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Clinical Sonography & Telecytology
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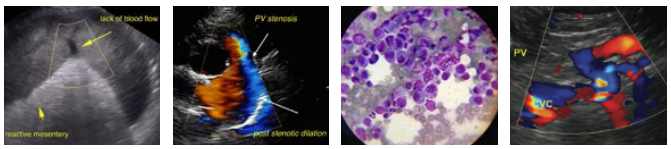


PATIENT

Loo Loo McNeill

SPECIES

Canine

BREED

Pit Bull Terrier

SEX

Spayed female

AGE

12 years

WEIGHT

62 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez , CVT

HOSPITAL NAME

Ramapo Valley AH

REFERRING VET

Dr. Katara

INVOICE

42349

DATE

12/26/22

PRESENTING CLINICAL SIGNS

History: Patient presents for increased liver values, PU/PD, possible IMHA/neoplasia? Abnormal PE/Chem/CBC/UA Results: Glob. 3.7, AST 84, ALT 148, Alk.Phos. 178, GGTP 22, T. bili. 1.0, magnesium 1.3, amylase 2185, PrecisionPSL 604, RBC 4.3, HGB 9.0, HCT 29, NRBC 2, retics 3.6, Abs. retics. 154800. U/A: protein 2+, Bili 3+, blood 2+, WBC > 50, RBC 4-10, rods > 100.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** presented a relatively uniform thickening of the cranioventral and craniodorsal mucosae with micropolypoid mucosal changes without involvement of the submucosae. The urine presented some echogenicity consistent with suspended debris. No evidence of urethral pathology was present. This presentation is most consistent with chronic cystitis. Technically transitional cell carcinoma cannot be ruled out with=out histopathological review but is not overtly suspected based on this pattern. Cystocentesis and urine culture +/- pathological review of urine cytology would be warranted. No overt calculi were present at this time.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 left kidney measured 7.24 cm. The right kidney measured 7.86 cm.

Adrenal Glands

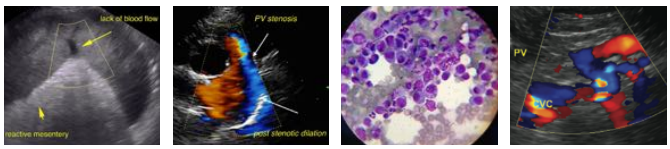
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 2.9 x 0.7 cm at the caudal pole and 0.73 cm at the cranial pole. The right adrenal gland measured 2.91 x 0.84 cm at the caudal pole and 0.84 cm at the cranial pole.

Spleen

The **spleen** revealed a cystic mass that measured 5.0 cm deriving from the cranial pole. A separate splenic nodule was noted at the cranial pole and measured 0.96 x 0.83 cm. Other nodular changes were noted throughout the majority of the spleen. However, they appeared to be isolated to the spleen.

Liver

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



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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.

Heart

Rapid view of the heart revealed no evidence of pathology.

ULTRASONOGRAPHIC FINDINGS

Splenic mass and nodules.

Mild, heterogenous hepatic changes.

Chronic cystitis bladder pattern.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend exploratory surgery. Splenic hemangiosarcoma versus possibility of round cell neoplasia is less likely or benign hyperplasia. There was no overt evidence of metastatic disease. However, inspection of the liver and biopsy is warranted at the time of surgery. Chest radiographs are warranted prior to surgery if not already performed. Urine culture and sensitivity is warranted.

