

**DATE PRESENTING CLINICAL SIGNS**

8/20/21

PATIENT

Duke Smith

SPECIES

Canine

BREED

Labradoodle

SEX

Neutered Male

AGE

2011

WEIGHT

39 Pounds

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**

Abbey AH

REFERRING VET

Dr. Kluttz

INVOICE

12653

History: Seen on 7/24/21 for PU/PD after eating a brownie. Bloodwork found elevated liver values. Signs resolved with Tx on Clavamox. Repeat bloodwork found resolving liver enzymes. Follow up bloodwork after ABs finished found elevation in liver enzymes again. Dog is clinically normal.

Current Medications: Adequan 0.85 mL q 30 days, Cerenia 60mg PRN, Dasuquin

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Torbugesic IV.

Stat Report: Not requested.

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 residual prostate was uniform, measuring 0.9 cm.

The **left kidney** revealed a large (6.0 cm) anechoic cyst deriving from the right renal cortex. The remainder of the kidney presented minor pyelectasia, some loss of corticomedullary definition and some increased cortical echogenicity. Blood flow appeared to be adequate. The left kidney measured 4.84 cm.

The **right kidney** 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 4.84 cm.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having largely normal shape, size, position and acceptable echogenicity for this age group and breed. Some heterogeneity was noted within the adrenal parenchyma without concerning capsular distortion. These changes are likely age related but should be monitored by sonogram should the patient be suspected of having adrenal disease. The right adrenal gland measured 2.44 cm x 0.54 cm at the caudal pole and 0.59 cm at the cranial pole. The left adrenal gland measured 2.67 cm x 0.83 cm at the caudal pole and 0.77 cm at the cranial pole.

Spleen

The **spleen** revealed an expansive mixed hypoechoic incidental mass, measuring 3.16 cm x 2.24 cm, appears isolated. The mass was moderately vascular. No evidence of metastatic disease.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some minor 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

The **gastrointestinal tract** was unremarkable.

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.

Heart

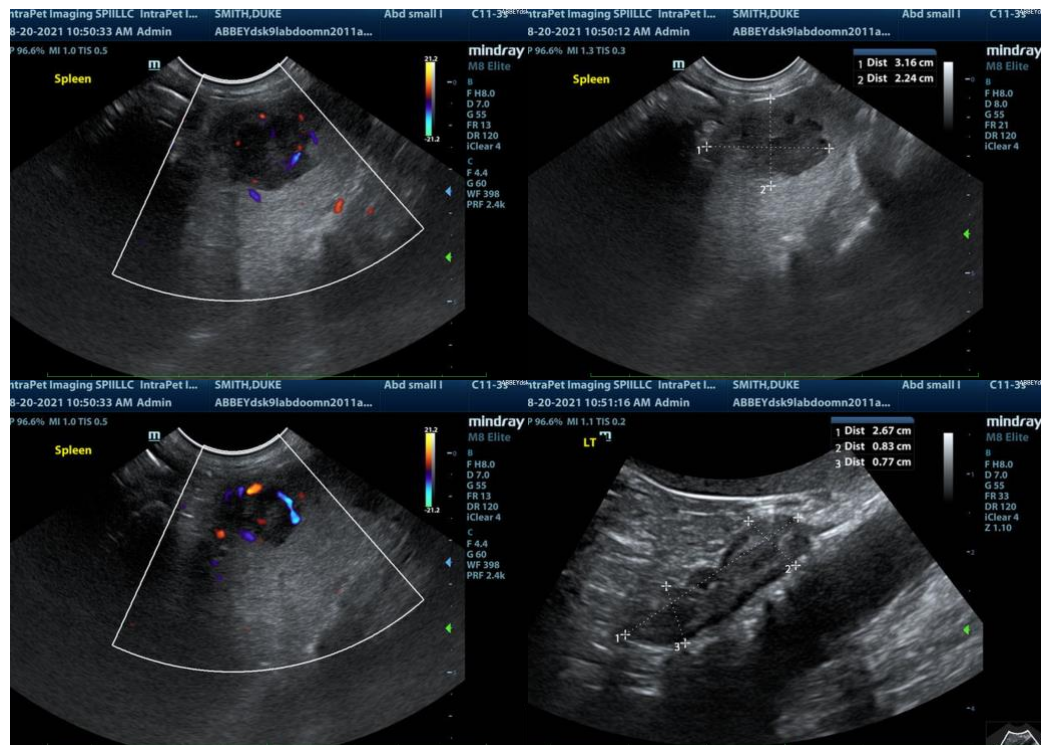
A rapid view of the **heart** revealed no evident pathology.

