

DATE PRESENTING CLINICAL SIGNS

3/22/23

hx of chronic cough beginning in Oct 2022. On examination cranial abdomen organomegaly noted.

Radiograph performed and soft tissue opacity mid abdomen.

Current Medications: 10/7/22 doxycycline 150 mg po bid x 10 days, cough tabs= resolution of symptoms.

1/6/23 doxycycline 150 mg po bid x 10 days, cough tabs= not resolved. 1/16/23 clavamox 375 mg po bid x 7 days, tramadol 100 mg po bid-tid - did not improve at that time but o reported improvement later coughing restarting 3/14/23.

Lab Results: Azotemia, anemia, normal probnp.

Radiographs: See attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: IV sedation.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

PATIENT

Rocky Pfander

SPECIES

Canine

BREED

Shar Pei

SEX

Neutered male

AGE

3/20/10

WEIGHT

57.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Airpark AH

REFERRING VET

Dr. Superczynski

INVOICE

43469

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 prostate measured 0.65 cm.

The **kidneys** presented a relatively uniform cortical hyperechogenicity when compared to the renal medulla, spleen and liver. No overt masses were noted. Corticomedullary definition was nebulous and the ratio favored the cortex slightly. The ureters were not visible and assumed to be normal. These changes are most consistent with chronic interstitial nephritis yet infiltrative disease could not be entirely ruled out without biopsy though neoplasia is not suspected. Pyelectasia was noted in the kidneys and measured 0.27 cm in the left kidney. Cortical infarcts were noted. The left kidney measured 5.23 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 2.35 x 0.62 cm at the cranial pole and 0.59 cm at the caudal pole. The right adrenal gland measured 2.76 x 0.73 cm at the caudal pole and 0.73 cm at the cranial pole.

Spleen

The **spleen** revealed a significantly complex cystic and parenchymal mass that measured 22.0 x 20 cm. The mass occupied the majority of the abdomen.

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

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

Free fluid was noted adjacent to the spleen.

Heart

Rapid view of the heart revealed no evidence of pathology.

ULTRASONOGRAPHIC FINDINGS

Large splenic mass with slight free fluid.

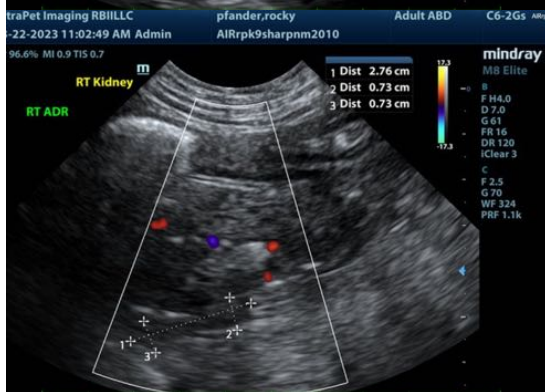
Moderate chronic degenerative renal changes and pyelectasia.

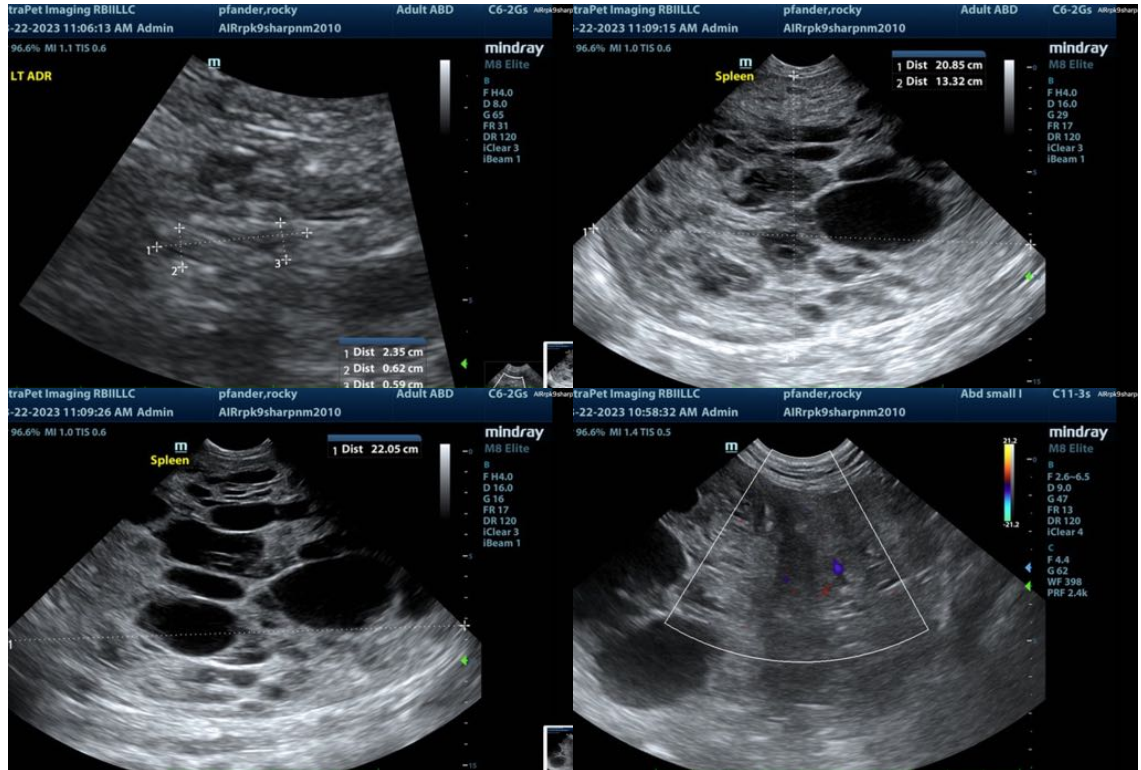
Mild heterogenous hepatic changes, no obvious evidence of metastatic disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend exploratory surgery in this patient with splenectomy, liver inspection and biopsy.

Hemangiosarcoma is likely. Histopathologically benign, but precarious tumor is possible. IV fluid support is warranted. I am concerned for the long term viability of the kidneys in this patient. Some pre-renal effect upon the azotemia may be playing a role in the clinical profile. The prognosis is extremely guarded.





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.

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