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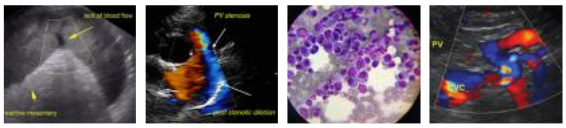


ANIMAL SOUNDS NW
MOBILE VETERINARY ULTRASOUND
IMAGING PERFORMED BY
AnimalSoundsNW.com 541-357-9423

PATIENT

Piper Stone

SPECIES

Canine

BREED

Schnauzer Mix

SEX

Spayed Female

AGE

13 Years

WEIGHT

28 Pounds

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUSS

HOSPITAL NAME

VCA Delta Oaks

REFERRING VET

Dr. Lahm

INVOICE NUMBER

22430

DATE

5/9/23

PRESENTING CLINICAL SIGNS

History of a large hepatocellular Carcinoma . It was removed with al Liver lobectomy . 2020 O is concerned that it may be regrowing . HX of Cystitis last year.

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** 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. Slight pyelectasia was noted in the left kidney. Mild enhanced pericapsular inflammatory pattern was noted. Potential underlying nephritis was present. Urinary work up is recommended. The right kidney measured 5.41 cm. Slight pinpoint mineralizations were noted, nonobstructive. The left kidney measured 6.0 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 2.44 cm x 0.75 cm at the caudal pole and 0.47 at the cranial pole. The right adrenal gland measured 2.34 cm x 1.54 cm at the cranial pole and 0.69 cm at the caudal pole.

Spleen

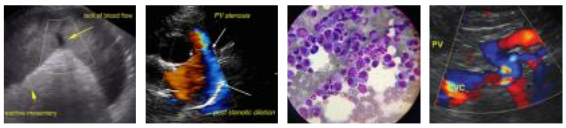
The **spleen** presented a mixed hypoechoic complex mass with multifocal distorted target lesions. Subcapsular hematomas are suspected, as well as a neoplastic process. Splenitis is less likely.

Liver

The **liver** was swollen and mildly irregular with coarse architecture and hyperechoic lipid plaques or lipogranulomatous type nodular changes, likely benign. Slight increased portal markings were noted. No overt masses were present. The gallbladder was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele, yet sludge appears to be mildly excessive. No adjunctive inflammation was noted.

Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. Small and large intestine demonstrated normal luminal chyme and stool consistency



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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. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

Free Abdomen

Slight **free fluid** was noted, likely deriving from the splenic pathology.

Other

A rapid view of the **heart** revealed no evident pathology. The right auricle was free of metastatic disease. No pericardial effusion was noted. Contractility was adequate. No contraindication to anesthetic procedure.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Multifocal splenic nodules and an overt mass with subcapsular hematomas (suspected).
- Free fluid, likely deriving from the splenic pathology.
- Hyperechoic lipid plaques or lipogranulomatous type nodular changes in the liver.
- Minor excessive gallbladder sludge
- Age-related renal changes with mineralization, left renal pyelectasia and mild enhanced pericapsular inflammatory pattern.

Secondary Findings

- Age-related pancreatic changes
- Partially full stomach

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt evidence of metastatic disease. Chest radiographs are warranted for metastatic screening, followed by splenectomy, inspection, biopsy of the liver and manual expression of the gallbladder. Full urinary work up is indicated.

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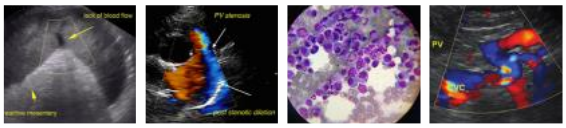

