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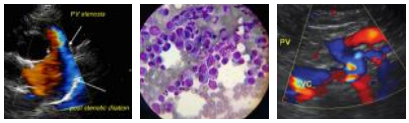

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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DATE

5/6/22

PATIENT

Kane Darney

SPECIES

Canine

BREED

Rottweiler

SEX

Neutered Male

AGE

4/4/15

WEIGHT

112.1 Pounds

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Rachel Brilhart RDMS

HOSPITAL NAME

Animal Emergency Hospital

REFERRING VET

Dr. Nacke-Horney

INVOICE

37488

PRESENTING CLINICAL SIGNS

BG has remained high in reading at home - rdvm increased insulin to 38 units yesterday: got last night and this AM Started panting so owner gave another unit of insulin Owner noted that patient still has a UTI based on the appearance of his urine - rdvm switched him to a different abx last week Presented to rdvm: - BW: RBC 5, HCT 32.3, WBC 17.77, Neu 13.67, Mono 1.88, Glu 490, Phos 7, Glob 5.6, ALP 518, Chol 388 - UA: USG 1.050, Pro 100 mg/dl, Glu 1000 mg/dl, Bld 250 ery/ul, suspected presence of cocci - rads: thorax NSF, stomach appears enlarged, hepatomegaly with rounded margins, gassy changes throughout GI tract - Swollen popliteal LN – FNA came back with fluid, tested again and rdvm only mentioned that it appeared cluster - was looking at the sample while speaking - recommended fluids, U/S, work on stabilizing diabetes - noted to be on 38 units of NPH Current meds: - Cefpoderm (cefopodoxime): 200 mg - 2 tabs q24 - last given at 8p 5/4

Current Medications: Cefpodoxime, Protonix, Humulin N.
Lab Results: See attached.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

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 **kidneys** were normal in size and contour; however, a minor hyperechoic ring was noted at the corticomedullary junction. This is consistent with diabetic nephropathy. This is likely from glucosuria. However, assessment for proteinuria is also warranted. This is an idiopathic finding, but an expected finding in diabetic patients. The left kidney measured 9.4 cm. The right kidney measured 9.0 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 2.6 cm x 0.76 cm at the caudal pole and 0.73 cm at the cranial pole. Adjacent to the left adrenal gland, and undifferentiated 3.5 cm x 2.9 cm mass was noted.

Spleen

The **spleen** presented subtle micronodular changes with a large 2.0 cm hypoechoic nodule in the mid body.

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.

Free Abdomen

The pelvis revealed an undifferentiated, mixed hypoechoic, mineralizing mass, measuring 6.7 cm x 4.8 cm. Multiple other pelvic masses noted measuring up to 6.9 cm. Disorganized areas and mineralization noted. Regional inflammation. These are likely lymph node in origin.

ULTRASONOGRAPHIC FINDINGS

- Multifocal lymph node masses in the caudal abdomen/pelvis
- Micronodular spleen – strongly suggestive for multicentric round cell or metastatic neoplasia
- Diabetic nephropathy

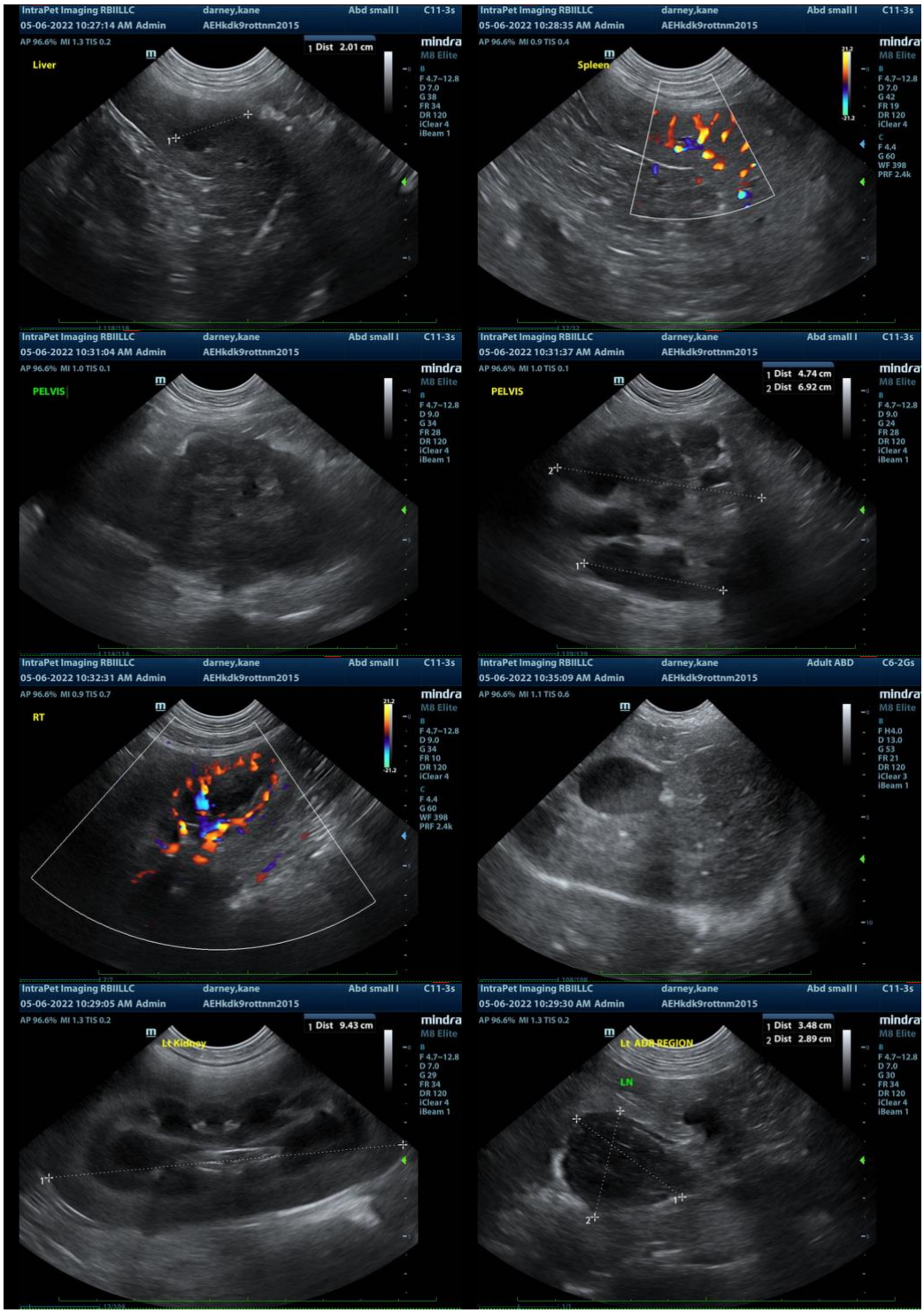
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Anal gland palpation recommended to assess for primary disease that may be metastatic to the nodes. FNA of the lymph nodes and spleen indicated with immediate chemotherapeutic intervention.

