

**DATE**

9/20/21

PRESENTING CLINICAL SIGNS

History: A recheck ultrasound was recommended one month after his previous ultrasound to re-evaluate the nodule noted on the left adrenal gland as well as the GI tract and pancreas. Doing well.

Current Medications: Tylan 1/8 teaspoon SID; Royal Canin GI High Energy Diet.

PATIENT

Dipstick Giannotti

Lab Results: No new lab results.

Radiographs: Not provided by the veterinarian.

Date of Previous IntraPet Ultrasound: 8-9-2021.

Sedation: not needed

Stat Report: not requested

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED**

Jack Russell Terrier

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 was noted. Ureteral papillae were normal.

SEX

Neutered male

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 4.87 cm. The right kidney measured 4.28 cm.

AGE

6/10/08

WEIGHT

21.6 lbs

Adrenal Glands

The caudal pole of the left **adrenal gland** revealed a nodule and was progressively expansive now measuring 1.1 x 0.75 cm at the caudal pole. The left adrenal gland measured 2.23 cm in length, 0.9 cm at the caudal pole and 0.49 cm at the cranial pole. The right adrenal gland measured 1.91 x 0.55 cm at the caudal pole and 0.66 cm at the cranial pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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.

HOSPITAL NAME

Charm City VH

REFERRING VET

Dr. Eavers

Liver

The **liver** revealed mild remodeling and increased portal markings with coarse architecture. This appears benign. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal.

INVOICE

91842

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Minor, variable intestinal thickening was noted.

Pancreas

Heterogenous **pancreatic** changes were noted. The pancreas measured 4.2 cm. However, the pancreas appears stable.

ULTRASONOGRAPHIC FINDINGS

Stable intestinal thickening.

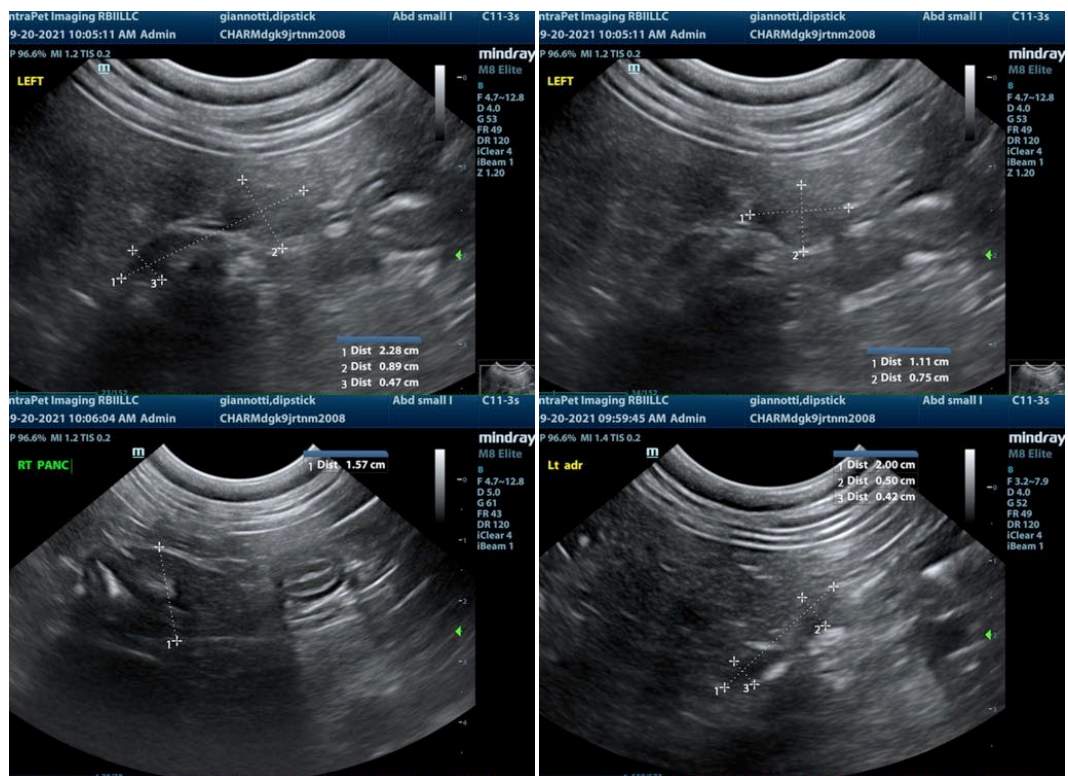
Mild pancreatic remodeling.

