

**DATE**

4/5/22

**PRESENTING CLINICAL SIGNS**

Not eating well, weight loss, abdomen seems painful when picked up.

**PATIENT**

Noel Prince

Current Medications: None.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Telazol/Torb IV.

Stat Report: Not requested.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****BREED**

Puggle

**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.

**SEX**

Spayed Female

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 right kidney measured 4.54 cm. The left kidney measured 4.91 cm.

**AGE**

10/9/11

**Adrenal Glands****WEIGHT**

20 Pounds

The **right 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 right adrenal gland measured 1.5 cm x 0.27 cm at the caudal pole and 0.30 cm at the cranial pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

The **left adrenal gland** was enlarged, irregular and heterogeneous, measuring 2.82 cm x 1.01 cm at the caudal pole and 1.36 cm at the cranial pole.

**IMAGING PERFORMED BY**

Stephanie Pearce  
RDMS, RVT

**Spleen**

The **spleen** presented relatively normal size and contour with multifocal hyperechoic nodular changes, most consistent with fatty deposits or lipogranulomas. These are not typically pathological. No suspicion of significant. Capsular and parenchymal integrity was normal otherwise. Slight enlargement of the spleen, likely a normal variant.

**HOSPITAL NAME**

Honeygo AH

**Liver**

The **liver** revealed coarse architecture and increased portal markings. Lobar biliary mineralization noted. Minor gallbladder debris and striations present.

**REFERRING VET**

Dr. Wright

**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.

**INVOICE**

36737

**Pancreas**

Diffuse hyperechoic changes were present in the area of the **pancreas**. The pancreatic remodeling was evident with multifocal to diffuse hyperechoic changes. These changes are consistent with fibrosis, amyloid, saponification of fat and may contain areas of low-grade chronic active inflammation especially if pain on imaging (+ Murphy sign) was present +/- focal subxyphoid palpation reveals pain response. No overt masses

were noted. The right pancreatic limb was hypochoic and mildly irregular. A 0.94 cm nodule was noted at the right base.

### Thorax

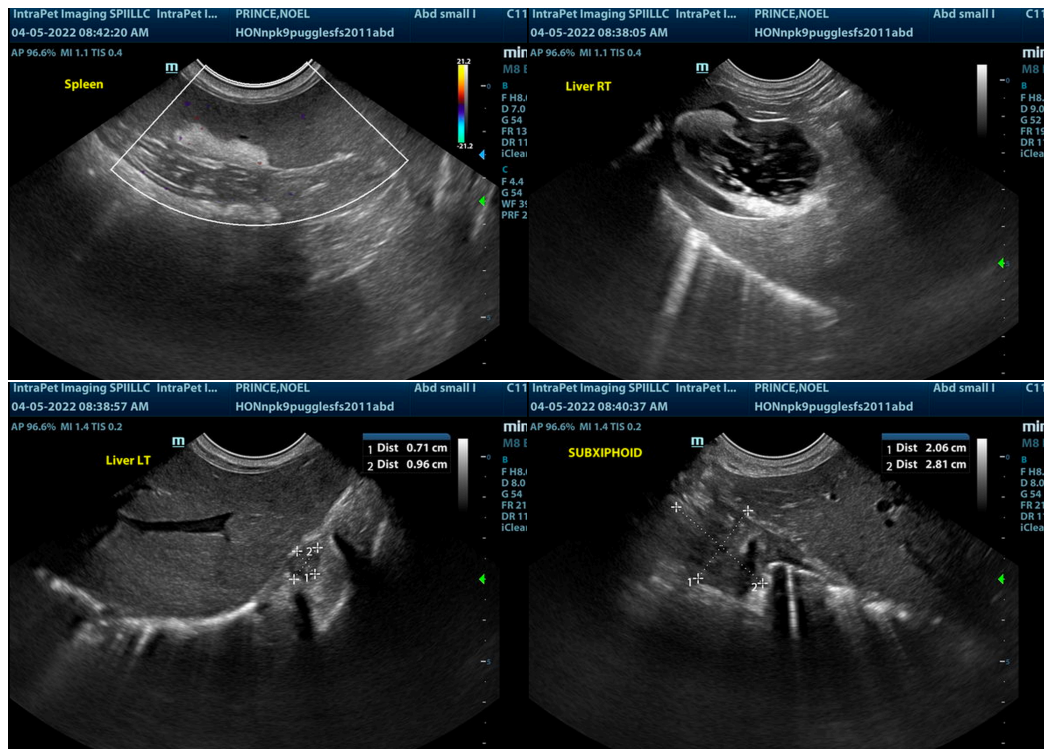
Transdiaphragmatic view revealed multifocal lung consolidations up to 2.81 cm in the caudal thorax. A separate nodule measured 1.0 cm. Comet tail lung pattern noted as well. Pleural effusion also present. Rapid view of the heart revealed no volume overload.