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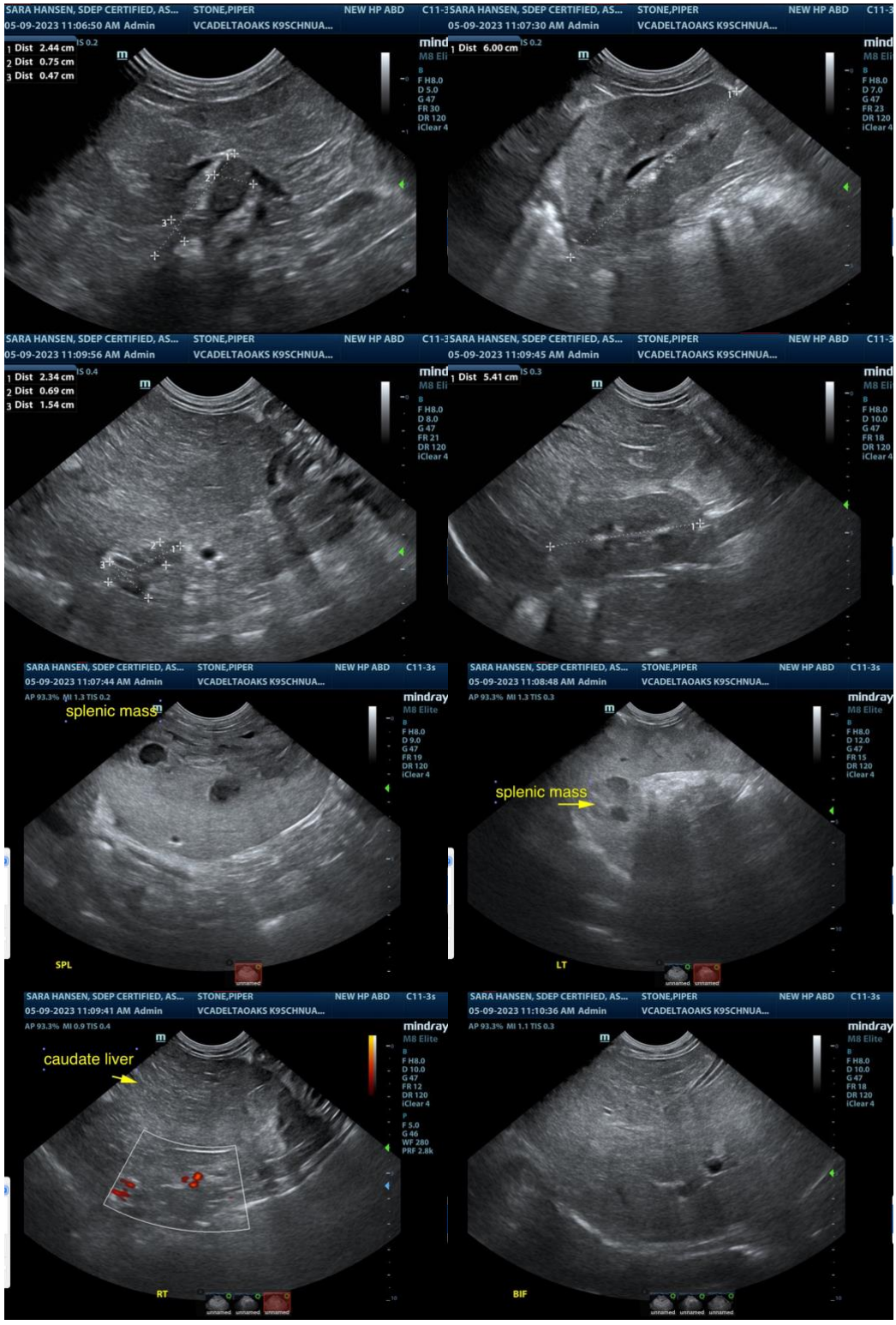

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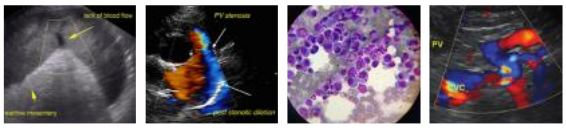

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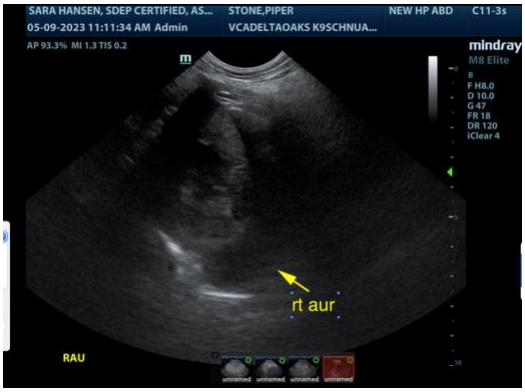

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
Eric.Lindquist@SonoPath.com