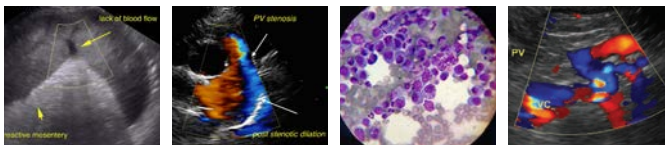
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com™
1-800-838-4268 info@sonopath.com

PATIENT
Azland Kamealoha

SPECIES
Canine

BREED
Terrier X

SEX
Spayed Female

AGE
13 Years

WEIGHT
30 Pounds

INTERPRETED BY
Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY
Dr. Finder

HOSPITAL NAME
Craig Road AH

REFERRING VET
Dr. Finder

INVOICE
39451

DATE
7/12/22

PRESENTING CLINICAL SIGNS

Mid abdominal mass seen on radiographs 7/5/22, history of UTI and hooded vulva. Panting and overweight. History of heart issues.
Abnormal PE/Chem/CBC/UA Results: TOTAL PROTEIN 8 HIGH 5.0-7.4 g/dL ALBUMIN 4.5 HIGH 2.7-4.4 g/dL ALT (SGPT) 196 HIGH 12-118 IU/L Alk Phosphatase 1085 HIGH 5-131 IU/L CALCIUM 11.8 HIGH 8.9-11.4 mg/dL WBC 18.6 HIGH 4.0-15.5 103/mL Absolute Neutrophils 13020 HIGH 2060-10600 /mL Absolute Lymphocytes 4650 HIGH 690-4500 /mL

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** and visible pelvic urethra were unremarkable for the level of repletion presented. The urine, however, did present some mildly echogenic debris consistent with mucous, exfoliated cells from renal or bladder origin, and/or blood clots as these echogenic changes can all present similarly. This is often related to urinary tract infection but may represent simple evidence of exfoliated debris or sterile inflammation. Cystocentesis, urinalysis, +/- culture would be recommended to rule out and define any UTI.

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. The right kidney measured 4.0 cm. The left kidney measured 4.0 cm. Slight pinpoint mineralizations noted.

Adrenal Glands

A **left adrenal** mass was noted measuring approximately 3.0 cm x 3.0 cm. The mass was irregular and deviated the left kidney. It may be related to the left hepatic mass.

The **right adrenal gland** appeared subnormal in size at 0.40 cm.

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.

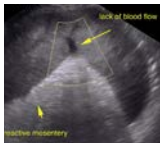
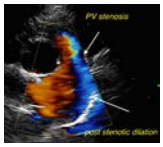
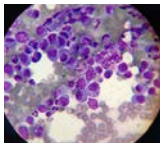
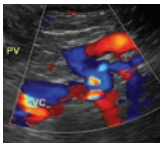
Liver

The **liver** revealed an expansive parenchymal mass with irregular contour, measuring approximately 5.0 cm x 7.0 cm, deriving from the left lateral liver. The right liver was unremarkable. 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.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Azland Kamealoha

SPECIES

Canine

BREED

Terrier X

SEX

Spayed Female

AGE

13 Years

WEIGHT

30 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Finder

HOSPITAL NAME

Craig Road AH

REFERRING VET

Dr. Finder

INVOICE

39451

DATE

7/12/22

Pancreas

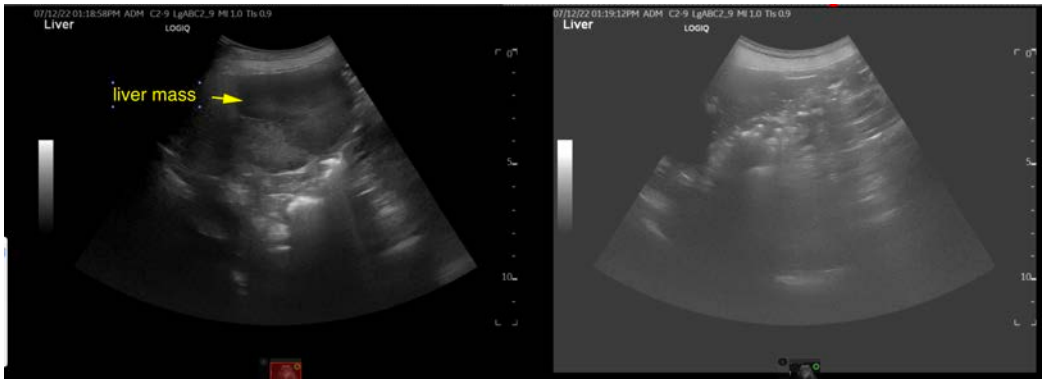
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

