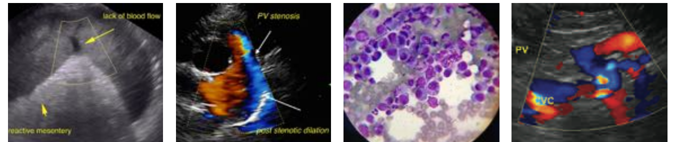


SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Sydney Sabina

SPECIES

Canine

BREED

Australian Shepherd

SEX

Neutered male

AGE

10/5/11

WEIGHT

51 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Ashley Fatzer

HOSPITAL NAME

Andover AH

REFERRING VET

Dr. Lind

INVOICE

96775

DATE

3/10/22

PRESENTING CLINICAL SIGNS

History: ADR, weak, hard time jumping, weird episodes o feels are seizures
Abnormal PE/Chem/CBC/UA Results: PE: random LN enlarged (Aspirated LN - low intact cellularity), thin, DJD appreciated in stifles, DD 2/4 CBC: HCT 39 (36-60), Hb 12.1 (12.1-20), CHEM: TP 4.8 (5-7.4), Alb 2.8 (2.7-4.4), Glob 2 (1.6-3.6) UA: SG 1.029, pro 3+, MA>30

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 right kidney measured 7.52 cm. The left kidney measured 7.47 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 3.15 x 0.72 cm at the cranial pole and 0.8 cm at the caudal pole. The right adrenal gland measured 2.82 x 0.59 cm at the caudal pole and 0.95 cm at the cranial pole.

Spleen

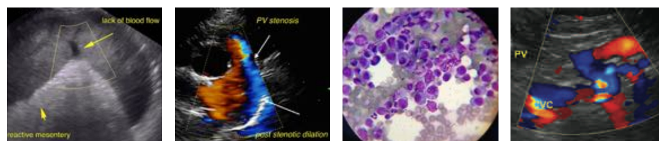
The **spleen** was enlarged with scalloping contour and hypoechoic parenchyma and enhanced surrounding mesentery. This is strongly suggestive for infiltrative disease.

Liver

The **liver** was mildly enlarged and uniform. The gallbladder and common bile duct 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.



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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

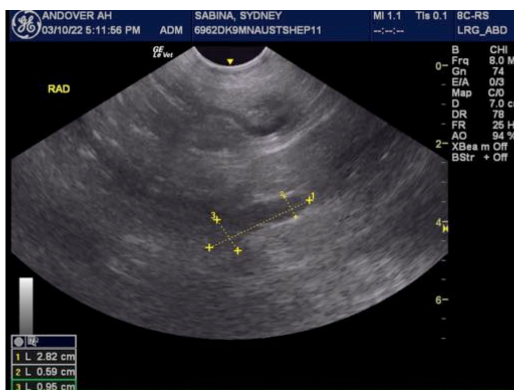
The iliac lymph node was enlarged, irregular and hypoechoic measuring 2.0 x 1.2 cm.

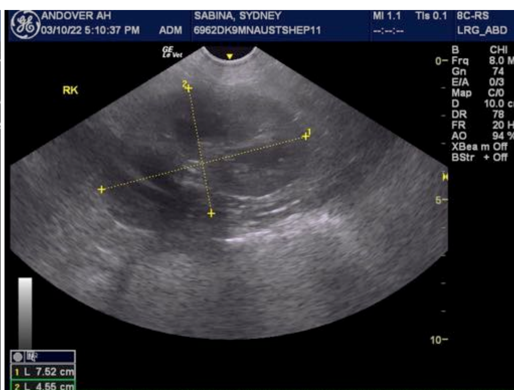
ULTRASONOGRAPHIC FINDINGS

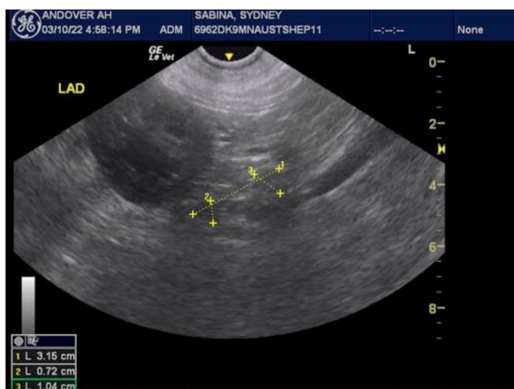
Iliac and splenic infiltrative pattern, potential hepatic involvement.

