



**PATIENT**

Emer Sulzer

**SPECIES**

Canine

**BREED**

German Shepherd

**SEX**

Intact Female

**AGE**

11 Years

**WEIGHT**

92 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Diane McFadden

**HOSPITAL NAME**

Animal Mansion

**REFERRING VET**

Dr. Parker

**INVOICE**

36046

**DATE**

3/10/22

**PRESENTING CLINICAL SIGNS**

hematuria, stranguria, frank bloody vaginal discharge; painful all over body. Firm mammary mass. not on any meds.

Abnormal PE/Chem/CBC/UA Results: elevated WBC; UA: protein 1+, WBCs ++, RBCs ++, squamous epithelial cells, USPG 1.046

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** presented a large amount of suspended debris with uniform wall thickening. No evidence of calculi or masses. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

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. The left kidney measured 7.81 cm. The right kidney measured 9.41 cm.

**Adrenal Glands**

The **left adrenal gland** was enlarged, nodular and irregular, measuring 4.86 cm x 1.43 cm at the caudal pole and 1.12 cm at the cranial pole. The left adrenal gland was imaged from the left and right side. The **right adrenal gland** was upper limits of normal to slightly enlarged, measuring 4.44 cm x 2.39 cm at the cranial pole and 0.85 cm at the caudal pole.

**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** 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. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.



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**Pancreas**

Emer Sulzer

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.

**SPECIES**

Canine

**Other**

The uterus was thickened, primarily at the base. The lumen was empty. However, the wall was significantly hypertrophied. The patient may be in active heat or have underlying metritis. This may be the source of blood.

**BREED**

German Shepherd

The left ovary was cystic and irregular, measuring 3.0 cm. The right ovary was also cystic and irregular, measuring 4.0 cm.

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Intact Female

Pleural effusion noted through the diaphragm. Comet tail lung pattern also noted through the diaphragm.

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

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- Left adrenal mass, no evidence of invasion – Pheochromocytoma, adenocarcinoma, hyperplasia all possible.
- Prominent, nodular right adrenal gland
- Urinary debris – probable UTI.
- Thickened uterus and cystic ovaries – metritis/open pyometra pattern, mild potential for uterine neoplasia.

**WEIGHT**

92 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

Eric Lindquist, DMV

Chest radiographs warranted to assess for thoracic pathology. Serial blood pressures recommended. Recommend left adrenalectomy, ovariohysterectomy and urine culture and sensitivity. Treatment for UTI warranted empirically. Otherwise, guarded prognosis.

