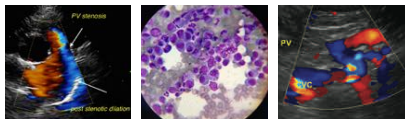
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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DATE
5/17/22

PATIENT
Lyssa Martin

SPECIES
Canine

BREED
Basset Hound

SEX
Spayed Female

AGE
5/17/18

WEIGHT
53.4 lbs

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

HOSPITAL NAME
Animal Emergency Hospital

REFERRING VET
Dr. Willer

INVOICE
30474

PRESENTING CLINICAL SIGNS

Went into labor early- had C-section and spay about 10-11 day ago (last Thursday-not this past Thursday) had been fine; on Sunday- massive bleeding from the vaginal region and was out of it- went to a friend's clinic- PCV- 23/5- did not appreciate FF in the abdomen- but did not have the capability to check. IVC placed; bolus fluids, B12- both catheters went SQ; no 2nd surgery performed; did go blind and deaf after this event- has had vision and hearing return- but still seems out of it owner has been syringe feeding, owner felt she looked more pale today had been on clavamox and baytril
Current Medications: Maropitant, Protonix, Ampi/Sulbactam.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not 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 uterus was edematous, yet empty and measured 1.0 cm in width. The left ovarian region revealed an ill-defined, 2.5 cm mineralizing mass. The tissue around the left ovary was heterogenous, hypoechoic and irregular.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 7.38 cm. The right kidney measured 7.5 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 measured 3.01 x 0.65 cm at the caudal pole and 0.58 cm at the cranial pole. The right adrenal gland measured 3.19 x 0.54 cm at the caudal pole and 0.69 cm at the cranial pole.

Spleen

The **spleen** revealed an expansive, hypoechoic 3.0 cm mass at the mid body with multiple target lesions that measured up to 1.16 cm. The larger mass measured 2.5 cm. Swollen irregular contour was noted. Other nodular changes were noted throughout the spleen.

Liver

The **liver** revealed slight coarse architecture with increased portal markings. There was no evidence of significant disease. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy 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 **pancreas** revealed slight, heterogenous changes at the left cranial base. The remainder of the pancreas was unremarkable.

Heart

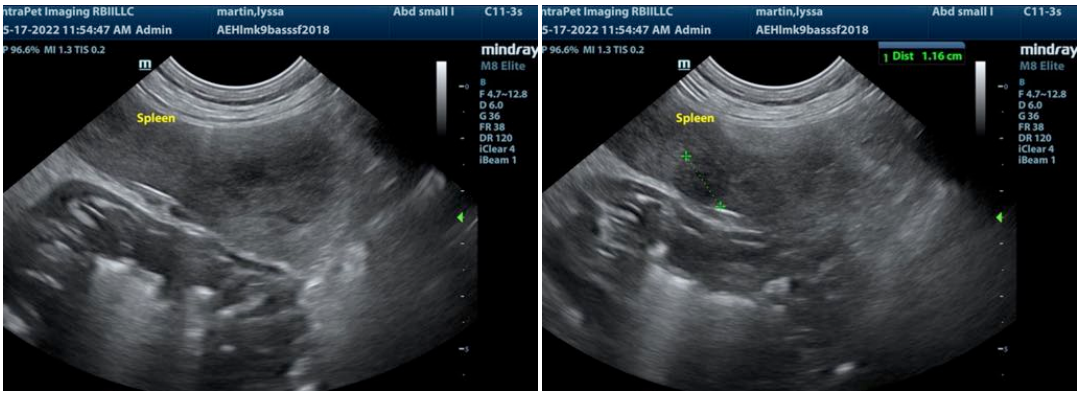
Rapid view of the heart revealed no evidence of pathology.

