

**DATE**

4/11/22

PRESENTING CLINICAL SIGNS

3/16 seen for decreased appetite, vomiting and diarrhea with red tint. Radiographs nsf, labwork showed hemoconcentration. Responded well to supportive care. This week signs have returned and runny stools now have now dark appearance. P has a perineal tumor, FNA unable to determine if benign vs malignant.

PATIENT

Max Staab

Current Medications: 3/16/22: entyce 3 mg/kg po sid once, metronidazole 500 mg po bid x 7 days, cerenia 120 mg x 2 days,

famotidine 20 mg 2 tablets po sid. 4/7/22 restarted metronidazole, cerenia and famotidine.

Lab Results: 3/14/22: HCT 65%. snap cPL normal.

SPECIES

Canine

Radiographs: Chest and abdominal radiographs taken. labs and radiology report attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

BREED

Labrador

Imaging Performed By: Andi Parkinson, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**SEX**

Neutered male

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.

AGE

6/7/11

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 7.56 cm. The right kidney measured 6.38 cm.

WEIGHT

80 lbs

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**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 2.3 x 0.74 cm at the cranial pole and 0.79 cm at the caudal pole. The right adrenal gland measured 2.28 x 0.68 cm at the cranial pole and 0.83 cm at the caudal pole.

HOSPITAL NAME

Perry Hall AH

Spleen

The **spleen** was enlarged with scalloping contour. Minor, heterogenous parenchymal changes were noted given the vague clinical signs. Screening FNA is indicated to ensure that this is a reactive state as opposed to an early neoplastic one.

REFERRING VET

Dr. Hatzigiannakis

Liver**INVOICE**

99203

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. An anechoic cyst measuring 0.5 cm was noted in the right medial liver and is not pathological. 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. There was retention of ingesta noted in the stomach. This is consistent with post prandial presentation. 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

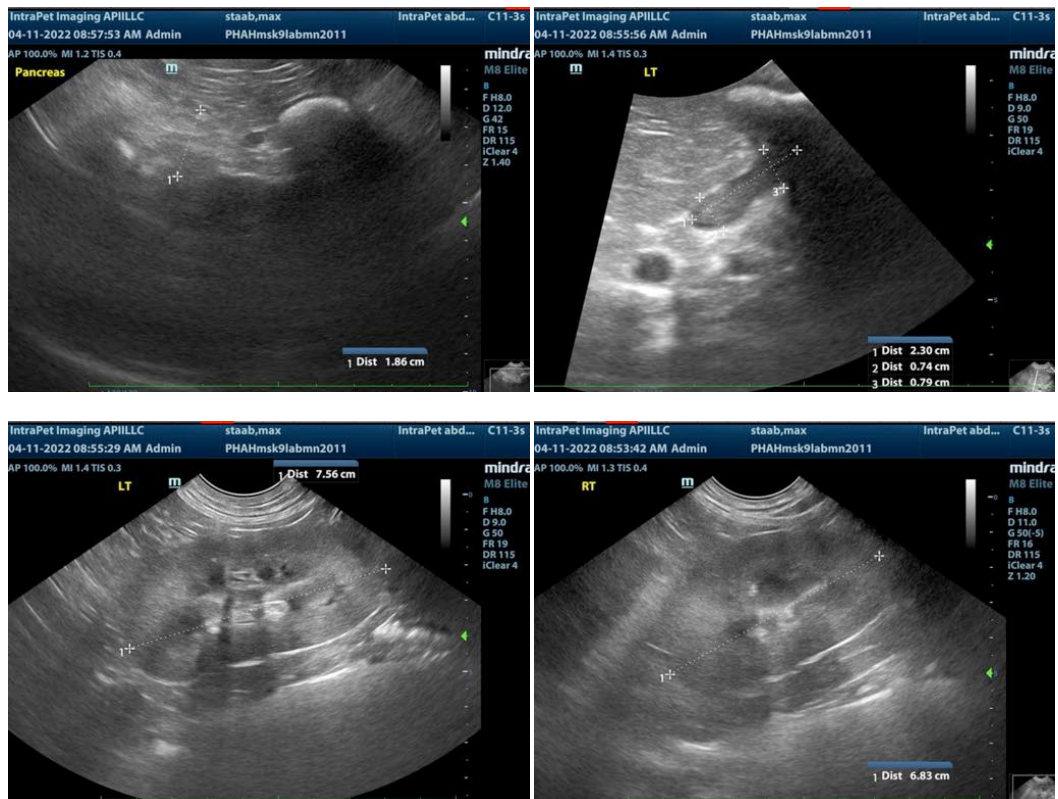
The **pancreas** revealed hyperechoic, coarse remodeling in the right base. There is no evidence of active inflammation.

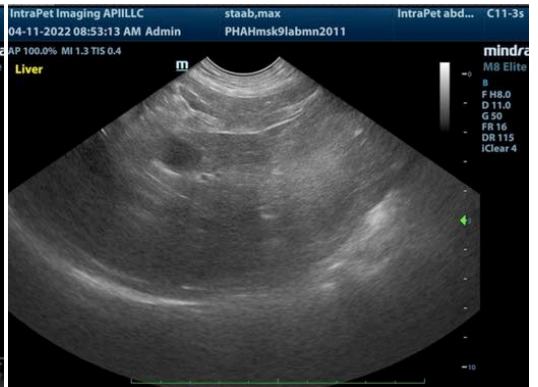
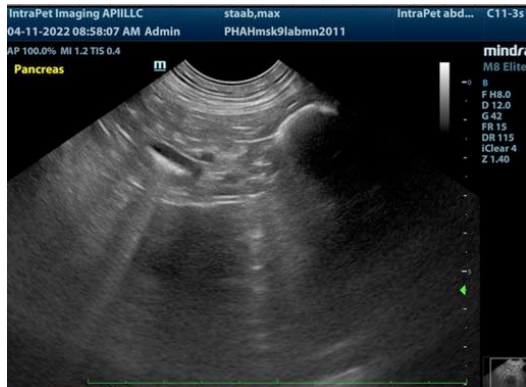
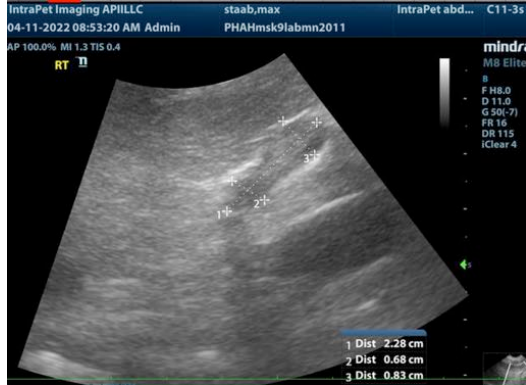
ULTRASONOGRAPHIC FINDINGS

Minor pancreatic remodeling.
Age related kidneys and hepatic changes.
Mild splenomegaly.
Otherwise, unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If the patient was n.p.o. at the time of the sonogram then soft foreign matter, grass or similar could be an issue. FNA of the spleen is indicated to ensure this is benign reactive spleen versus emerging round cell neoplasia. Otherwise, unremarkable abdomen.







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