DABVP, Cert. IVUSS

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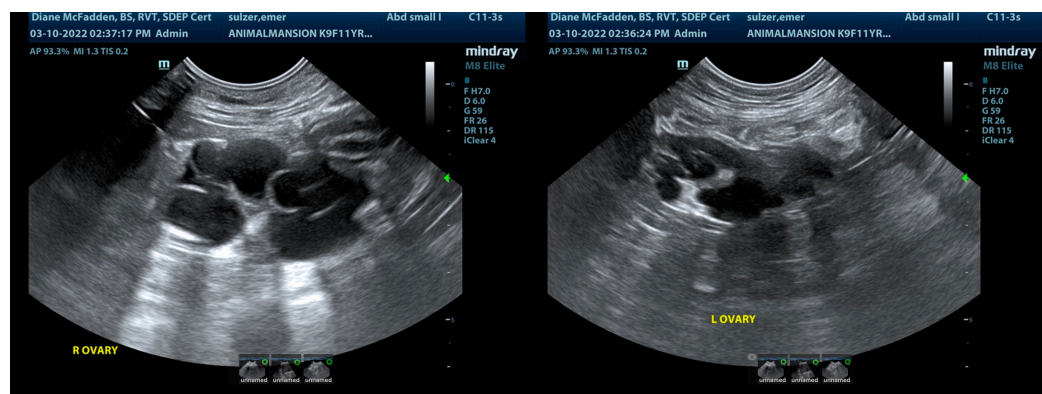
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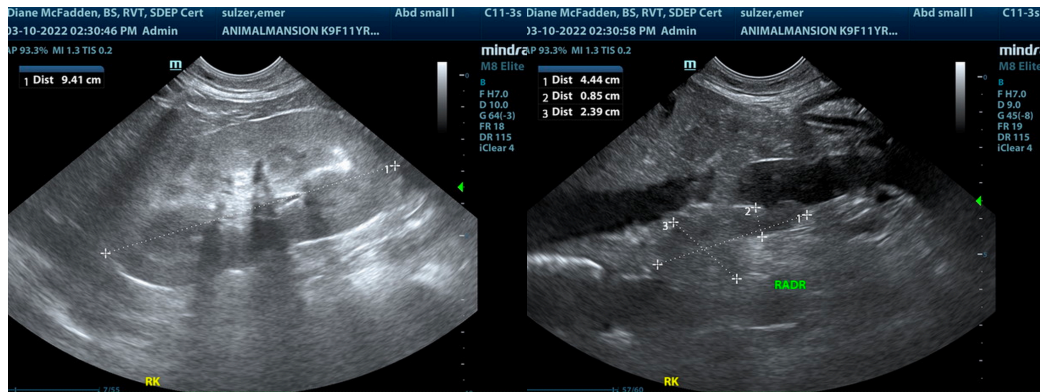
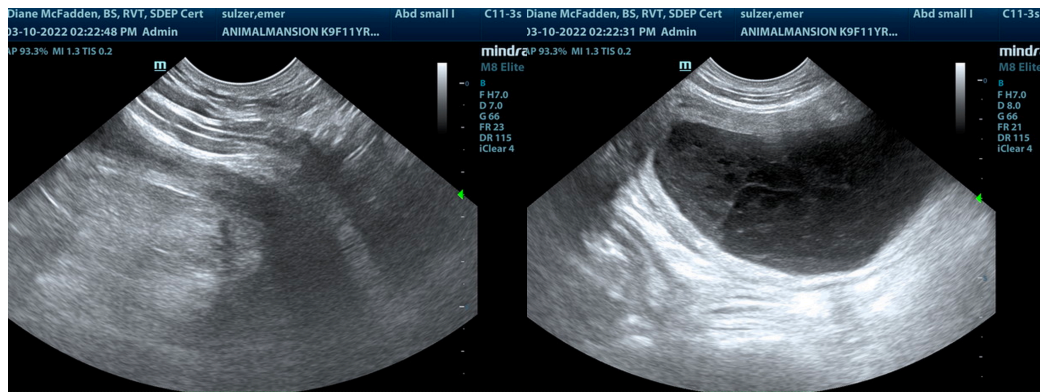
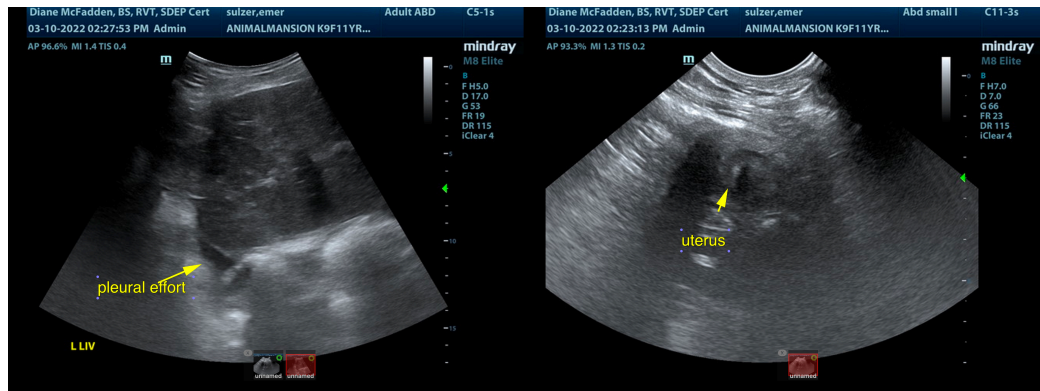
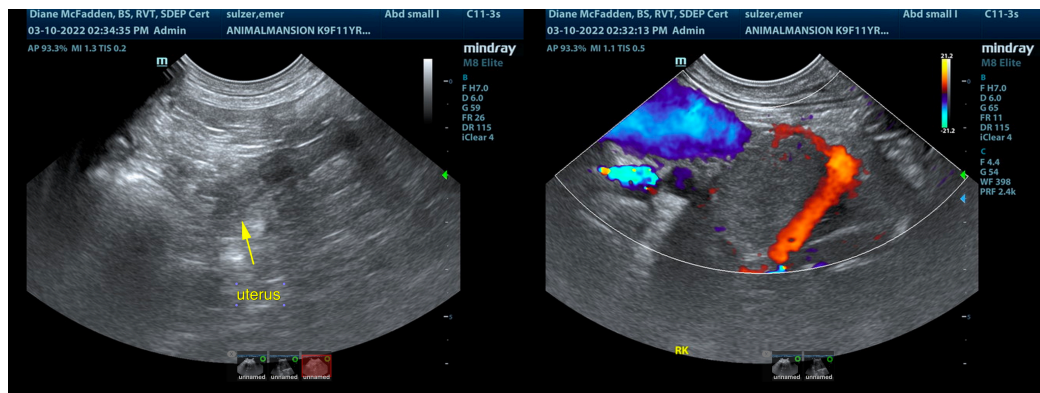
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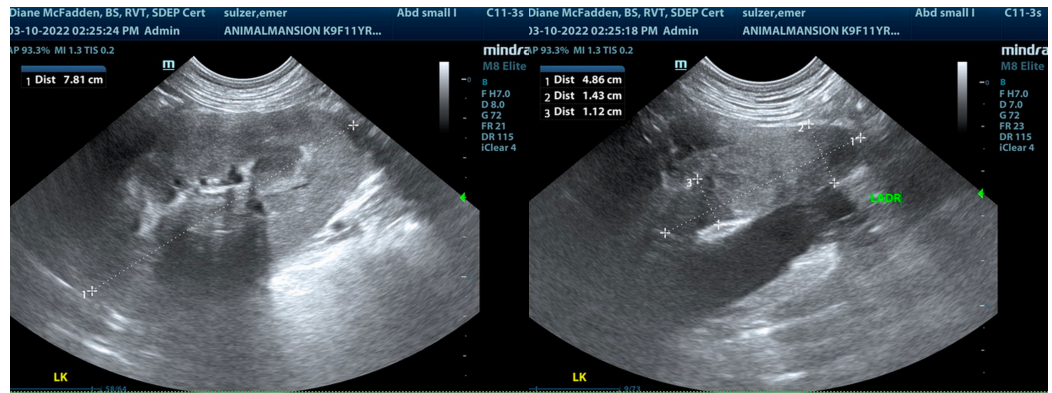
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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