

**DATE PRESENTING CLINICAL SIGNS**

6/27/23

PATIENT

Hershey Jones

Pet sitter brought in Pet sitter came to the house Sunday afternoon- seemed fine and was fine up til that night - on Monday am- vomited 2x - food , carrots- then was lethargic- did not really want to move around- having difficulty walking- would get up to urinate and vomit- but then lay back down: is not eating - but is drinking noticed on Monday- knuckling on the back right leg still knuckling history of reaction to flea/tick medication in 2020- seizures- none since stopping the medications owner trimmed the nails too short- applied quick stop on Saturday

SPECIES

Canine

Current Medications: None listed.

Lab Results: See attached.

BREED

Labrador Retriever

Radiographs: lateral chest (pet was fighting for the v/d)- small nodules noted through out the lung fields; heart looks enlarged; large amount of loss of detail in the mid abdomen- possible mass effect just caudal to the stomach

Date of Previous IntraPet Ultrasound: No previous.

Sedation: IV: Ace.

SEX

Neutered Male

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

AGE

11/6/15

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.

WEIGHT

110 Pounds

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. Mineralization noted in both kidneys. The right kidney measured 6.64 cm. The left kidney measured 7.6 cm.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**Animal Emergency
Hospital**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 right adrenal gland measured 3.21 cm x 0.66 cm at the caudal pole and 0.86 cm at the cranial pole. The left adrenal gland measured 3.06 cm x 0.82 cm at the caudal pole and 0.85 cm at the cranial pole.

REFERRING VET

Dr. Willer

Spleen

The **spleen** was enlarged, irregular and nodular at the caudal pole, consistent with infiltrative pattern.

INVOICE

43470

Liver

The **liver** presented multifocal hyperechoic nodular changes, non-disruptive. The gallbladder was unremarkable.

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

Large amount of free fluid noted in the abdomen.

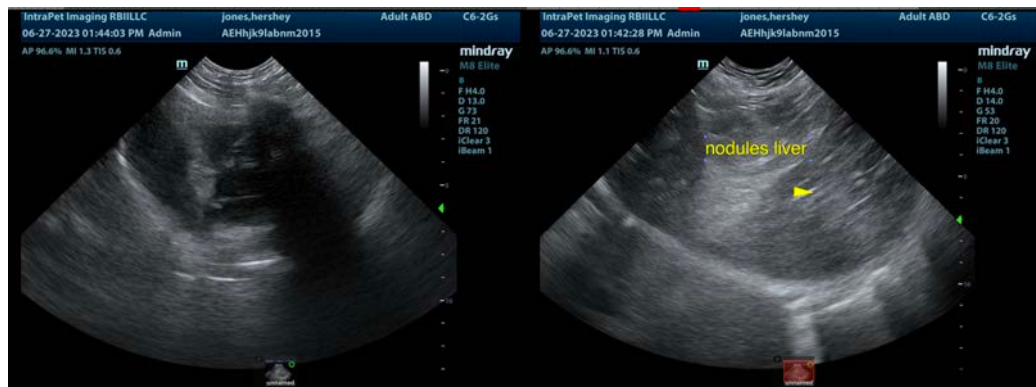
Rapid view of the heart revealed volume contraction. No pericardial or pleural effusion noted. No overt cardiac masses. Contractility was poor, suggestive for potential shock. Clinical assessment for shock indicated.

