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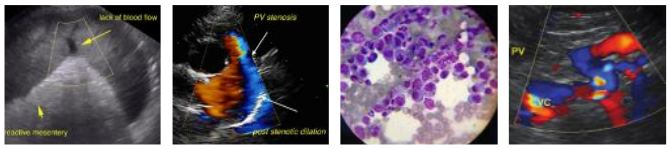
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Suzi Germani

SPECIES

Canine

BREED

Schnauzer

SEX

Spayed Female

AGE

14 Years

WEIGHT

17 Pounds

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Adrienne Ligenza

HOSPITAL NAME

Rush VUC

REFERRING VET

Dr. Lori Milot

INVOICE

14898

DATE

4/28/22

PRESENTING CLINICAL SIGNS

History: not eating

Abnormal PE/Chem/CBC/UA Results: anemic, elevated liver enzymes

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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 2.0 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 mild 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. Slight pinpoint mineralizations noted. Pericapsular fluid accumulation was noted around the kidneys, entering into the retroperitoneal space. The right kidney measured 4.1 cm. The left kidney measured 4.74 cm.

Adrenal Glands

The **left adrenal gland** was 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 0.45 cm.

The **right adrenal gland** was not visualized, however, tissue thickening in the region of the right adrenal may represent a primary mass metastatic to the liver.

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** revealed a complex mixed hypoechoic cystic and necrotic mass, deriving from the caudate process. Diffuse nodular changes were noted throughout the liver with deviation of the gallbladder. Right cranial liver nodules coalescing into separate mass. Left cranial liver nodules were also noted with disruption of architecture.

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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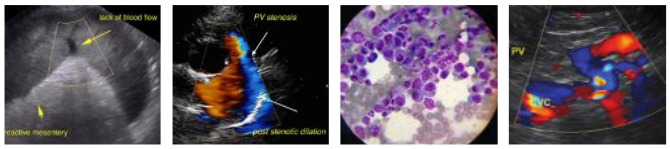

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Pancreas

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.

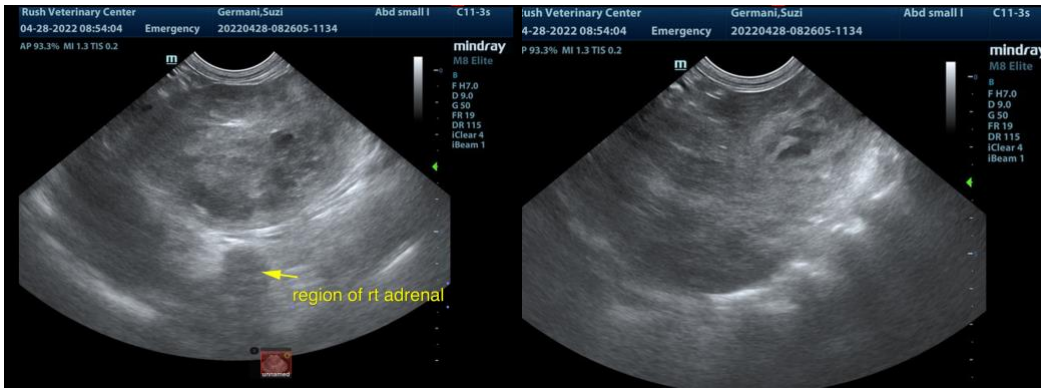
ULTRASONOGRAPHIC FINDINGS

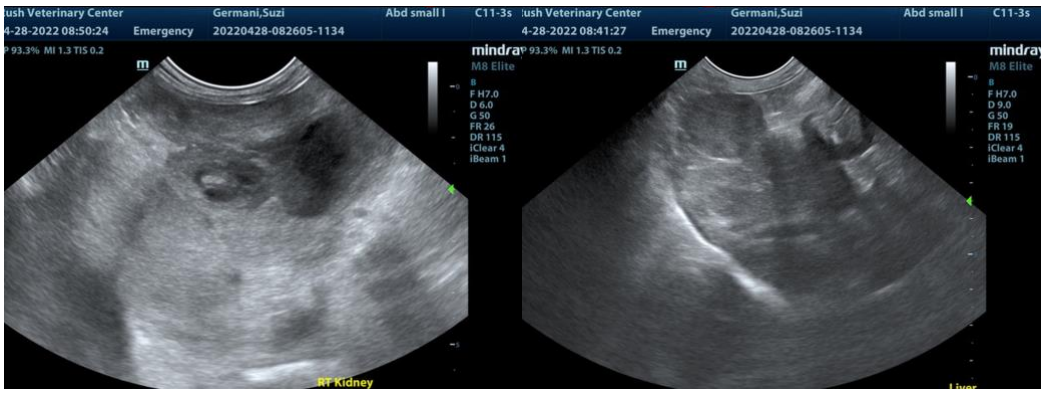
- Multiple liver masses, likely carcinoma
- Concurrent acute on chronic nephritis
- Tissue thickening in the region of the right adrenal gland

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Two separate issues may be occurring in this patient. The hepatic pathology is nonresectable. FNA could be considered for further definition. However, prognosis is poor.

