



PATIENT PRESENTING CLINICAL SIGNS

Chester Keller History: Hypercalcemia Current meds: Interceptor/Credelio, occ. Simplicef for dermatitis
Abnormal PE/Chem/CBC/UA Results: Ionized calcium 1.46

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Hound Cross

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 residual prostate measured 1.21 cm.

AGE

14 years

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 6.38 cm. The right kidney measured 5.4 cm.

WEIGHT

60.5 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 right adrenal gland measured 1.95 x 1.0 cm at the cranial pole and 0.6 cm at the caudal pole. The left adrenal gland measured 2.52 x 0.64 cm at the cranial pole and 0.56 cm at the caudal pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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Spleen

The **spleen** revealed slight, heterogenous parenchymal changes and minor granular appearance.

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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. A hyperechoic nodule was noted in the left cranial liver. This is most consistent with lipogranuloma lipid plaque and measured 2.4 cm. 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.

REFERRING VET

Black River Vet

INVOICE

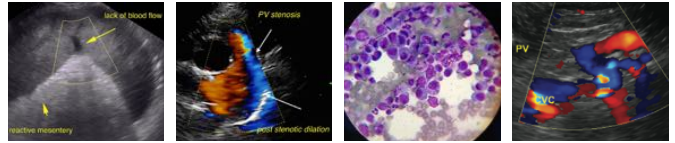
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Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. Small and

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PATIENT

large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted.

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SPECIES

Pancreas

Canine

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.

BREED

Hound Cross

Free Abdomen

SEX

The iliac lymph node was enlarged, rounded and hypoechoic measuring 1.72 x 1.0 cm.

Neutered male

Thyroid

AGE

The cervical region was imaged. Both thyroid lobes were uniform. There was no evidence of parathyroid or thyroid pathology. The esophagus, trachea, regional tissues as well as salivary glands were all normal.

14 years

WEIGHT

ULTRASONOGRAPHIC FINDINGS

60.5 lbs

Variable nodular changes were noted in the liver and were non-disruptive.

Normal cervical region.

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Iliac lymphadenopathy and slight granular spleen.

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Palpation of the anal glands and/or imaging of the anal glands is recommended to assess for underlying carcinoma in this patient that may be metastatic to the iliac lymph node. The lymph node is not particularly large, yet it is rounded and hypoechoic and the spleen is slightly granular. Sedation and FNA of both structures are indicated as well as palpation and imaging of the anal glands. However, I do recommend Michigan State hypercalcemia panel prior to the next intervention. Reactive iliac lymph node and spleen versus emerging round cell neoplasia or metastatic lymph node from anal gland pathology.