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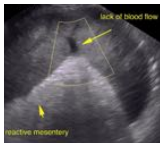
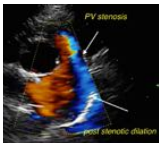
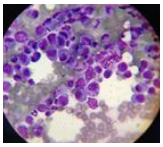
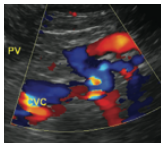

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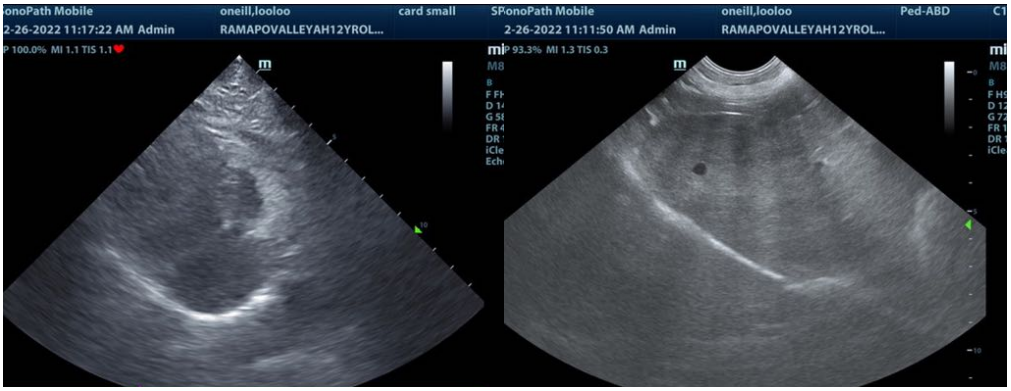

