

**DATE**

6/9/22

**PRESENTING CLINICAL SIGNS**

4 day history of acutely not eating and lowered energy - Temp 103.5, BARH on PE but discomfort with abd palpation. BCS 7/9

Current Medications: None yet.

**PATIENT**

Jack Sellner

Radiographs: suspect cranial abd mass, mass effect pushing intestines caudally, focal u/s of spleen shows mass with generalized abnormal splenic echotexture.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

**SPECIES**

Canine

Imaging Performed By: Stephanie Pearce RDCS, RVT.

**BREED**

Bernese Mountain Dog

**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.

**SEX**

Neutered male

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 7.5 cm. The right kidney measured 7.73 cm.

**AGE**

3/22/14

**WEIGHT**

120 lbs

**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 3.66 x 0.5 cm at the caudal pole and 0.48 cm at the cranial pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**Spleen**

The **spleen** revealed expansive, irregular parenchymal mass that measured 9.6 cm and was deriving from the mid cranial body. The remainder of the spleen revealed a micronodular hyperplasia pattern.

**HOSPITAL NAME**

Stay Pet Veterinary

**Liver**

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some 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.

**REFERRING VET**

Dr. Klimovitz

**INVOICE**

30949

**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.

### Heart

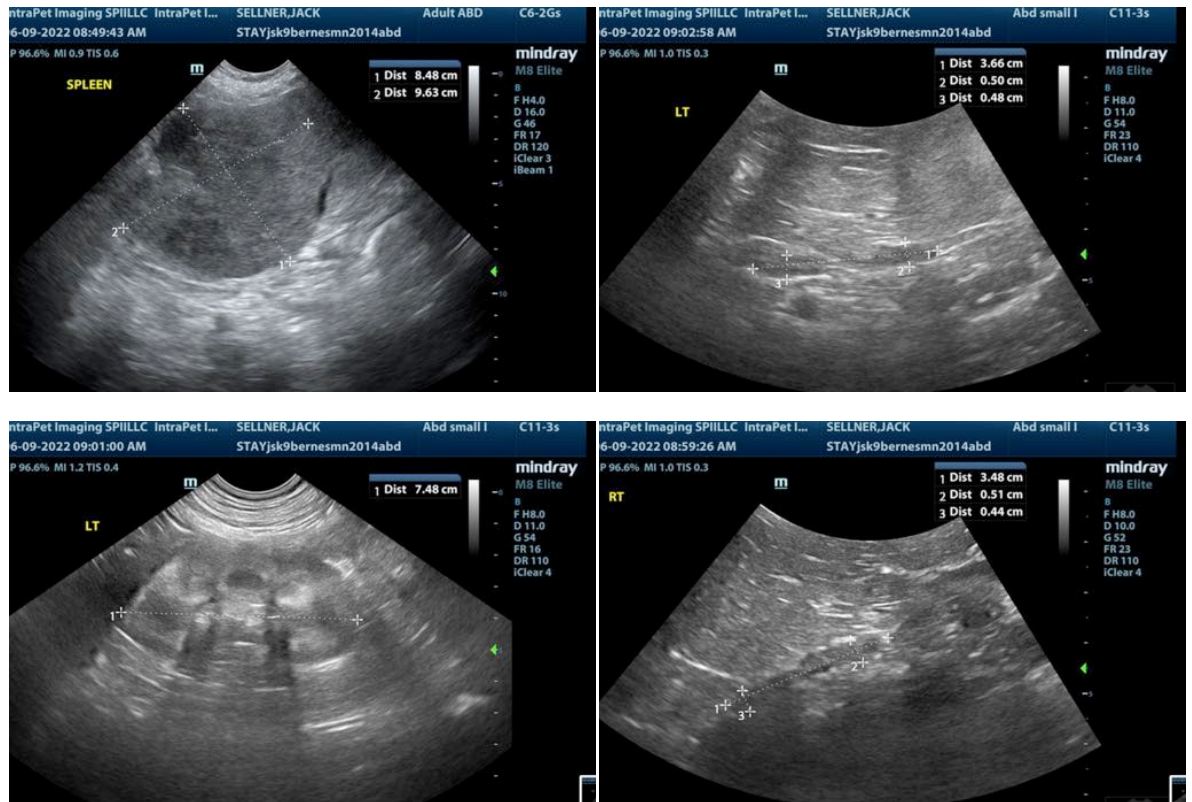
Rapid view of the heart revealed no evidence of pathology in the right auricle or pericardium.