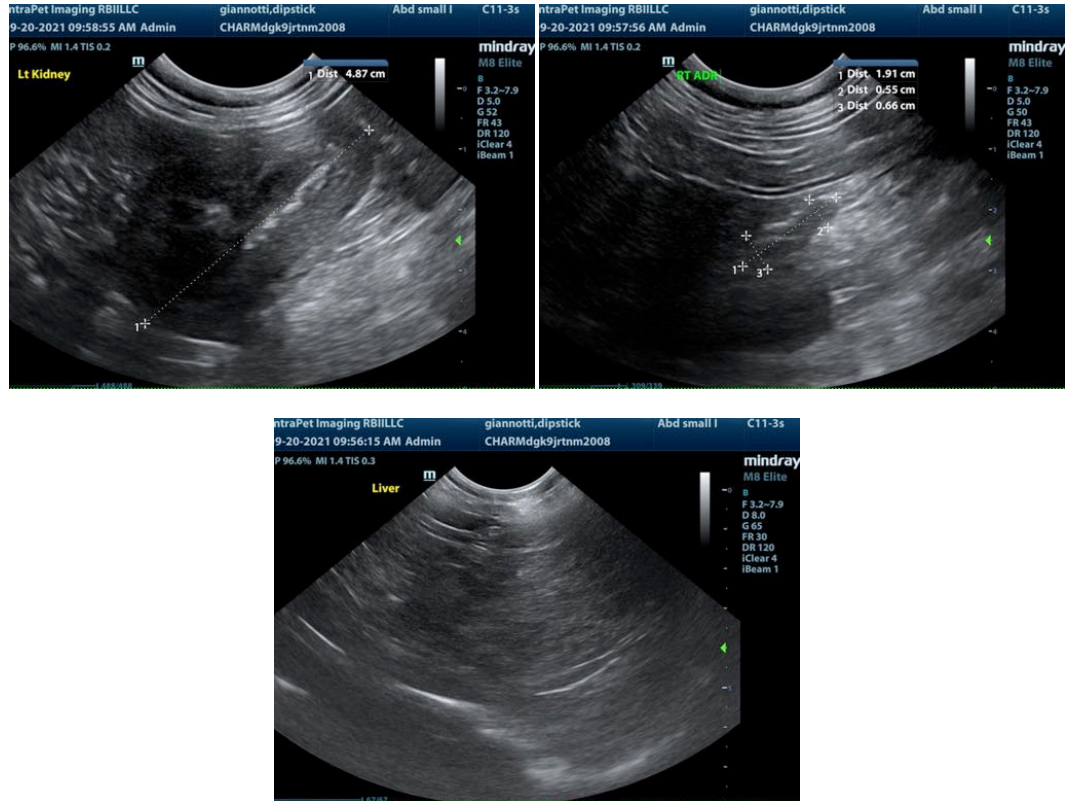
Mild hepatic remodeling.

Progressive left adrenal nodule, appears resectable. Adenoma and hyperplasia are likely. Emerging carcinoma or pheochromocytoma are possible.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If systemic hypertension is an issue then urine catecholamine is warranted and left adrenalectomy is warranted. This appears to be stable, yet the concern is it is progressively enlarged compared to the prior sonogram. This should be continually monitored if not directly removed proactively.





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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