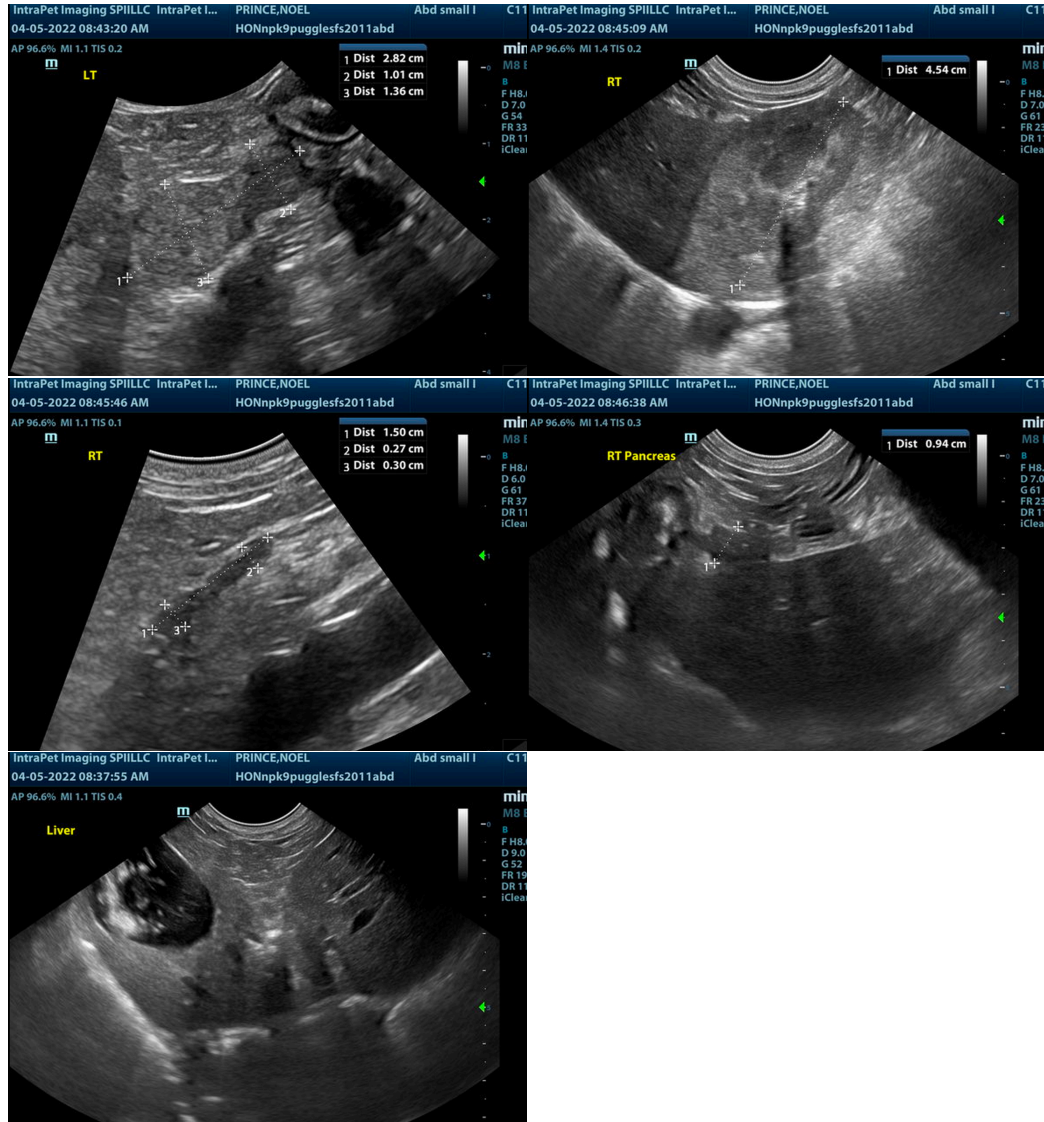
### ULTRASONOGRAPHIC FINDINGS

- Enlarged, irregular left adrenal – pheochromocytoma, adenoma, adenocarcinoma, hyperplasia all possible. Appears resectable.
- Geriatric abdomen otherwise with pancreatic remodeling and lipogranulomatous changes in the spleen
- Minor gallbladder debris
- Caudal thoracic lung consolidations

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Thoracic workup warranted in this patient as well as blood pressure measurements to assess if hypertension is related to the left adrenal gland. If accessible, ultrasound guided FNA of the lung consolidations recommended. Suspect thoracic neoplasia, possibly related to the left adrenal gland. The left adrenal could also be a normal variant (i.e., non-functional hyperplasia).





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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