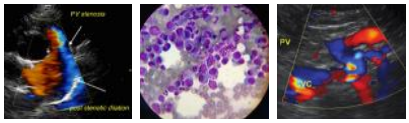
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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DATE
7/15/22

PATIENT
Molly Schott

SPECIES
Canine

BREED
Dachshund

SEX
Spayed Female

AGE
11/21/09

WEIGHT
15.8 Pounds

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

HOSPITAL NAME
Jacksonville VH

REFERRING VET
Dr. Thai

INVOICE
16655

PRESENTING CLINICAL SIGNS

History: 6/2021: increased ALP 243 (5-131). 6/2022: ALP 1499 (5-131)
rest liver enzymes WNL, on PE main weight 3 years BCS 5.5-6/9, slightly dry coat and dandruff, does drink a lot but no recent change per o

Current Medications: None.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.
Imaging Performed By: Rachel Brilhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Urinary bladder calculi were present, nonobstructive. Suspended debris was noted. A mineralizing urethral mass was present, measuring up to 8.0 mm in width extending from the cystourethral junction to the deep pelvic urethra.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some minor 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. Nonobstructive corticomedullary calculi were noted, measuring up to 0.2 cm in the right kidney and the largest calculus in the left kidney measured 0.4 cm. The right kidney measured 5.05 cm. The left kidney measured 4.58 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 right adrenal gland measured 1.96 cm x 0.61 cm at the cranial pole and 0.6 cm at the caudal pole. The left adrenal gland measured 2.02 cm x 0.7 cm at the caudal pole and 0.67 cm at the cranial pole.

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** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild 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. Hypoechoic ill-defined expansive nodule was noted in the

left medial liver. Differentials for the nodule include pronounced hyperplasia versus carcinoma- FNA indicated.

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

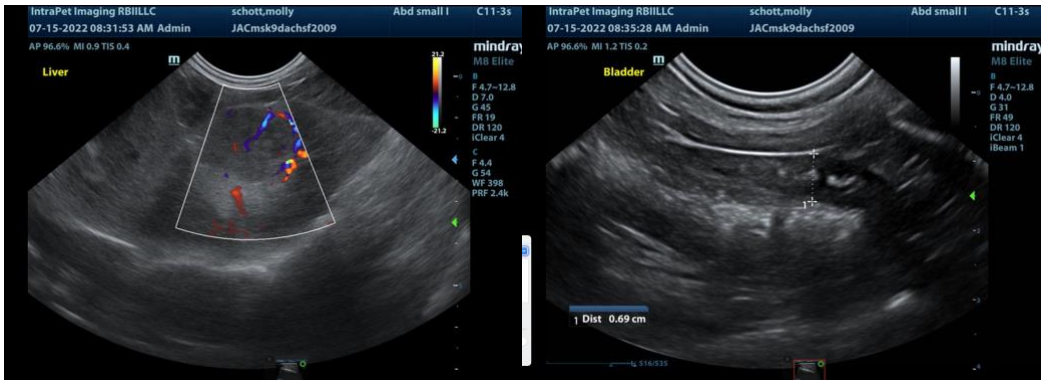
Diffuse hyperechoic changes were present in the area of the **pancreas**. The pancreatic remodeling was evident with multifocal to diffuse hyperechoic changes. These changes are consistent with fibrosis, amyloid, saponification of fat and may contain areas of low-grade chronic active inflammation especially if pain on imaging (+ Murphy sign) was present +/- focal subxyphoid palpation reveals pain response. No overt masses were noted.

