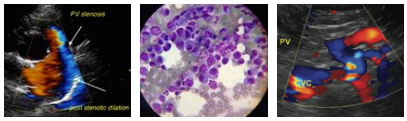
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

DATE

3/9/23

PATIENT

Sadie Burns

SPECIES

Canine

BREED

American Staffordshire

SEX

Spayed female

AGE

3/31/12

WEIGHT

48.6 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Bay Country VH

REFERRING VET

Dr. McLean

INVOICE

43192

PRESENTING CLINICAL SIGNS

Decreased activity, straining to defecate and bloated appearance to abdomen after eating for approximately 3 weeks. Normal appetite. 3lbs weight loss in 3 weeks. Labwork and rads at Rocky Gorge AH 2/25/23: Mildly elevated ALT, GGT. Poor detail in cranial abdomen, intestines appear slightly caudally displaced but not able to make out margins of any structure displacing them. PE today: abdomen feels mildly distended, no fluid wave. SQ lipoma right shoulder.
Current Medications: None.
Lab Results: 2/25/23 ALT 258 (10-125) GGT 16 (0-11)
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: STAT requested.
Imaging Performed By: Rachel Brilhart, RDMS.

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 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 6.55 cm. The right kidney measured 5.9 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 measures 2.69 x 0.75 cm at the caudal pole and 0.63 cm at the cranial pole. The right adrenal gland measured 3.06 x 0.74 cm at the caudal pole and 0.66 cm at the cranial pole.

Spleen

The **spleen** revealed a 1.9 x 1.61 cm parenchymal mass. Heterogenous changes were noted elsewhere in the spleen.

Liver

The **liver** revealed multi-focal, hypoechoic nodular changes. Given the nodular changes this is suggestive for metastatic disease. Passive congestion pattern was noted with dilated hepatic veins and vena cava. The gallbladder was 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.

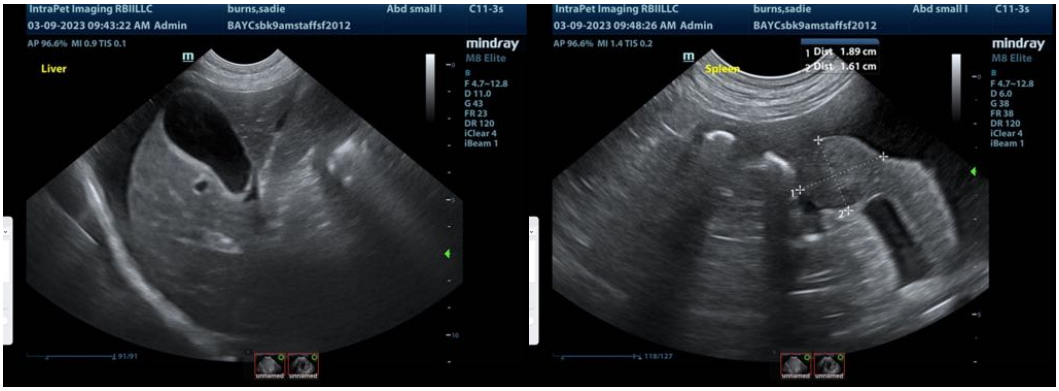
Free Abdomen
A large amount of echogenic abdominal fluid was noted in this patient.

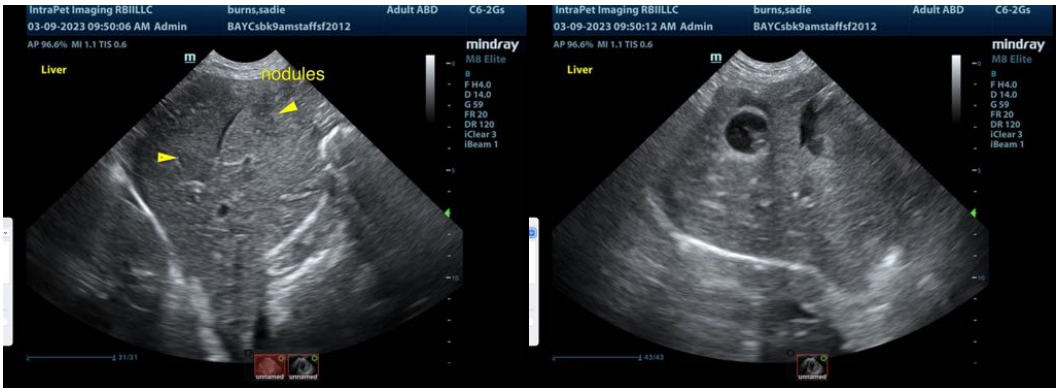
Heart
The cardiac presentation in this patient revealed a 4.54 x 2.9 cm echogenic heart base/right atrial mass. Pericardial effusion was noted. The chamber sizes appeared normalized. The cardiac mass invaded the myocardium. The cardiac presentation also revealed irregular cardial wall in addition to the mass and poor contractility. This is more suggestive for a global, myocardial infiltrative event with a focal mass as opposed to standard hemangiosarcoma. Volume contraction and contractility was poor with arrhythmogenic disease. The right atrial mass appeared to invade into the vena cava inflow and is likely the cause of obstructive diseases. Trace pericardial effusion was present.