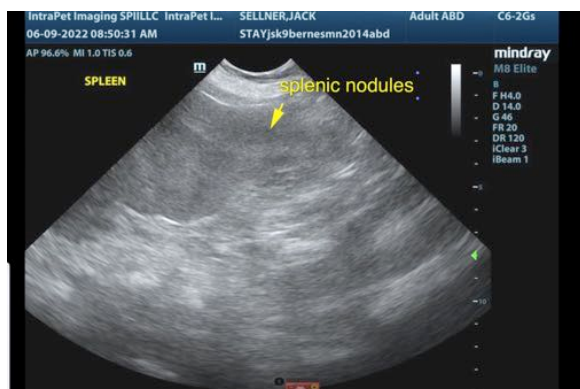
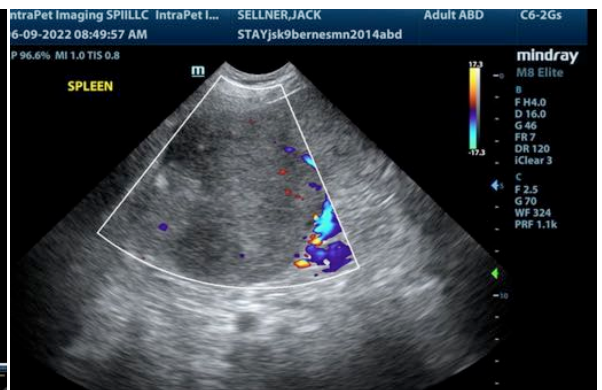
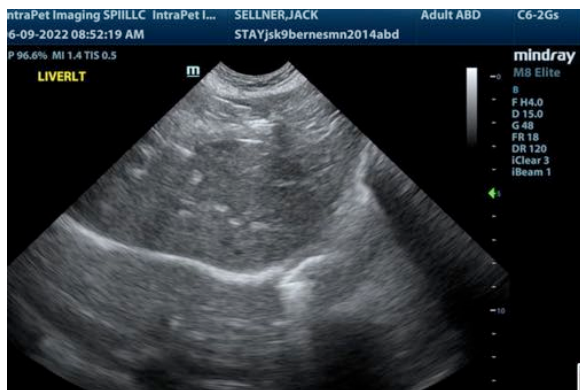
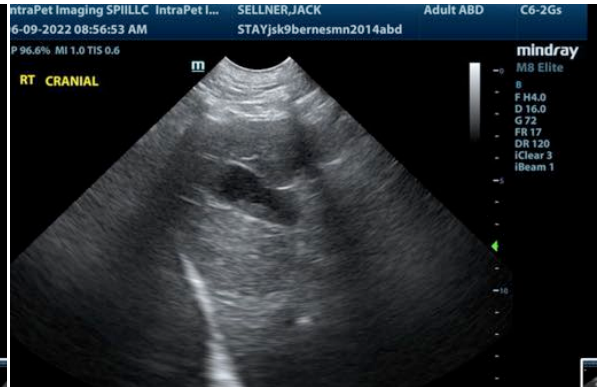
### ULTRASONOGRAPHIC FINDINGS

Focal splenic mass, appears isolated and pedunculated.

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Hemangiosarcoma, round cell neoplasia and benign hyperplasia are all possible, yet less likely given the multifocal lesions. I recommend three view chest radiographs, splenectomy, and liver inspection as well as biopsy to rule out micrometastasis.







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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