ULTRASONOGRAPHIC FINDINGS

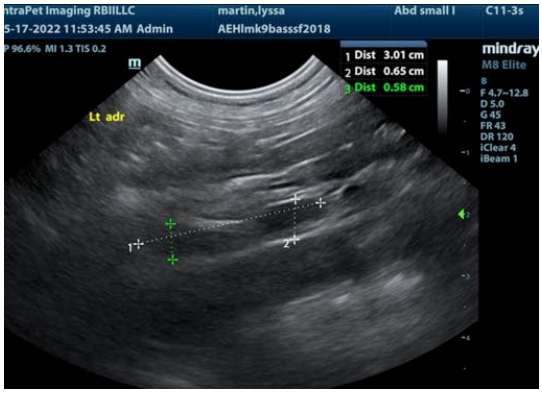
Splenic mass and nodules. Differentials include metastatic disease, hemangiosarcoma and round cell neoplasia. Abscessation or pronounced nodular hyperplasia is less likely.
Mass in the region of the left ovary.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

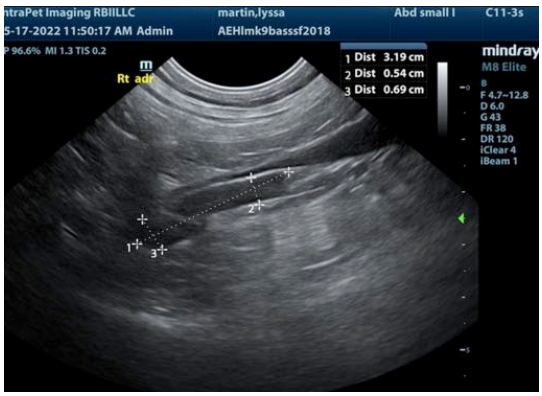
FNA of the mass in the region of the around the left ovary is indicated. Screening FNA of the splenic lesions is warranted for further definition. Surgical approach could also be taken with expectations of mass removal in the region of the left ovarian fossa with ovariohysterectomy and splenectomy. However, given the mixed echogenic tissue pattern in the left ovarian fossa does not allow for clean resection. The prognosis is guarded. The splenic pathology may be completely separate than the ovarian pathology or possibly metastatic. Chest radiographs are warranted to assess for metastatic disease. Ovarian carcinoma is a strong potential in this case.

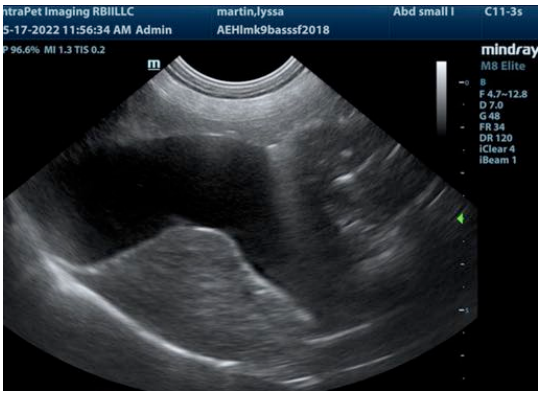


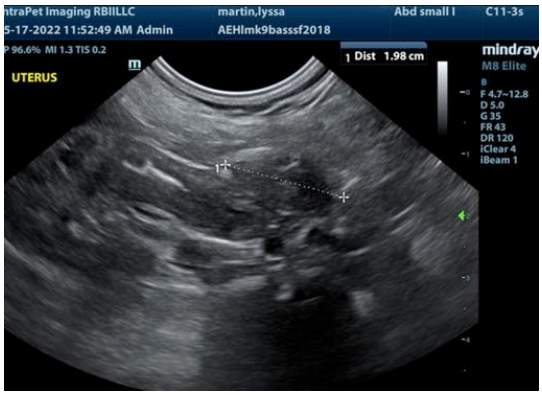

martin,lyssa
Abd small I
C11-3s
AEHlmk9basssf2018
mindray
M8 Elite
1 Dist 2.49 cm
2 Dist 2.24 cm
Spleen