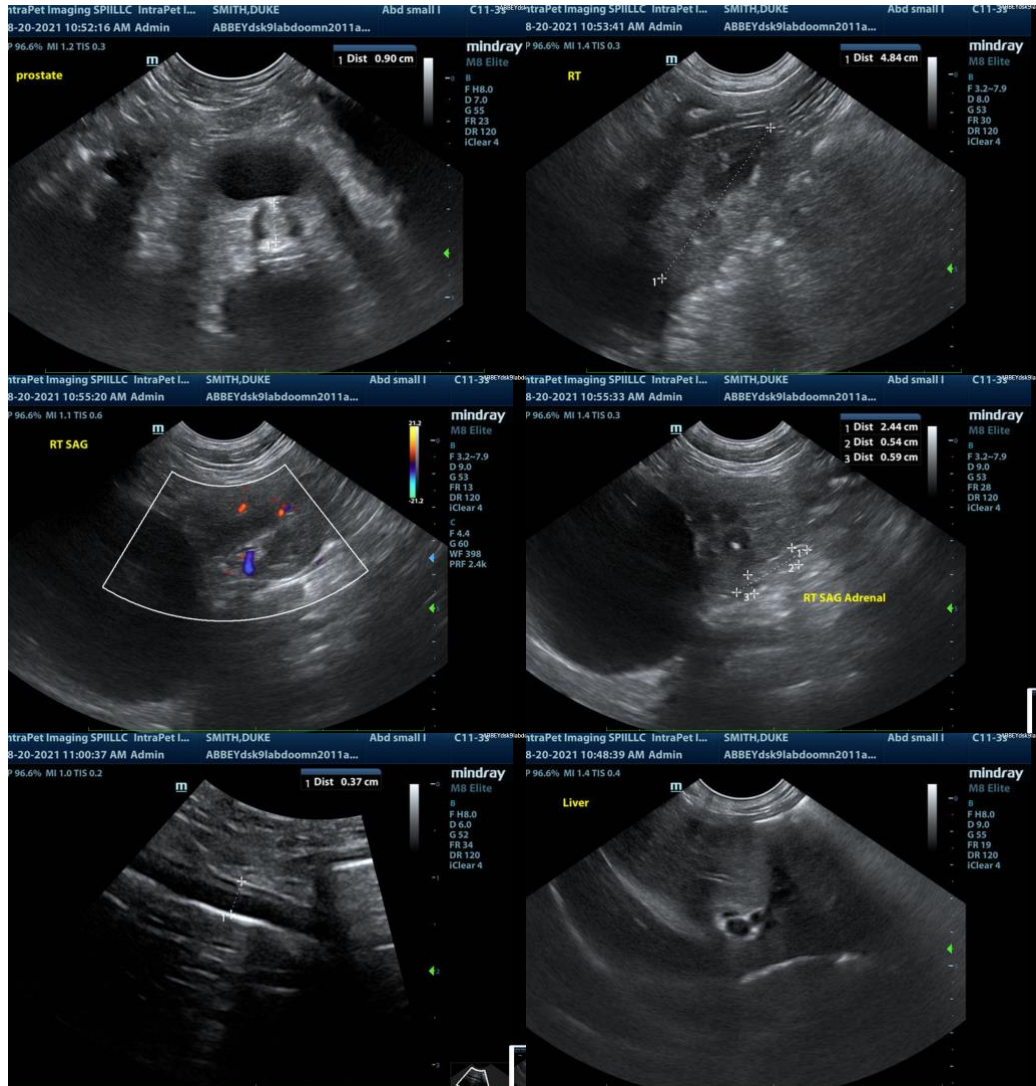
ULTRASONOGRAPHIC FINDINGS

- Splenic mass-hemangiosarcoma or round cell neoplasia suspected, benign hyperplasia possible yet less likely
- Right renal cyst, subjectively benign- unrelated to the splenic lesion
- GI tract unremarkable
- Age-related adrenal and hepatic changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend 3 view chest radiographs and splenectomy. Right heminephrectomy could be considered in this patient, however, typically these cysts are benign. The splenic lesion is incidental yet concerning.





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