



PATIENT PRESENTING CLINICAL SIGNS

PATIENT Emma McAuliffe
SPECIES Canine
BREED Great Pyrenees/Newfoundland Mix
SEX Spayed Female
AGE 10 Years
WEIGHT 112 Pounds

History: - presented 8/13 for a seizure -never had seizures in past. Normal when arrived at clinic. - exam was normal except resented caudal abdomen palpation - full labs were NSF -Rads of chest and abdomen (only allowed laterals) >>> pertinent finding is increased mixed density in sublumbar area of abdomen, displacing other abdomen contents ventrally Radiographic Findings pertinent finding is a large increased mixed density in sublumbar area of abdomen, displacing other abdomen contents ventrally Radiographs will be emailed as well Primary Question/Differential to Be Answered in This Exam Nature of abdominal density of sublumbar region.

Abnormal PE/Chem/CBC/UA Results: Labs were all normal

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. No calculi or masses were noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 7.36 cm. The right kidney measured 8.0 cm.

Adrenal Glands

An undifferentiated hypoechoic irregular mass was noted near the **right adrenal gland** and right kidney, extending dorsal caudally into the abdomen with regional inflammation and free fluid. The right adrenal gland measured 4.22 cm x 1.37 cm at the cranial pole and 1.05 cm at the caudal pole.

The **left adrenal gland** was mildly enlarged and slightly irregular, measuring 2.9 cm x 1.6 cm at the cranial pole and 0.71 cm at the caudal 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

8/19/22

Invoice
16921

INTERPRETED BY

Eric Lindquist, DMV,
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jenna Walsh, CVT

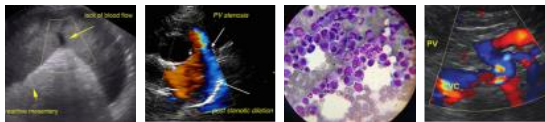
HOSPITAL NAME

VCA Delta Oaks AH

REFERRING VET

Dr. Schulke

DATE



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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. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes 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.

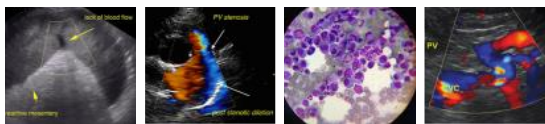
ULTRASONOGRAPHIC FINDINGS

- Invasive caudal abdominal mass, into the sublumbal area, nonresectable
- Mildly enlarged and slightly irregular left adrenal gland
- Age-related urinary bladder and hepatic changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the mass could be considered for further definition, however, prognosis is poor, depending upon responsiveness to chemotherapy.





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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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