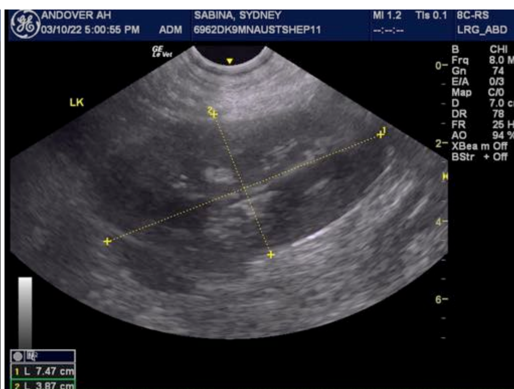
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

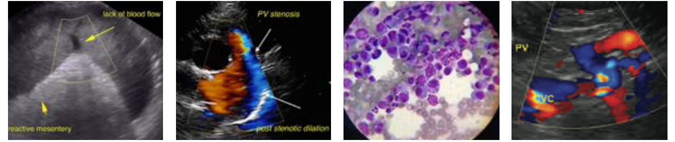
FNA of the lymph nodes, spleen and liver is all indicated. Given the clinical history round cell neoplastic spread to the CNS is possible. The spleen and lymph nodes are strongly consistent with round cell neoplasia/lymphoma. FNA is essential. There is a potential for early hepatic involvement.











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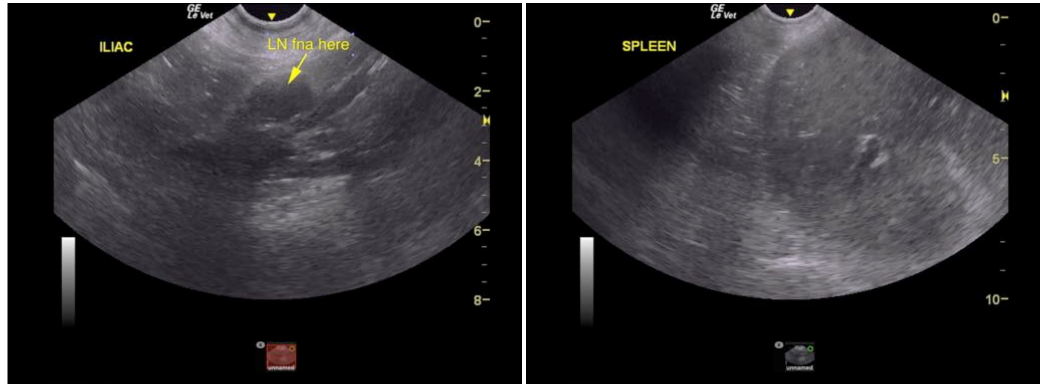
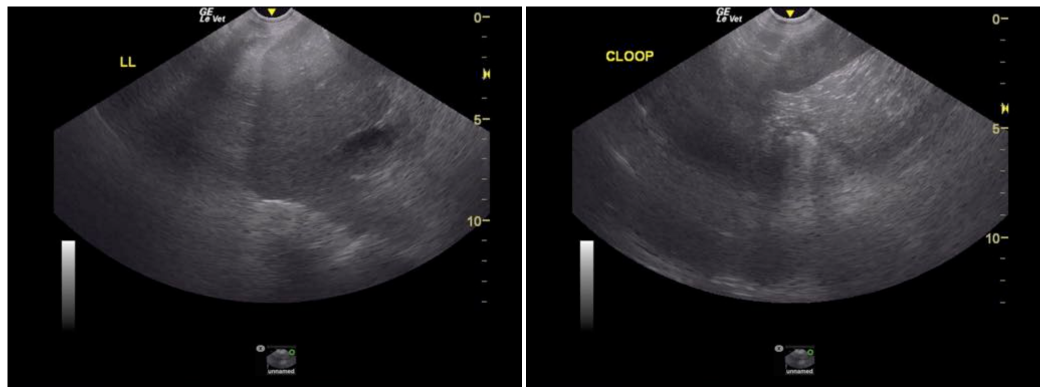
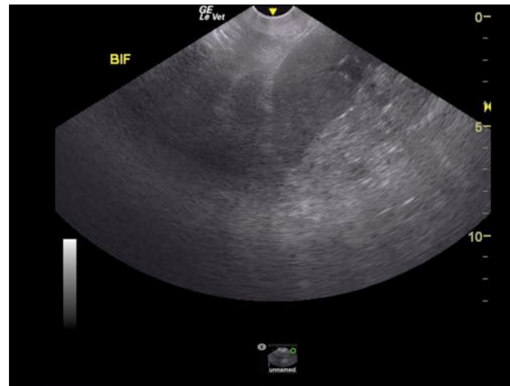
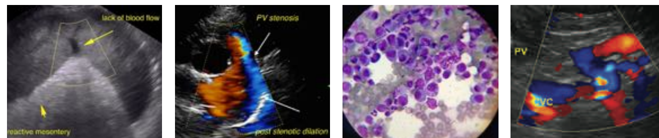






The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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