

**DATE**

5/13/22

**PRESENTING CLINICAL SIGNS**

History: Presented with lethargy, not walking well and some breathing difficulty. Abdominal mass found 5/12/22 on radiographs but, not palpated.

**PATIENT**

Muffin Opdyke

Current Medications: Meloxicam 7.5mg SID.

Lab Results: See attached.

Radiographs: Abdominal mass.

**SPECIES**

Canine

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

**BREED**

Newfoundland

Imaging Performed By: Stephanie Pearce RDCS, RVT.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN****SEX**

Spayed Female

**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.

**AGE**

10/28/11

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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 7.32 cm. The left kidney measured 9.19 cm.

**WEIGHT**

180 Pounds

**INTERPRETED BY**Eric Lindquist, DMV  
DABVP, Cert. IVUSS**Adrenal Glands**

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 3.12 cm x 0.41 cm at the caudal pole and 0.57 cm at the cranial pole.

**HOSPITAL NAME**Pleasantville AH of  
Fallston

The **left adrenal gland** was enlarged, irregular and nodular, measuring 5.27 cm x 1.9 cm at maximum width.

**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. Micronodular changes were noted in the spleen, nondisruptive. A separate 1.0 cm hypoechoic nodule was noted in the mid caudal splenic body, nondisruptive. Splenic fold noted.

**REFERRING VET**

Dr. Gounaris

**INVOICE**

15188

**Liver**

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic

lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

### ***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.

### ***Other***

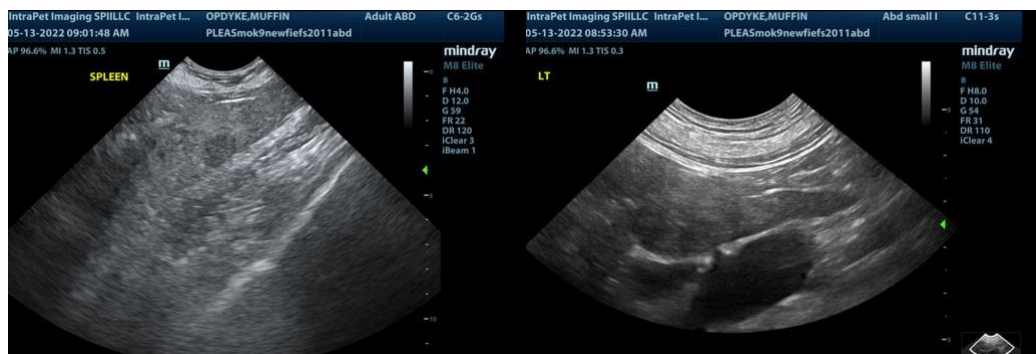
A rapid view of the **heart** revealed no evident pathology in the right auricle or pericardium.

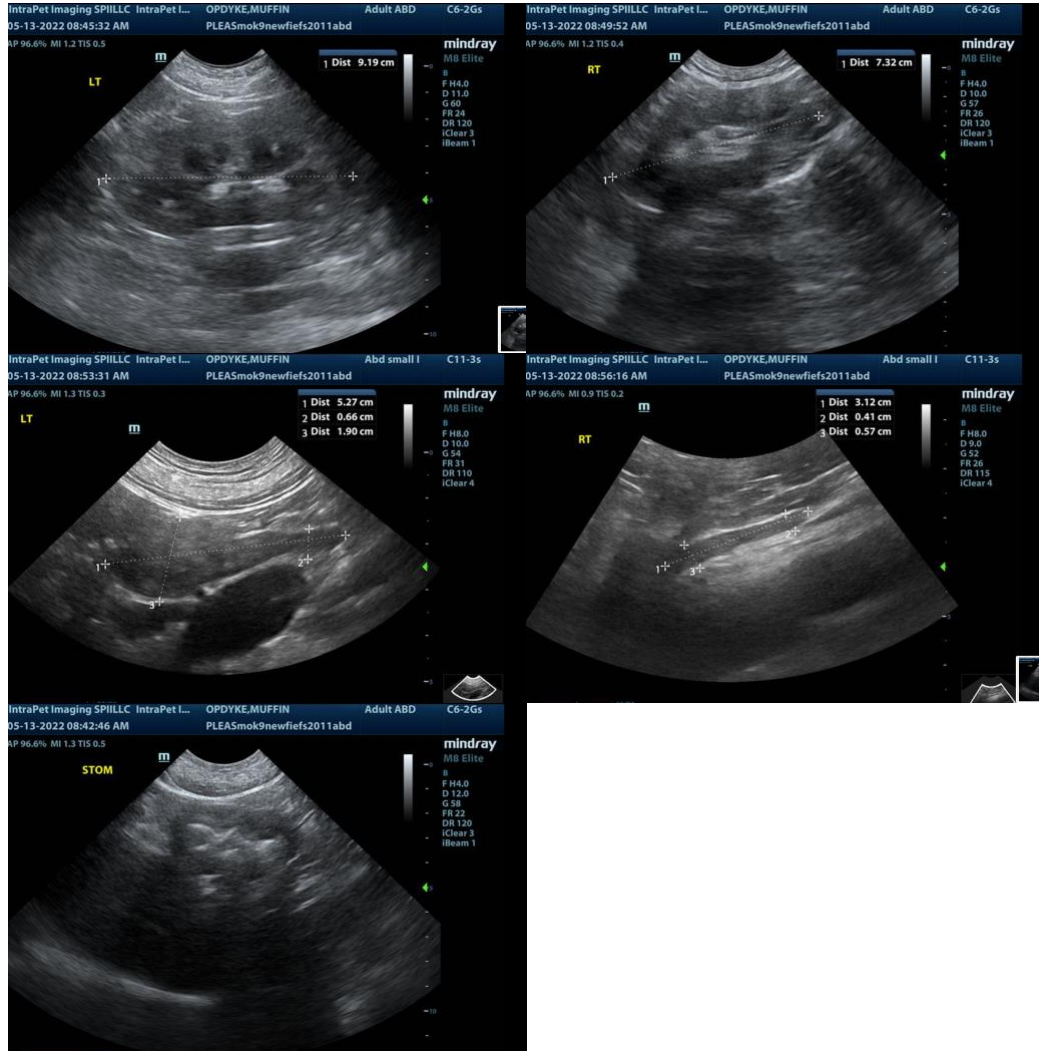
## **ULTRASONOGRAPHIC FINDINGS**

- Left adrenal mass, hyperplasia, pheochromocytoma or adenocarcinoma
- Splenic nodules
- Moderate degenerative changes in the kidneys

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mass effect in the radiograph is likely owing to folded spleen, as no overt masses were noted in this patient. The kidneys presented moderate degenerative changes, emerging renal failure is a potential, depending upon urinalysis results. Serial blood pressures warranted. If hypertension is present, urine catecholamine indicated to assess for pheochromocytoma of the left adrenal gland. The left adrenal gland does appear resectable, however, there is a possibility of phrenic vein invasion. No overt caval invasion noted. IV fluid support to correct the azotemia indicated. FNA of the splenic nodules would be ideal, however, they subjectively appear benign.





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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