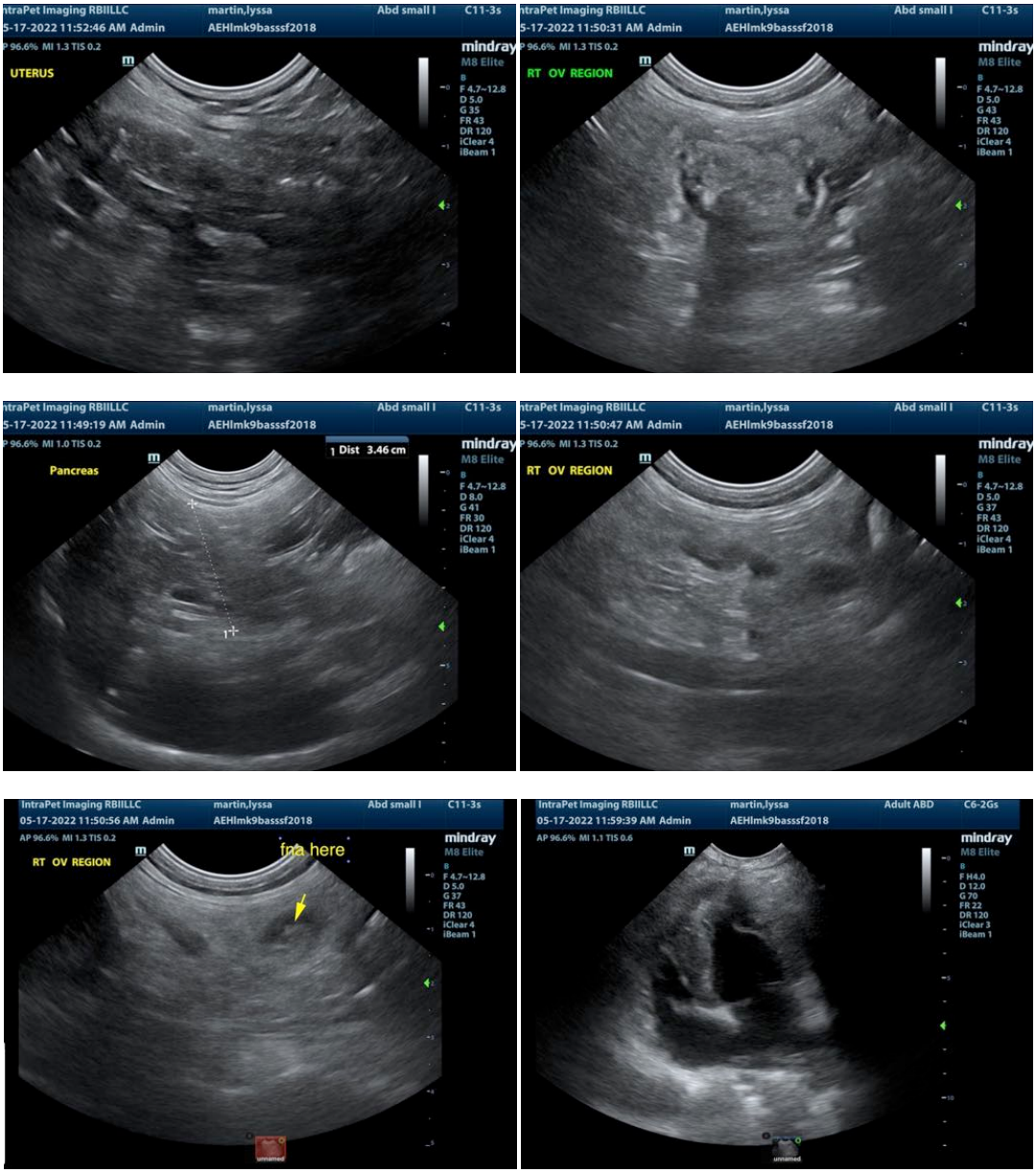

martin,lyssa
Abd small I
C11-3s
AEHlmk9basssf2018
mindray
M8 Elite
1 Dist 3.01 cm
2 Dist 0.65 cm
3 Dist 0.58 cm
Lt adr


martin,lyssa
Abd small I
C11-3s
AEHlmk9basssf2018
mindray
M8 Elite
1 Dist 7.38 cm
Lt Kidney


martin,lyssa
Abd small I
C11-3s
AEHlmk9basssf2018
mindray
M8 Elite
1 Dist 3.19 cm
2 Dist 0.54 cm
3 Dist 0.69 cm
Rt adr


martin,lyssa
Abd small I
C11-3s
AEHlmk9basssf2018
mindray
M8 Elite


martin,lyssa
Abd small I
C11-3s
AEHlmk9basssf2018
mindray
M8 Elite
1 Dist 1.98 cm
UTERUS



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
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