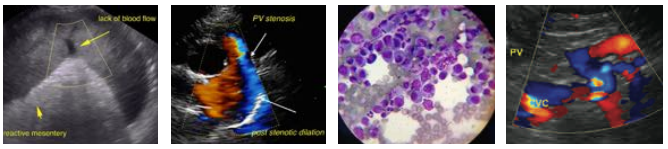
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Selma Whitehouse

SPECIES

Canine

BREED

Dachshund MIx

SEX

Spayed Female

AGE

9 years

WEIGHT

25.5 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Nottingham

HOSPITAL NAME

All Creatures AH SH

REFERRING VET

Dr. Nottingham

INVOICE

91227

DATE

8/13/21

PRESENTING CLINICAL SIGNS

History: There is mild elevation in a liver enzyme called ALT. Selma's ALT has been high before so I'm not alarmed. However, given the mast cell tumors she like to make we should do an abdominal ultrasound to check her liver and spleen. Dr. Gillings (a local oncologist) suggested that we do a needle aspirate of the liver and spleen if more mast cell tumors developed to make sure she doesn't have signs of disease infiltrating those organs. I'd like to give Selma a mild sedative the morning of her surgery, then do the ultrasound and needle aspirates. We'll send the samples to the lab and not get results for a few days, but if everything looks subjectively normal on the ultrasound we can proceed from that sedated exam straight into surgery to remove the mast cell tumor on her leg. We'll also send that mass to the pathologist to examine it

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. 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.

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 4.75 cm. The left kidney measured 4.75 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 left adrenal gland measured 1.37 x 0.48 cm at the cranial pole and 0.58 cm at the caudal pole. The right adrenal gland measured 0.6 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 was noted.

Liver

The **liver** revealed multi-focal, hypoechoic nodular changes. The nodular changes are non-disruptive. The curvilinear patterns were maintained. The gallbladder was unremarkably.

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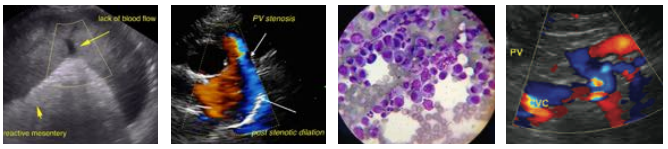

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Gastrointestinal

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. Some parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxiphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

ULTRASONOGRAPHIC FINDINGS

Nodular hyperplasia, hepatic pattern.

Minor pancreatic remodeling.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the liver would be warranted for further definition. It is likely hyperplasia, however, there is a mild potential for suppurative changes or metastatic disease.

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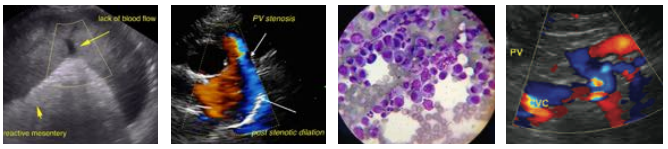

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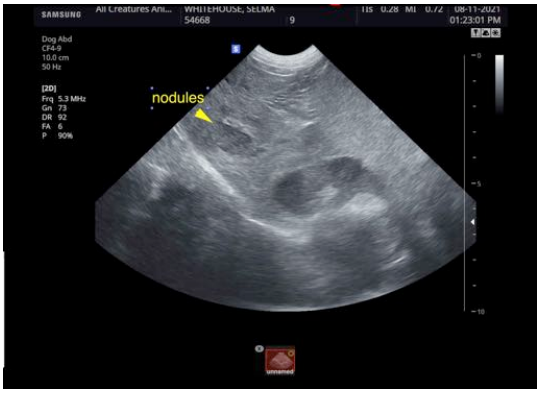

The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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