

**DATE**

8/12/22

PRESENTING CLINICAL SIGNS

History: This weekend: seemed more slow - owner believed was due to the heat Today: was let outside when owner got home - owner noted that he did not meet her at the door like he normally does when she got home, seemed out of it when she found him. While outside feces produced seem a bit softer - then patient was noted to collapse into the bushes Hx of lymes disease 2-3 years ago - was treated

PATIENT

Jax Reamer

SPECIES

Canine

BREEDAustralian Shepherd
Mix**SEX**

Neutered Male

AGE

9/3/15

WEIGHT

72.8 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**Animal Emergency
Hospital**REFERRING VET**

Dr. Nacke-Horney

INVOICE

16828

Current Medications: furosemide, ampicillin, maropitant, vitamin K- 2 bags (240ml) of plasma, buprenorphine, yunnan Baiyuo

Lab Results: Ultrasound Scan - Fluid Check (Abdominal/Thoracic/Pericardia) IH: Moderate pericardial effusion Trace abdominal effusion. BODY FLUID ANALYSIS 1 SITE: Small amount of pericardial effusion noted.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS.

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.

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. The right kidney measured 6.4 cm. The left kidney measured 7.0 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 3.75 cm x 0.74 cm at the caudal pole and 0.79 cm at the cranial pole. The left adrenal gland measured 2.95 cm x 0.58 cm at the caudal pole and 0.57 cm at the cranial pole.

Spleen

The **spleen** was enlarged with subtle coalescing micronodular changes and irregular contour.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

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 **pancreas** revealed extensive hypoechoic, irregular parenchyma with mixed hyperechoic surrounding fat (a region of 6.3 cm x 2.0 cm) in the right limb.

Free Abdomen

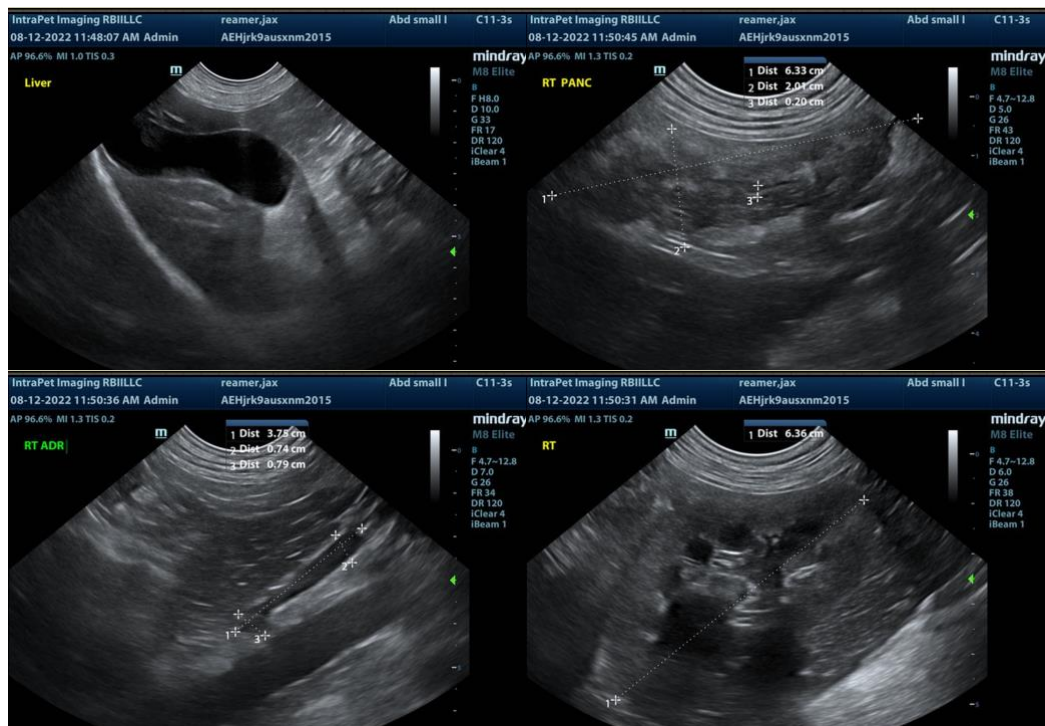
A rapid view of the **heart** revealed hypoechoic right auricular mass, measuring 4.0 cm with slight pericardial effusion.