The right adrenal gland was not visualized, however, tissue thickening in the region of the right adrenal may represent a primary mass metastatic to the liver, FNA would reveal carcinoma or pheochromocytoma in that case.





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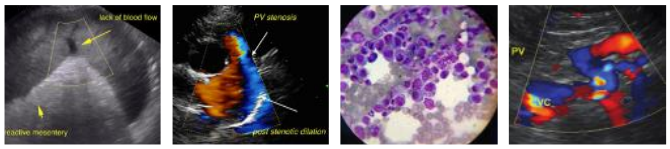

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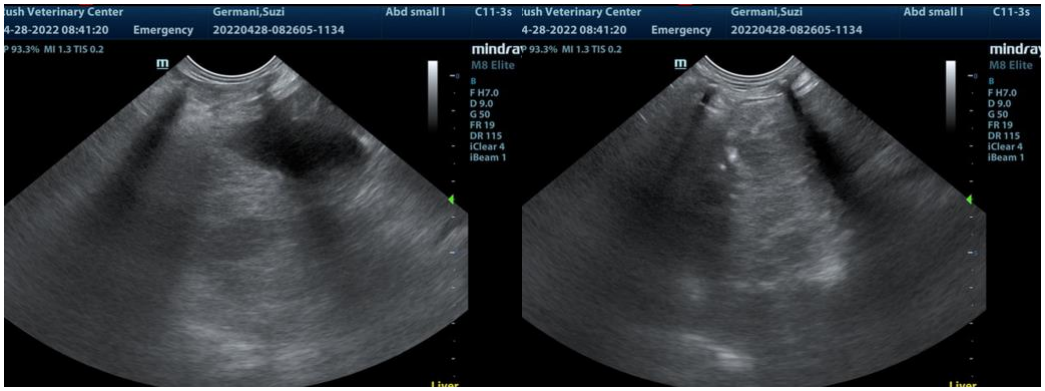

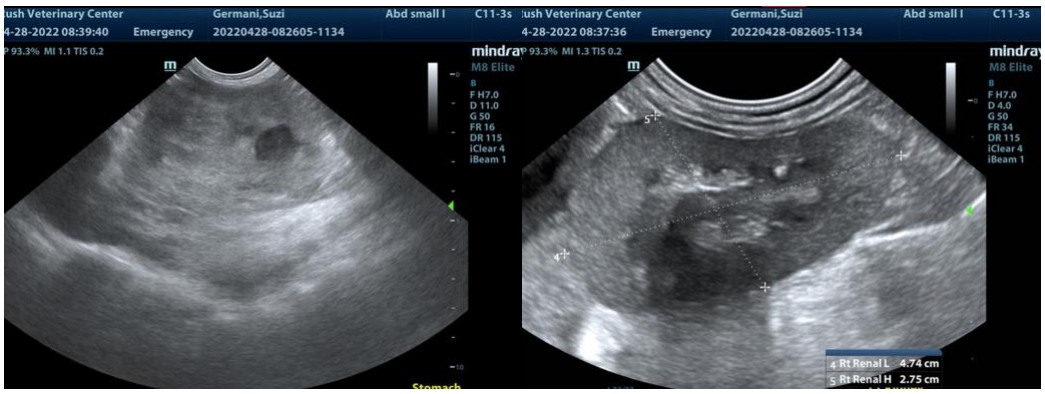

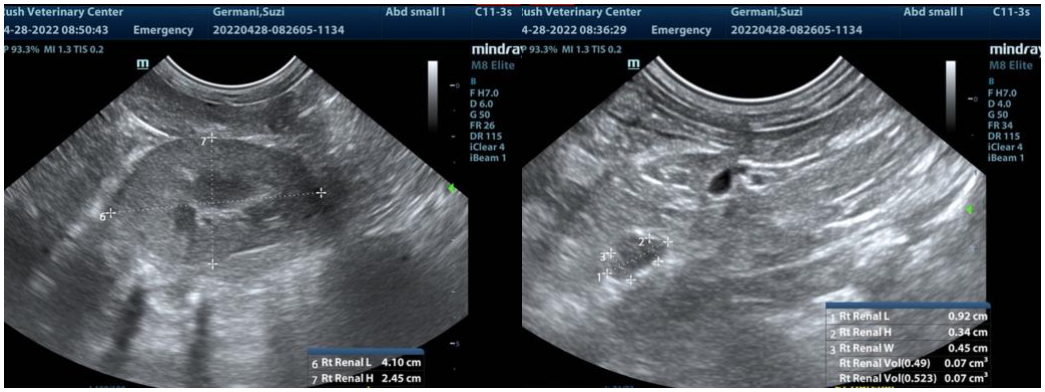

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@SonoPath.com