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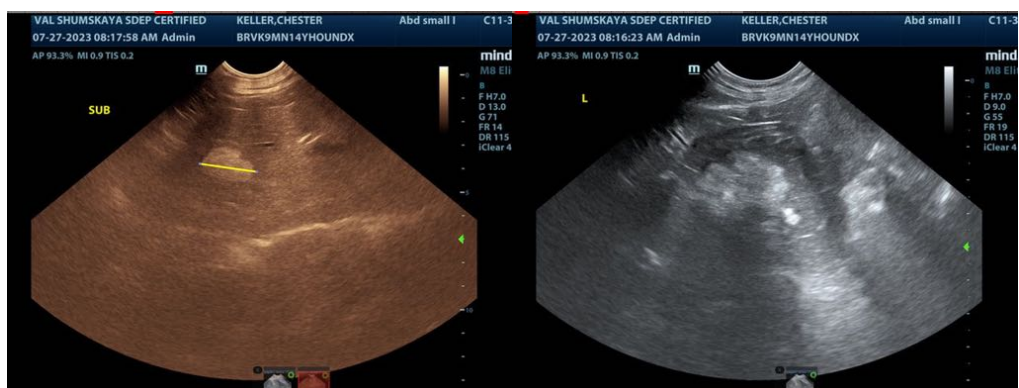
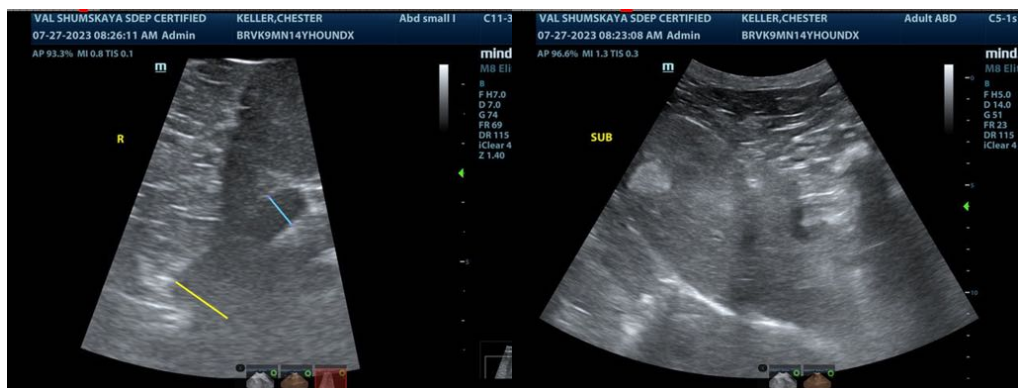
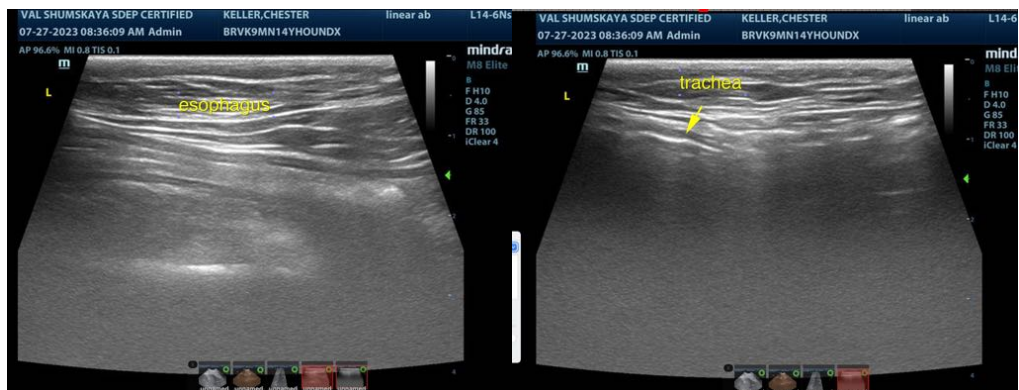
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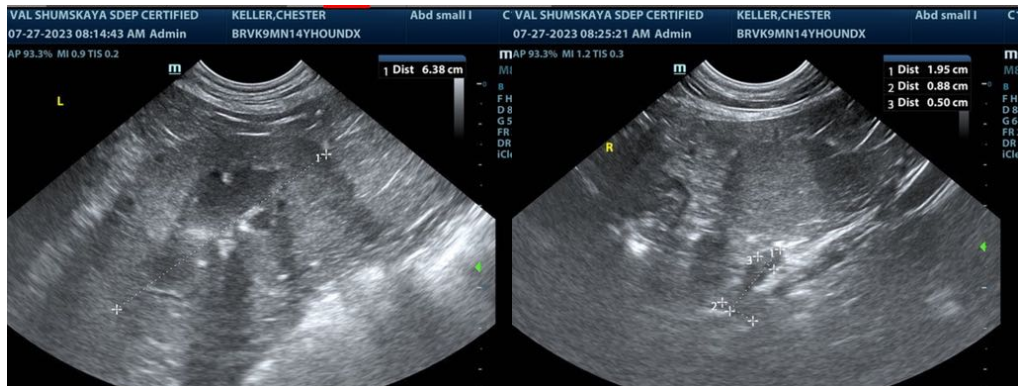
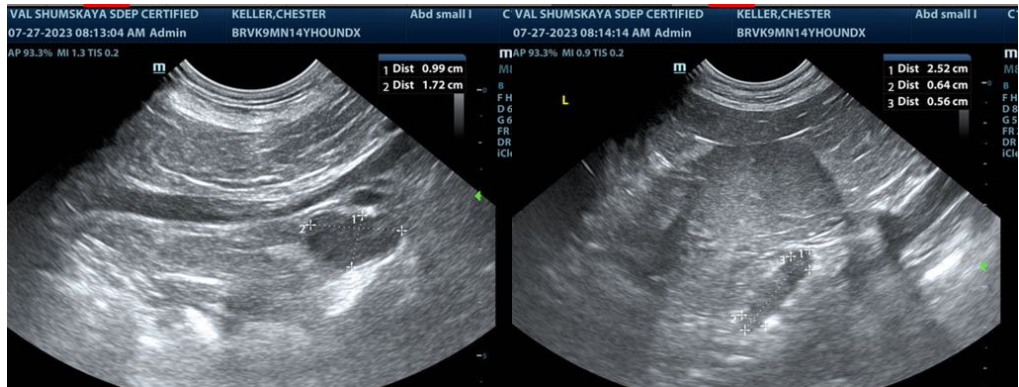
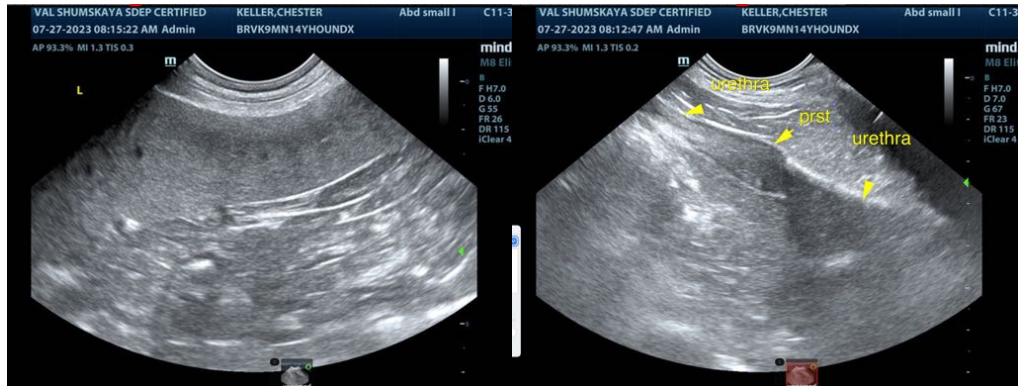
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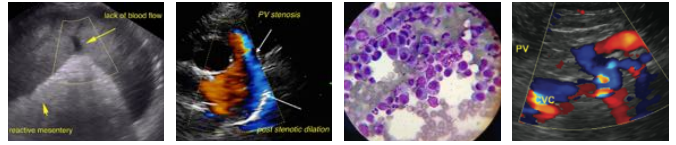
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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