

**DATE**

06/14/2022

PRESENTING CLINICAL SIGNS

Recent drop in appetite and lethargy.

PATIENT

Buttercup Smith

Current Medications: Started 10mg Prednisone SID on 5/25/22.

Lab Results: 5/17/22 unremarkable except low albumin 1.6.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED**

Pug

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

FS

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.

AGE

07/07/2008

WEIGHT

14.3 lb

The left kidney measured 4.08 cm in length. The right kidney measured 4.5 cm in length.

Adrenal Glands

The right adrenal gland was slightly heterogeneous with a mildly enlarged cranial pole consistent with adenoma. The left adrenal presented with normal size and contour. The left adrenal gland measured 2.27 cm in length by 0.72 cm caudal pole width by 0.54 cm cranial pole width. The right adrenal gland measured 2.2 cm in length by 0.65 cm caudal pole width by 1.06 cm cranial pole width.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**Essex Middle River
Veterinary Center**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. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

REFERRING VET

Dr. Zulty

Liver**INVOICE**

10803ag

The liver images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some minor age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

Gastrointestinal

Examination of the gastrointestinal tract revealed a small intestinal mass measuring 3.27 cm with a 0.72 cm hypoechoic wall with loss of structural detail. A regional lymph node was enlarged measuring 1.7 cm x 1.01 cm. Separate intestinal mass noted cranial to the urinary bladder measuring approximately 2.5 cm in length with 0.7 cm wall thickness. Both masses revealed regional hyperechoic adhered mesentery consistent with localized peritonitis.

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 lymph node presented abnormal length to width ratio with distorted, swollen, irregular contour. Parenchymal detail was indiscernible. This is most consistent with lymphoproliferative disease such as lymphoma/round cell neoplasia, metastatic disease, or an aggressive inflammatory process. FNA, cytology and culture are warranted.

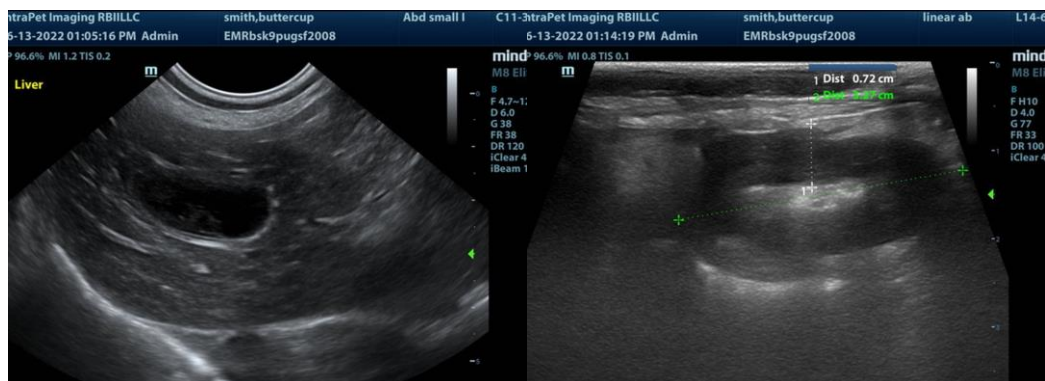
ULTRASONOGRAPHIC FINDINGS

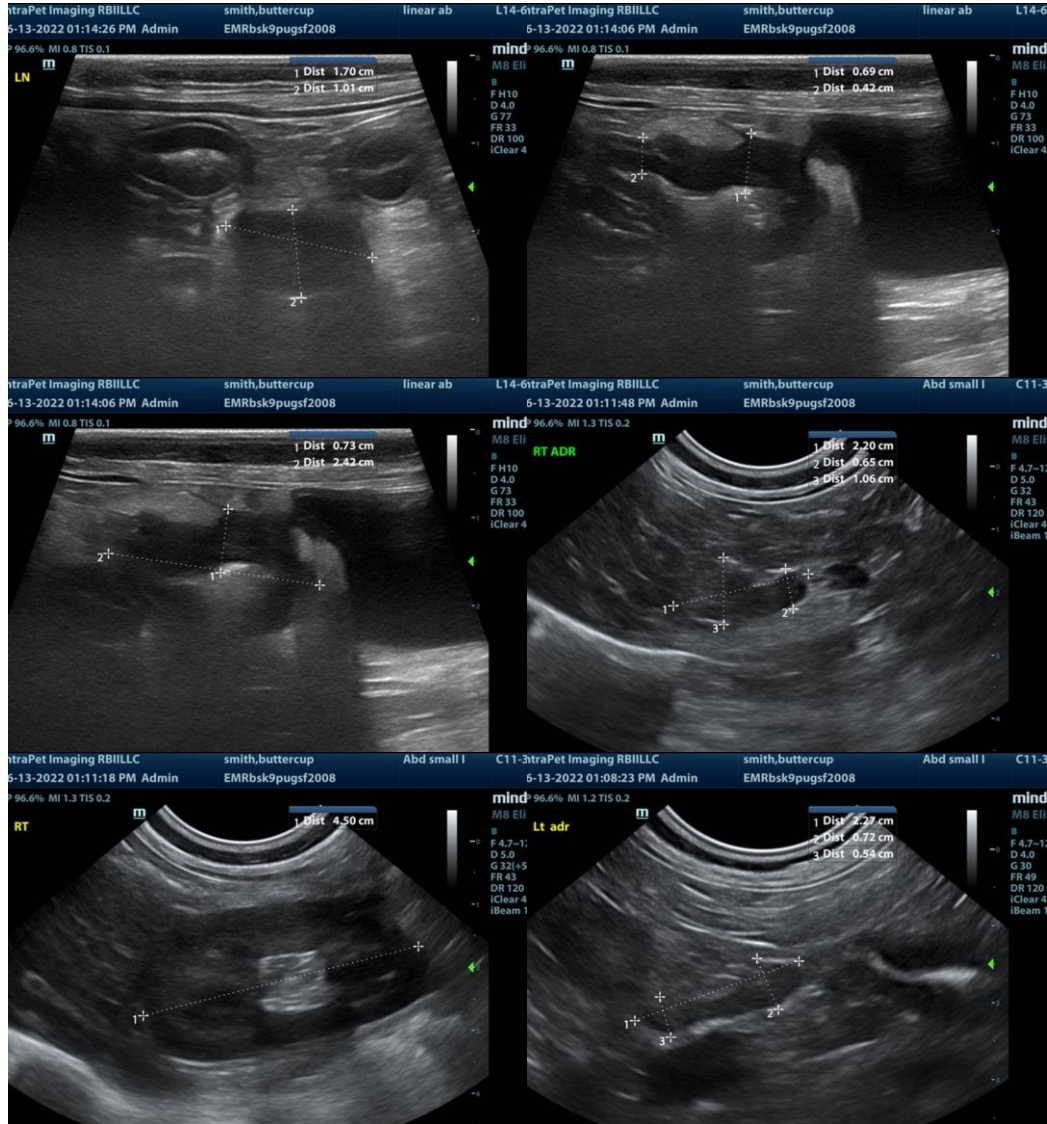
- Multifocal intestinal neoplasia with regional lymphadenopathy
- Right adrenal adenoma

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The intestinal presentation does not appear to be a surgical potential. An FNA of the masses and lymph node is recommended for further clarification. Intestinal lymphoma is likely. The prognosis for this patient is guarded.

Three view chest radiographs are warranted to assess for metastatic disease.





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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