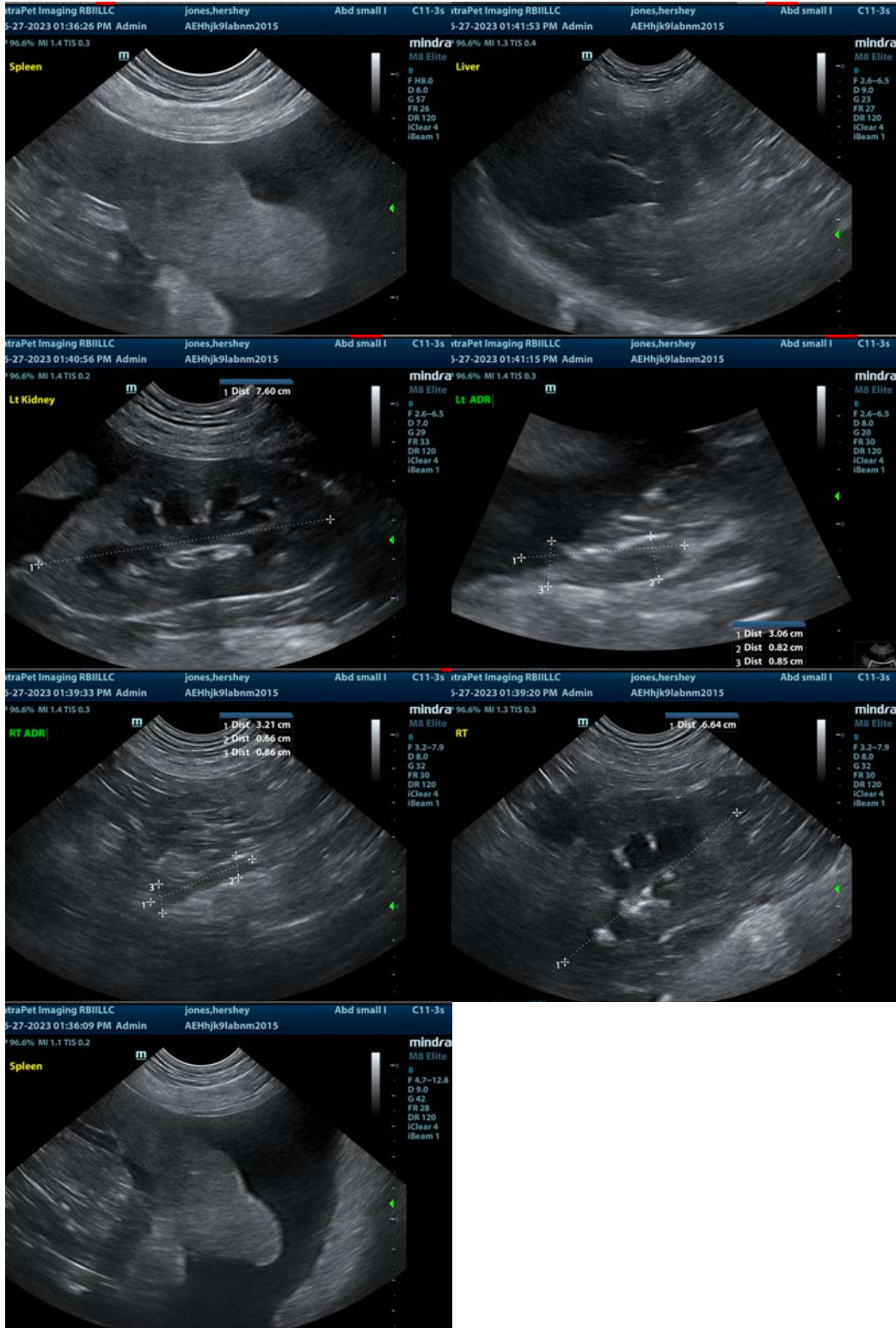
ULTRASONOGRAPHIC FINDINGS

- Irregular spleen with free fluid – strongly concerning for a neoplastic process, yet no cavitated lesions noted.
- Undefined heterogeneous hepatic changes, consistent with likely remodeling, mild potential for underlying neoplasia.
- Age related renal changes
- Volume contract, shocky heart without evidence of metastatic disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Plasma expansion recommended and treatment for potential underlying shock in this patient. Blood pressure measurements indicated. Chest radiographs indicated. Abdominocentesis and cytospin of the free fluid as well as 25-gauge FNA of the spleen indicated. CBC path review +/- bone marrow aspirate should be considered. Strong concern for a neoplastic process. If frank blood is present in the abdomen, then coagulation panel indicated +/- exploratory surgery, yet I do not see any cavitated splenic lesions that would suggest rupture, yet a bleeding neoplastic event could not be ruled out.





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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