Potential Causes of Diabetic Dysregulation

This is a suggestive checkoff list when faced with an unregulated diabetic patient:

UTI
Dietary indiscretion/intolerance
Pancreatitis
Hyperthyroidism/hypothyroidism
Exogenous steroids (including topical eye meds)
Cushing's
Acromegaly
Owner compliance
Insulin quality issues
Antibodies to insulin
Underlying Neoplasia
Diffuse liver disease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darney,kane
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C11-3s
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Liver
1 Dist 2.01 cm
mindra
M8 Elite
IntraPet Imaging RBIILLC
darney,kane
Abd small I
C11-3s
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AP 96.6% MI 0.9 TIS 0.4
Spleen
mindra
M8 Elite
IntraPet Imaging RBIILLC
darney,kane
Abd small I
C11-3s
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AP 96.6% MI 1.0 TIS 0.1
PELVIS
mindra
M8 Elite
IntraPet Imaging RBIILLC
darney,kane
Abd small I
C11-3s
05-06-2022 10:31:37 AM Admin
AEHkdk9rottnm2015
AP 96.6% MI 1.0 TIS 0.1
PELVIS
1 Dist 4.74 cm
2 Dist 6.92 cm
mindra
M8 Elite
IntraPet Imaging RBIILLC
darney,kane
Abd small I
C11-3s
05-06-2022 10:32:31 AM Admin
AEHkdk9rottnm2015
AP 96.6% MI 0.9 TIS 0.7
RT
mindra
M8 Elite
IntraPet Imaging RBIILLC
darney,kane
Adult ABD
C6-2Gs
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AEHkdk9rottnm2015
AP 96.6% MI 1.1 TIS 0.6
mindra
M8 Elite
IntraPet Imaging RBIILLC
darney,kane
Abd small I
C11-3s
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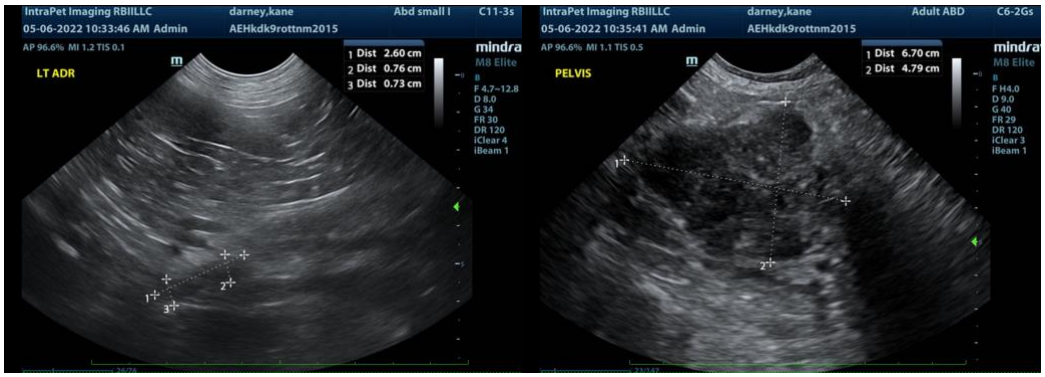
AP 96.6% MI 1.3 TIS 0.2
Lt Kidney
1 Dist 9.43 cm
mindra
M8 Elite
IntraPet Imaging RBIILLC
darney,kane
Abd small I
C11-3s
05-06-2022 10:29:30 AM Admin
AEHkdk9rottnm2015
AP 96.6% MI 1.3 TIS 0.2
Lt ADR REGION
LN
1 Dist 3.48 cm
2 Dist 2.89 cm
mindra
M8 Elite



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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