, irregular structure in the region of the right adrenal gland.

Mass appears to be deriving from the spleen.

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Vacuolar hepatopathy pattern.

Separate structural cranial to the left kidney.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Blood pressure measurements are recommended. Abdominal CT evaluation would be ideal for surgical planning or direct exploratory surgery; however, right adrenalectomy may also be necessary. Chest radiographs and ideally chest CT along with abdominal CT is warranted to assess for comorbidities. In one view a separate structure cranial to the left kidney appeared to be present. Further imaging of the region cranial to the left kidney.

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ABOUT SONOPATH CT SERVICES:

SonoPath CT Services are offered at the SonoPath Imaging and Veterinary Education Center, 141 Main St (rt 206), Andover, New Jersey, a 20-minute drive west on route 80/206 North from the route 80/287 interchange/Parsippany, New Jersey. More information can be found at <https://sonopath.com/resources/sonopath-teleconsultation-services-and-sdep-certification/sonopath-ct-services>

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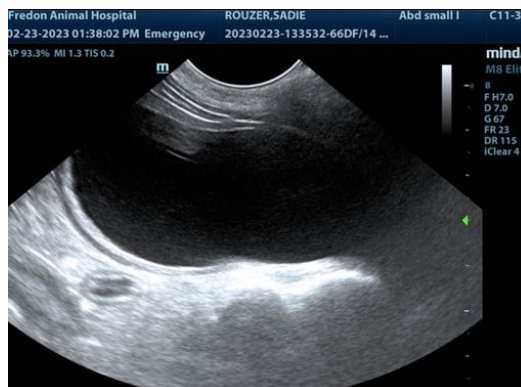
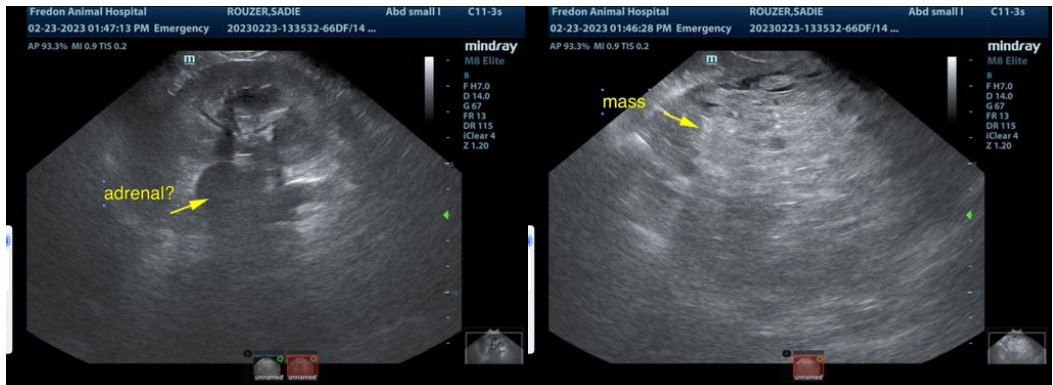
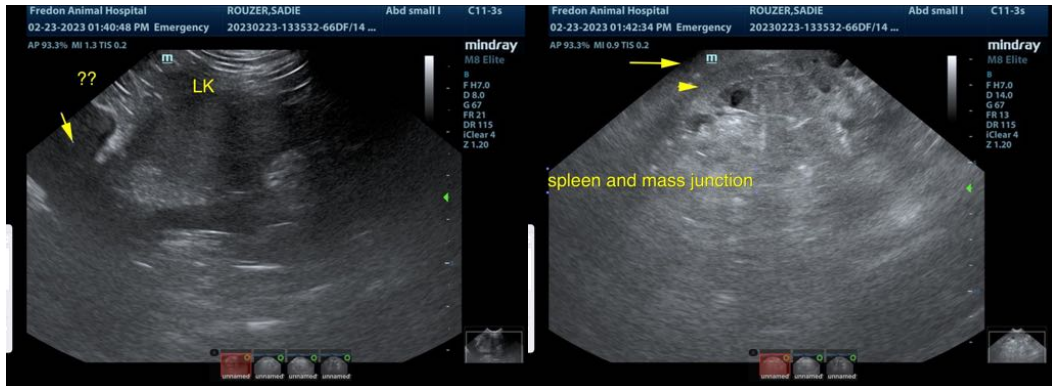
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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info@SonoPath.com

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