



PATIENT

Nyla Opal

SPECIES

Canine

BREED

Mixed Breed Canine

SEX

Spayed Female

AGE

11 Years

WEIGHT

62.4 Lbs.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Animal Paradise H

REFERRING VET

Dr. Elshafie

INVOICE

13824

DATE

2/7/22

PRESENTING CLINICAL SIGNS

History: History of urethral mass and splenic nodule. No reported current meds.

Abnormal PE/Chem/CBC/UA Results: CBC: HCT57.9, HGB 20.9.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

An apical **bladder** mass (1.69 cm x 1.04 cm) was noted as well as a deep pelvic urethral mass, measuring 1.9 cm in width, initiating approximately 2.0 cm caudal from the cystourethral junction, expanding into the pelvis.

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 right kidney measured 6.61 cm. The left kidney measured 6.23 cm.

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 2.37 cm x 0.77 cm at the caudal pole and 0.34 cm at the cranial pole. The right adrenal gland measured 1.68 cm x 0.54 cm at the caudal pole and 0.46 cm at the cranial pole.

Spleen

The **spleen** revealed multifocal splenic nodular changes. Oncology consultation recommended. An overt hyperechoic expansive mass was noted at the caudal pole, measuring 1.6 cm.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild 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



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The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some mild 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 subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

Free Abdomen

An iliac **lymph node** was enlarged, irregular and mineralized with peripheral inflammation.

Other

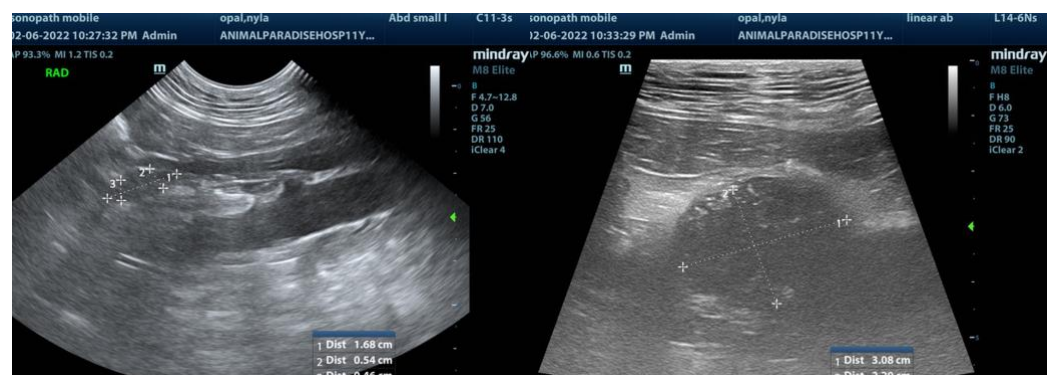
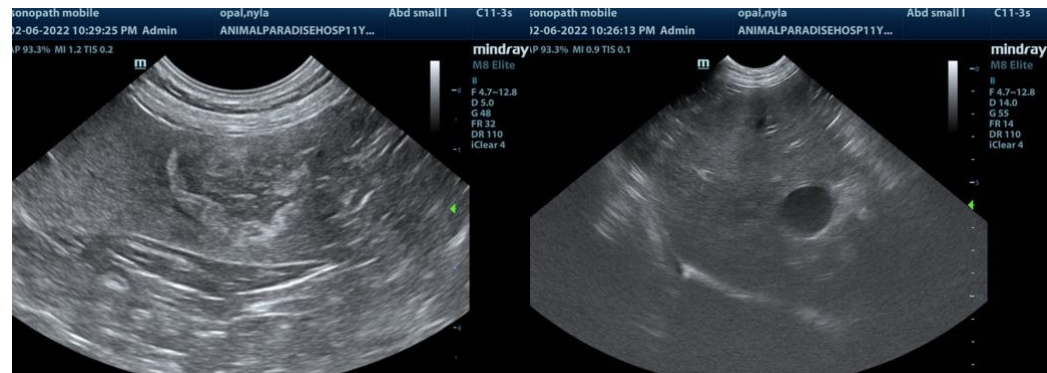
A rapid view of the **heart** revealed no evident pathology.