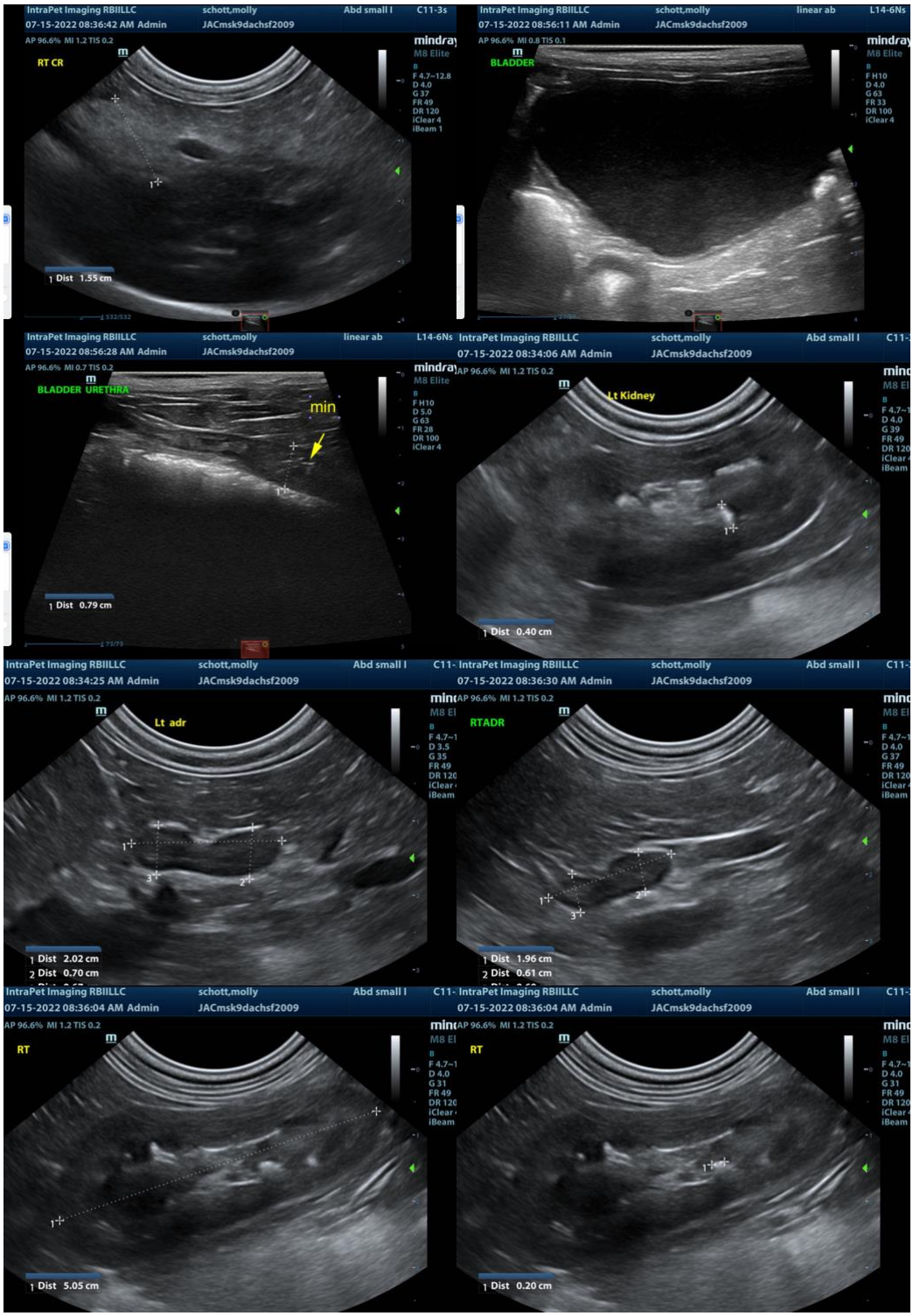
ULTRASONOGRAPHIC FINDINGS

- Urethral mass
- Concurrent bladder calculi
- Age-related renal changes with calculi
- Pancreatic remodeling
- Age-related hepatic changes with ill-defined expansive hypoechoic nodule

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Differentials for the liver nodule include pronounced hyperplasia versus carcinoma- FNA indicated. Endoscopic laser ablation of the urethra or stent placement could be considered. Prognosis is guarded.




IntraPet Imaging RBIILLC
schott,molly
Abd small I
C11-3s
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JACmsk9dachsf2009
RT CR
Dist 1.55 cm
IntraPet Imaging RBIILLC
schott,molly
linear ab
L14-6Ns
07-15-2022 08:56:11 AM Admin
JACmsk9dachsf2009
BLADDER
IntraPet Imaging RBIILLC
schott,molly
linear ab
L14-6Ns
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JACmsk9dachsf2009
BLADDER URETHRA
min
Dist 0.79 cm
IntraPet Imaging RBIILLC
schott,molly
Abd small I
07-15-2022 08:34:06 AM Admin
JACmsk9dachsf2009
Lt Kidney
Dist 0.40 cm
IntraPet Imaging RBIILLC
schott,molly
Abd small I
07-15-2022 08:34:25 AM Admin
JACmsk9dachsf2009
Lt adr
Dist 2.02 cm
Dist 0.70 cm
IntraPet Imaging RBIILLC
schott,molly
Abd small I
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JACmsk9dachsf2009
RTADR
Dist 1.96 cm
Dist 0.61 cm
IntraPet Imaging RBIILLC
schott,molly
Abd small I
07-15-2022 08:36:04 AM Admin
JACmsk9dachsf2009
RT
Dist 5.05 cm
IntraPet Imaging RBIILLC
schott,molly
Abd small I
07-15-2022 08:36:04 AM Admin
JACmsk9dachsf2009
RT
Dist 0.20 cm

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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