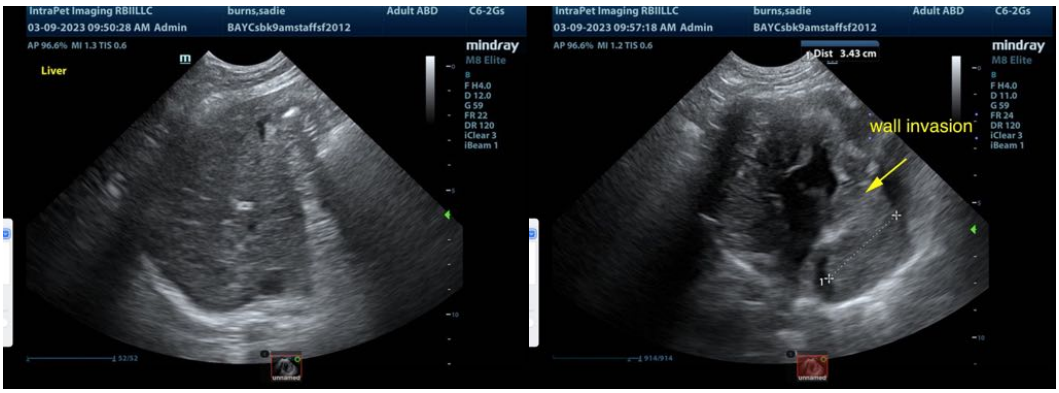
ULTRASONOGRAPHIC FINDINGS
Cardiac neoplasia involving right atrial/heart base mass with vena cava inflow obstruction and myocardial infiltrative pattern.
Passive congestion liver pattern with nodular hepatic changes.
Splenic mass.

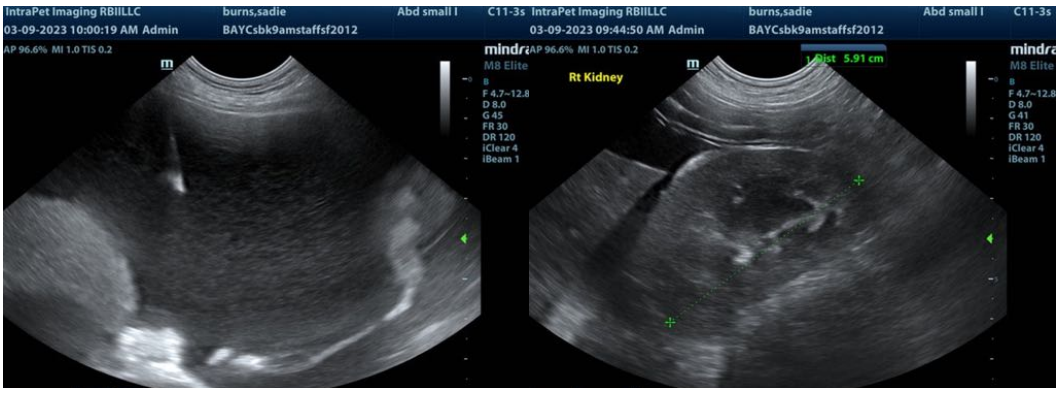
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
I suspect that the abdominocentesis will reveal modified transudate owing to passive congestion. The primary disease appears to be in the myocardium and heart causing cardiac dysfunction and obstructive disease to the vena cava. The splenic and hepatic presentations are likely manifestations of this neoplastic event. Round cell neoplasia is likely, hemangiosarcoma is less likely. The prognosis is poor. FNA of the parenchymal splenic mass and liver may be diagnostic for the underlying neoplasia.