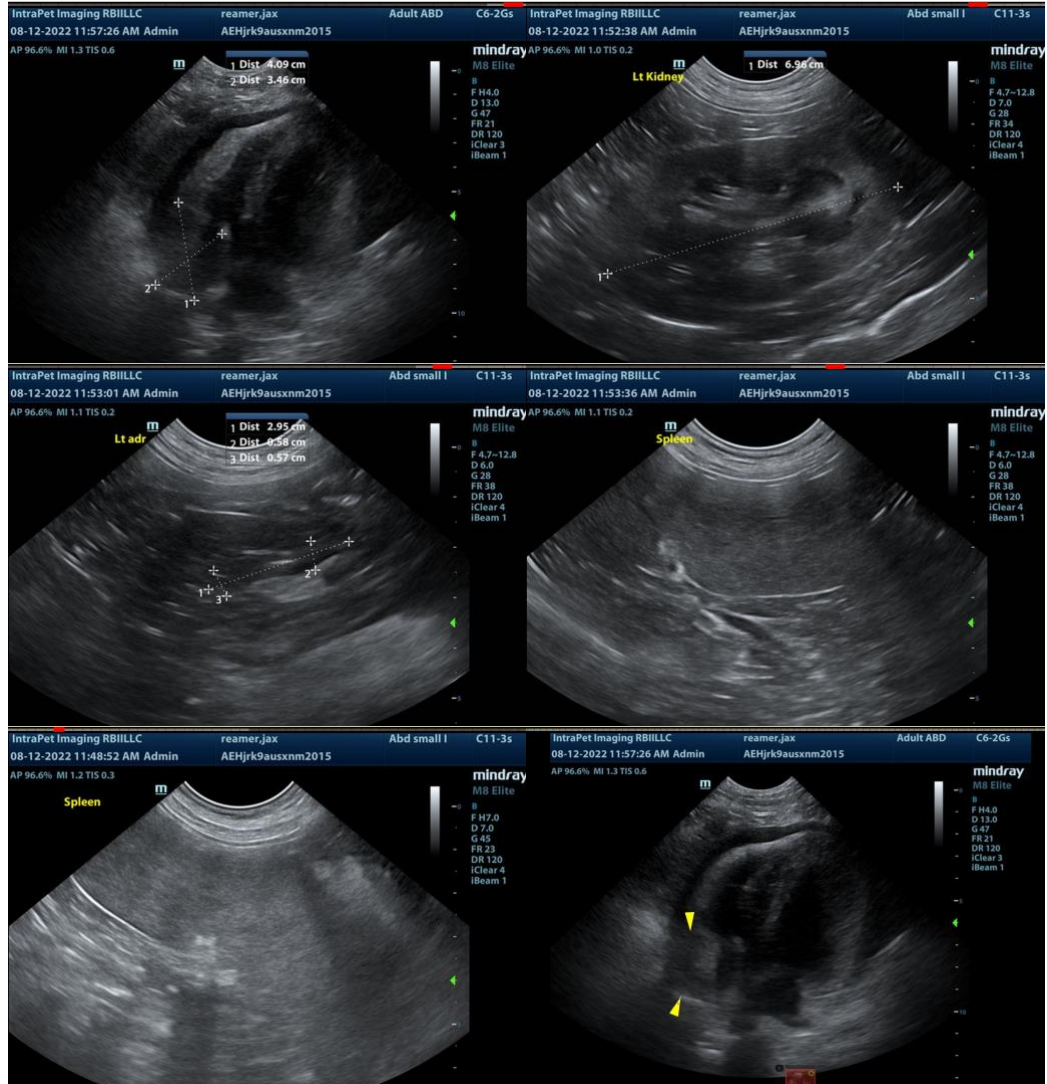
ULTRASONOGRAPHIC FINDINGS

- Extensive pancreatitis pattern
- Micronodular spleen
- Concurrent right auricular mass and slight pericardial effusion
- Age-related renal changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Suspect cardiac hemangiosarcoma with comorbidity of pancreatitis. The position of the mass in the right auricle would suggest hemangiosarcoma with early pericardial effusion without levels meeting tamponade criteria. Further imaging of the right auricle is warranted for further definition.





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.

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