

**DATE**

7/8/22

PRESENTING CLINICAL SIGNS

History: Patient exhibits off and on indigestion (lip smacking, borborygmus, belching, variable appetite, diarrhea). This has escalated in the past few months. Responds well to Metronidazole, Maropitant, depending on the symptoms at the time. Recently started a trial of Purina HA vet diet. No weight loss, active and playful. Also has a history of seasonal allergies. Recent trial of Sucralfate did not yield improvement. Dog is in good physical condition otherwise.

PATIENT

Wyatt Antonelli

SPECIES

Canine

BREED

Labrador

SEX

Neutered Male

AGE

9/25/14

WEIGHT

94 Pounds

Current Medications: On a regular basis, Wyatt is on Dasuquin, Pepcid 15 mg at night, Forti-Flora 1 packet per day with food. Cytopoint on an as needed basis. Recent meds from ER - Ondansetron 8 mg tab- 2 tabs BID as needed for nausea.

Lab Results: Stress response.

Radiographs: Was at the ER few days ago for similar GI symptoms. Report said markedly enlarged spleen.

Fast scan at ER revealed no free fluid in the abdomen.

Date of Previous IntraPet Ultrasound: 12/29/2020. See attached.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Declined at this time.

Imaging Performed By: Stephanie Pearce RDCS, RVT.

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.

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS

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 right kidney measured 8.13 cm. The left kidney measured 8.17 cm.

HOSPITAL NAME

Chadwell AH

Adrenal Glands

The **right adrenal gland** was 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 3.39 cm x 0.84 cm at the caudal pole and 0.92 cm at the cranial pole.

REFERRING VET

Dr. Schaupp

The **left adrenal gland** was normal in size and contour, measuring 2.72 cm x 0.82 cm at the caudal pole and 0.57 cm at the cranial pole.

INVOICE

16537

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 subtle heterogeneous hypoechoic nodular changes. The gallbladder and common bile duct were 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

A **caudal abdominal mass** was noted, measuring 6.9 cm x 10.0 cm was noted in this patient. Regional inflammation was noted owing to the mass, extending into the sublumbar space and some inflammatory extent around the left kidney. The caudal abdominal mass appears to be deriving from a lymph node. Other small lymph nodes were also enlarged.

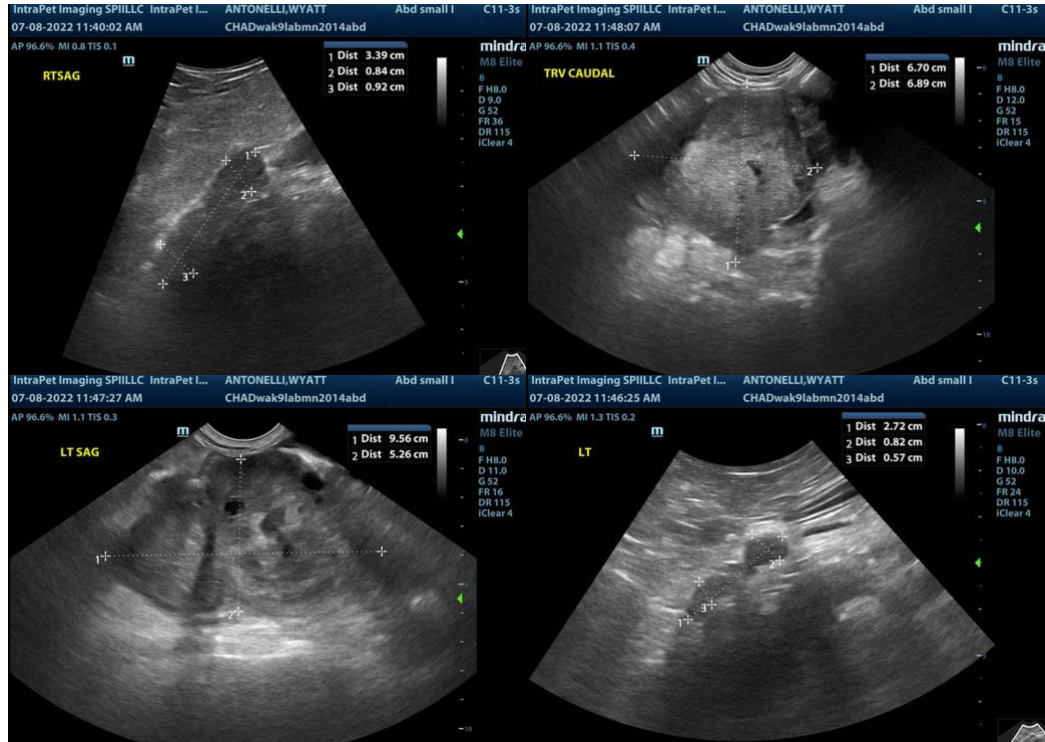
ULTRASONOGRAPHIC FINDINGS

- Pelvic/sublumbar lymph node mass with regional inflammation with other smaller lymph nodes enlarged
- Liver, heterogeneous hypoechoic nodular changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the mass warranted with hepatic FNA to assess for metastatic disease. Three view chest radiographs are warranted. Suspect round cell neoplasia.





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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