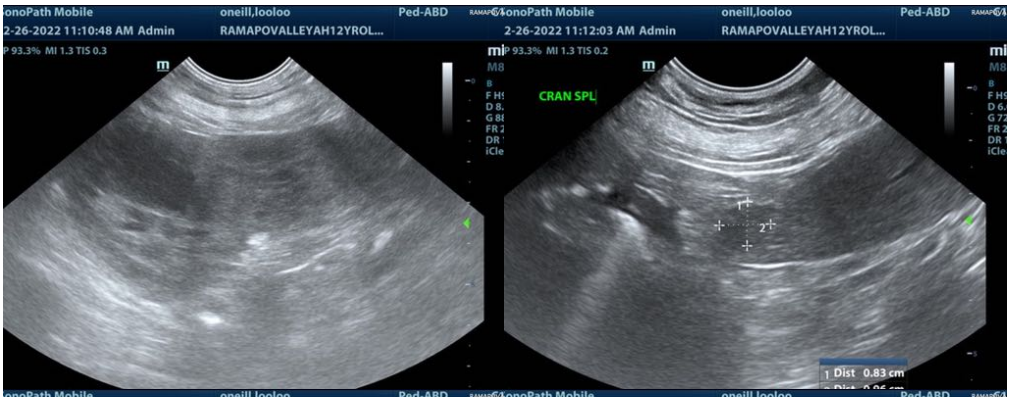

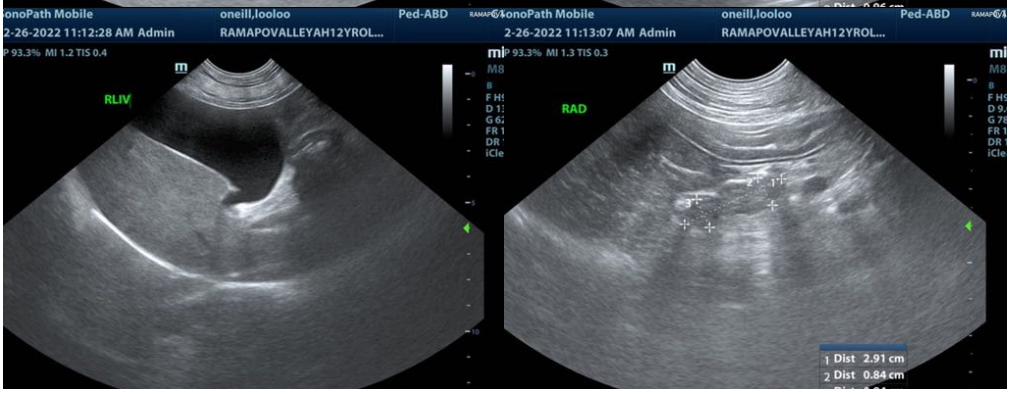

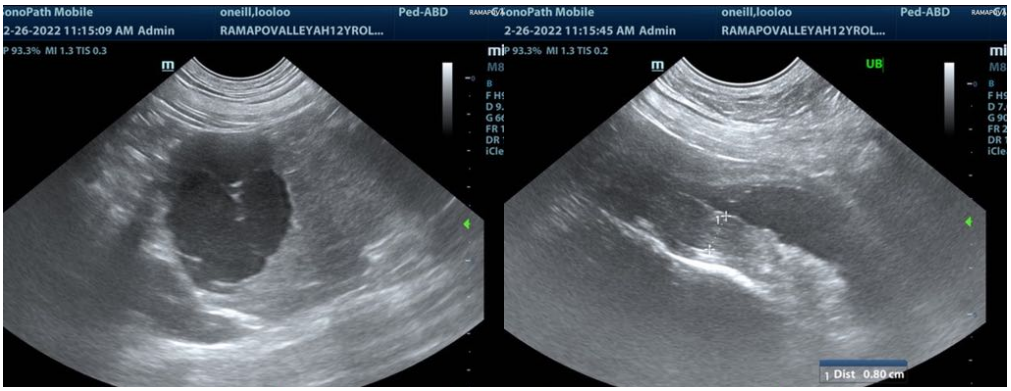

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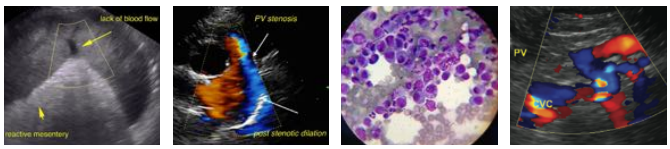

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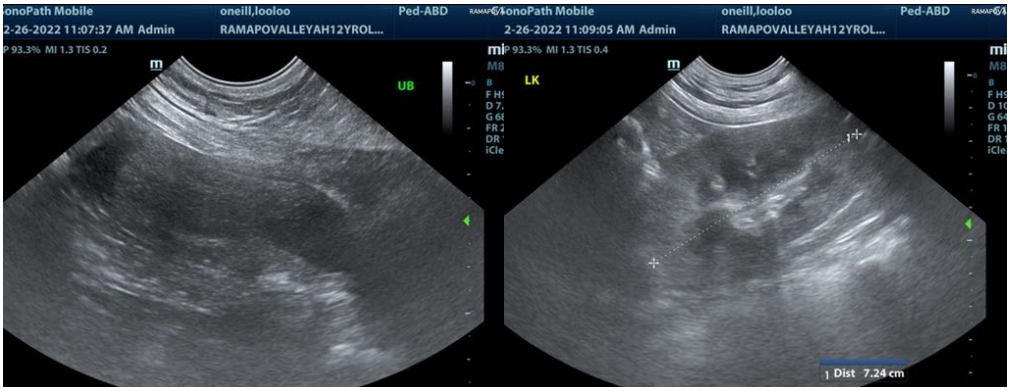

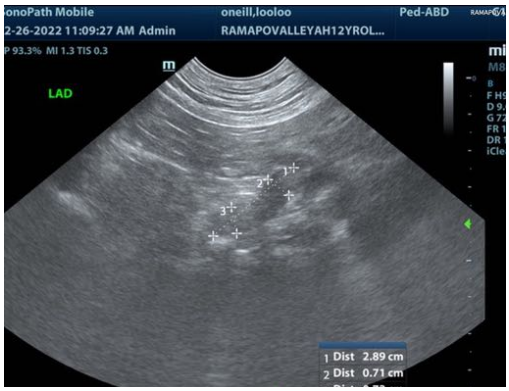

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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