ULTRASONOGRAPHIC FINDINGS

- Bladder and urethral masses with peripheral inflammation
- Iliac lymph node spread with mineralization and inflammation
- Splenic nodular changes- oncology consultation recommended
- Age-related pancreatic, hepatic and renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Expansive progressive urethral neoplasia with iliac spread and new bladder mass. Splenic mass has mildly increased in size since the prior sonogram. No cardiac spread noted.





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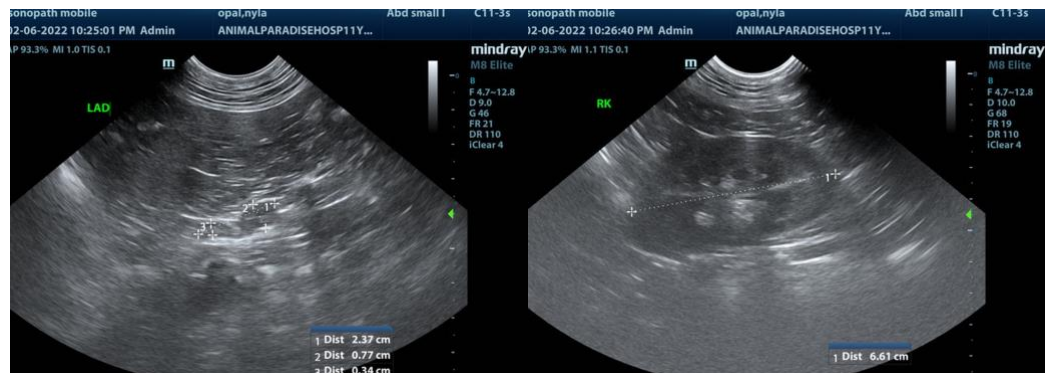
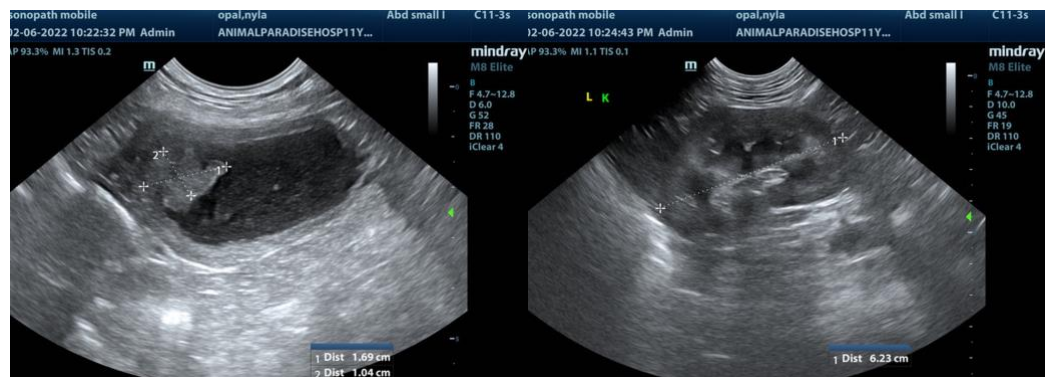
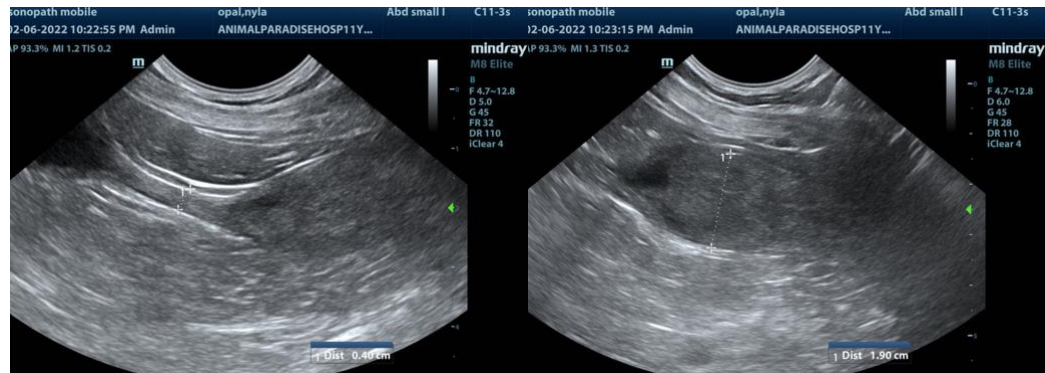
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@SonoPath.com