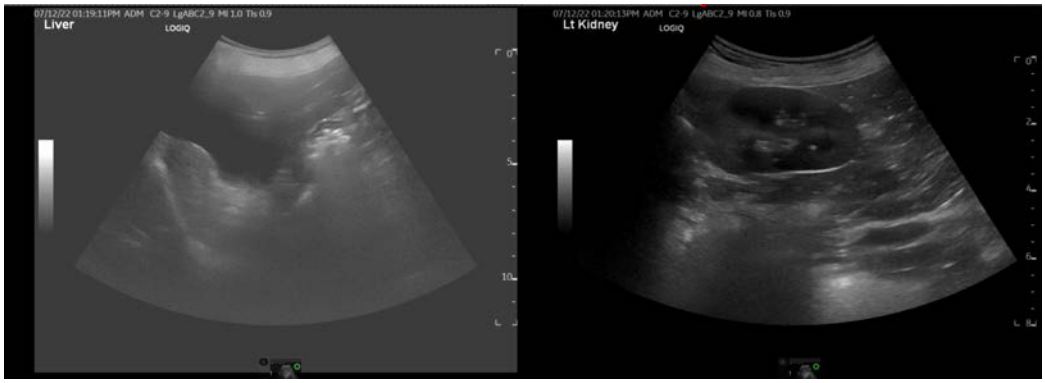
ULTRASONOGRAPHIC FINDINGS

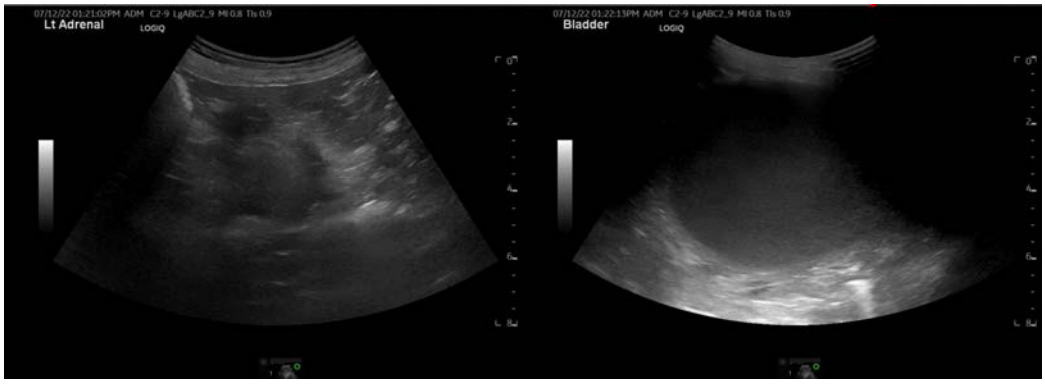
- Left adrenal mass and left hepatic mass

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

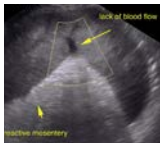
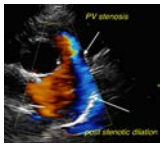
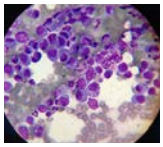
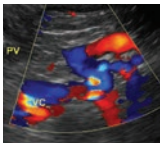
FNA of both lesions recommended for staging purposes. Technically, left adrenalectomy and left l lobectomy would be recommended. However, CT evaluation would be warranted. Blood pressures +/- urine catecholamine warranted. Suspected pheochromocytoma, potentially metastatic to the liver, or comorbidity. Carcinoma also possible. Benign lesion less likely.







SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Azland Kamealoha

SPECIES

Canine

BREED

Terrier X

SEX

Spayed Female

AGE

13 Years

WEIGHT

30 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Finder

HOSPITAL NAME

Craig Road AH

REFERRING VET

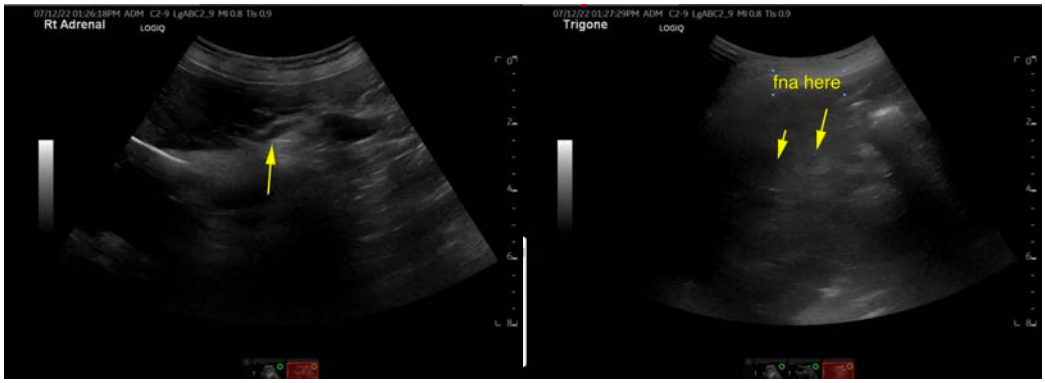
Dr. Finder

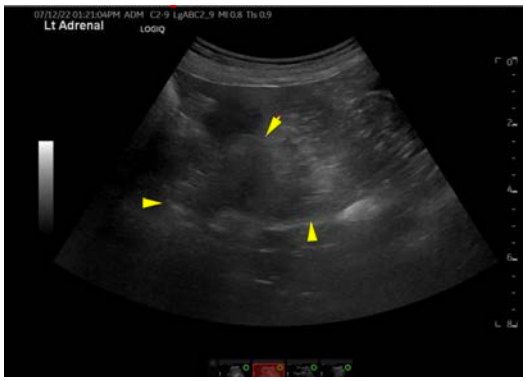
INVOICE

39451

DATE

7/12/22





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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

info@SonoPath.com