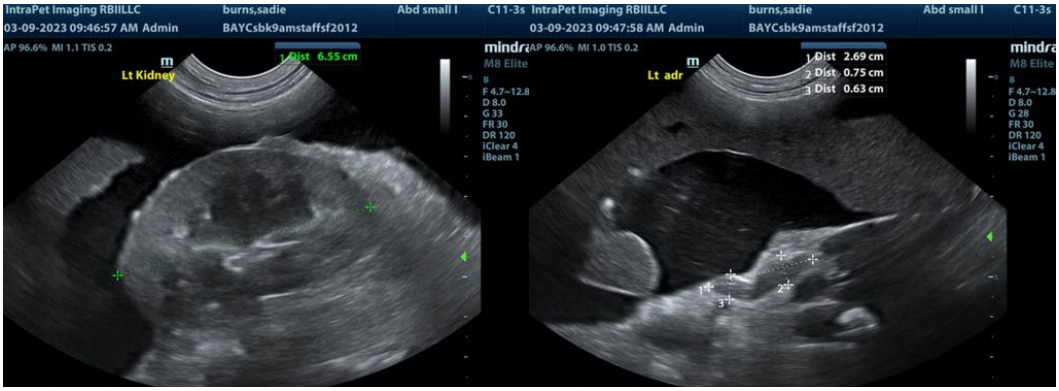
EKG is indicated to assess and attempt to manage the arrhythmogenic activity. Volume contraction is a major issue in this patient. The heart appears shocky.

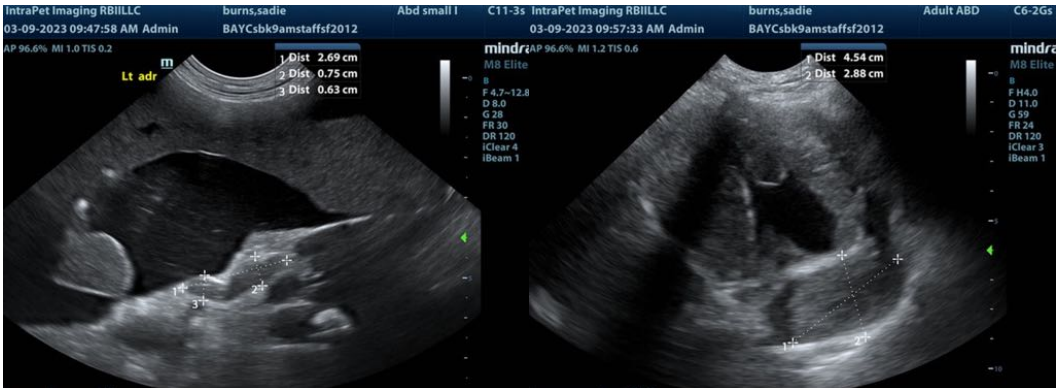

IntraPet Imaging RBIILLC
burns,sadie
Abd small I
C11-3s
03-09-2023 09:43:22 AM Admin
BAYCsbk9amstaffsf2012
AP 96.6% MI 0.9 TIS 0.1
Liver
mindray
M8 Elite
IntraPet Imaging RBIILLC
burns,sadie
Abd small I
C11-3s
03-09-2023 09:48:26 AM Admin
BAYCsbk9amstaffsf2012
AP 96.6% MI 1.4 TIS 0.2
Spleen
1 Dist 1.89 cm
2 Dist 1.61 cm
mindray
M8 Elite


IntraPet Imaging RBIILLC
burns,sadie
Adult ABD
C6-2Gs
03-09-2023 09:50:06 AM Admin
BAYCsbk9amstaffsf2012
AP 96.6% MI 1.1 TIS 0.6
Liver
nodules
mindray
M8 Elite
IntraPet Imaging RBIILLC
burns,sadie
Adult ABD
C6-2Gs
03-09-2023 09:50:12 AM Admin
BAYCsbk9amstaffsf2012
AP 96.6% MI 1.1 TIS 0.6
Liver
mindray
M8 Elite


IntraPet Imaging RBIILLC
burns,sadie
Adult ABD
C6-2Gs
03-09-2023 09:50:28 AM Admin
BAYCsbk9amstaffsf2012
AP 96.6% MI 1.3 TIS 0.6
Liver
mindray
M8 Elite
IntraPet Imaging RBIILLC
burns,sadie
Adult ABD
C6-2Gs
03-09-2023 09:57:18 AM Admin
BAYCsbk9amstaffsf2012
AP 96.6% MI 1.2 TIS 0.6
1 Dist 3.43 cm
wall invasion
mindray
M8 Elite


IntraPet Imaging RBIILLC
burns,sadie
Abd small I
C11-3s
03-09-2023 10:00:19 AM Admin
BAYCsbk9amstaffsf2012
AP 96.6% MI 1.0 TIS 0.2
mindray
M8 Elite
IntraPet Imaging RBIILLC
burns,sadie
Abd small I
C11-3s
03-09-2023 09:44:50 AM Admin
BAYCsbk9amstaffsf2012
AP 96.6% MI 1.0 TIS 0.2
Rt Kidney
1 Dist 5.91 cm





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
Eric.Lindquist@SonoPath.com