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Clinical Sonography & Telecytology
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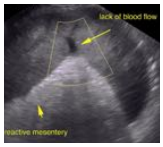

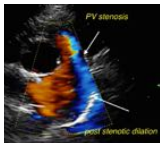

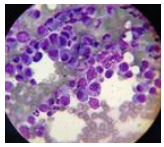
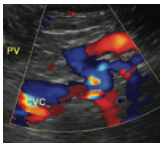

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1-800-838-4268 info@sonopath.com

PATIENT
Jade Migliaccio

SPECIES
Canine

BREED
Mix

SEX
Spayed female

AGE
10 years

WEIGHT
43 kbs

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY
Valeryia Shumskaya

HOSPITAL NAME
Chester AH

REFERRING VET
Dr. Migliaccio

INVOICE
75978

DATE
7/7/23

PRESENTING CLINICAL SIGNS

History: Abdominal mass Current meds: Novax
Abnormal PE/Chem/CBC/UA Results: RBC 4.69, HGB 6.5, HCT 31.5, MCH 18.1, MCHC 27, PLT 26, Amyl 1505, BUN 25, Glu 113

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 was noted. Ureteral papillae were normal.

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 5.15 cm. The right kidney measured 5.48 cm.

Adrenal Glands

The left **adrenal gland** was 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 0.5 cm at the cranial pole and 0.4 cm at the caudal pole. The right adrenal gland was not imaged owing to the precarious nature of the mass.

Spleen

The **spleen** revealed a complex, 6.0 cm mass with free fluid and enhanced mesentery. This is consistent with rupture of the mass and was significantly cavitated. This is strongly consistent with hemangiosarcoma. However, a benign hematoma is possible as blood flow was minimal on color flow assessment. Heterogenous changes were noted elsewhere in 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 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.

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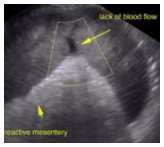
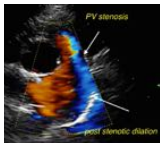
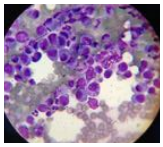
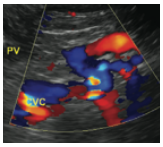

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Gastrointestinal

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. 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.

Free Abdomen

Heterogenous omental changes were noted and may represent omental spread of the tumor. A large amount of free fluid was noted.

Heart

Rapid view of the heart revealed no evidence of pathology. However, arrhythmogenic activity was present.

ULTRASONOGRAPHIC FINDINGS

Age related hepatic changes.

Ruptured splenic mass.

Arrhythmogenic activity was noted on rapid view of the heart.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There was no obvious cavitations or metastatic lesions; however, micrometastasis cannot be ruled out and omental metastasis is a strong potential. Immediate exploratory surgery is recommended if chest radiographs are free of evident pathology. EKG is indicated in this patient.

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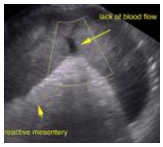
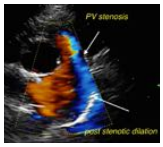
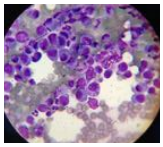
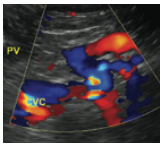

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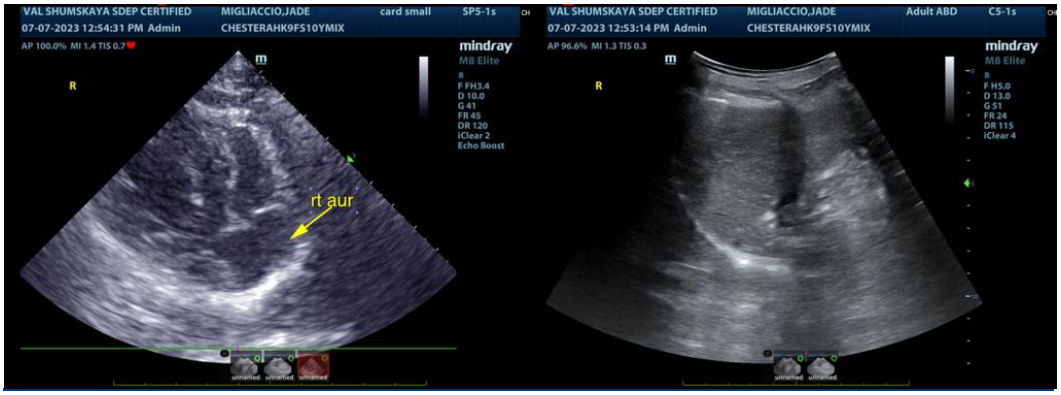

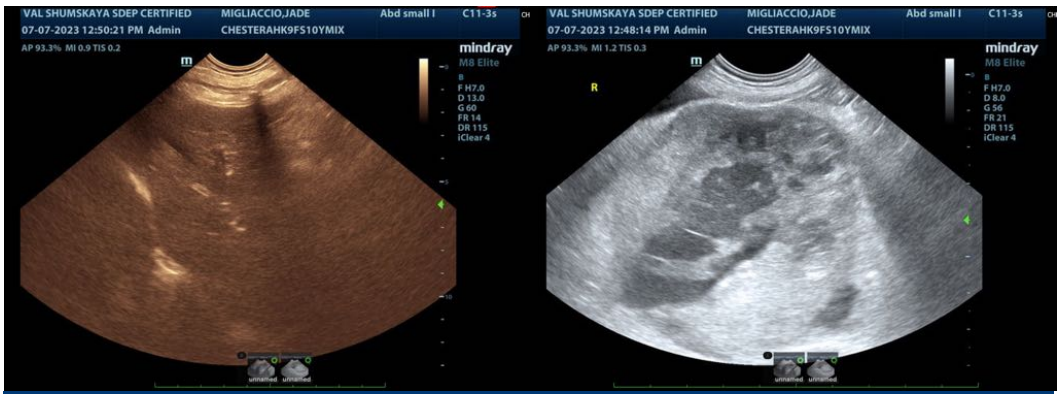

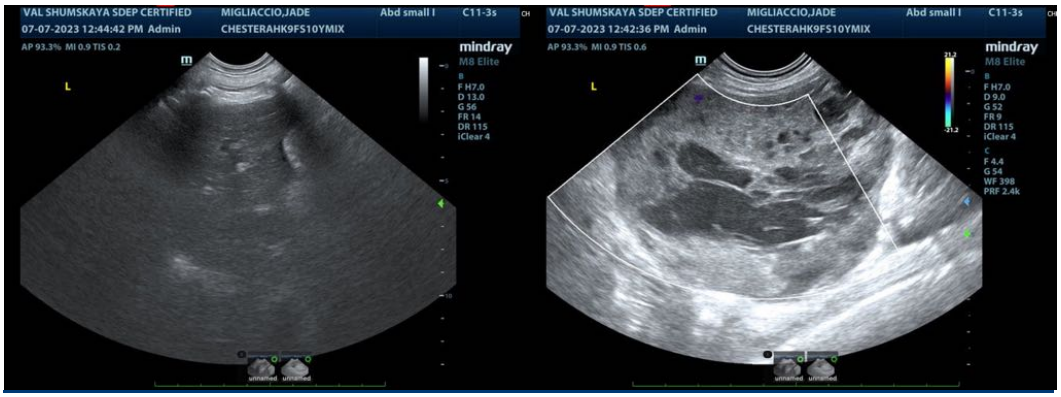

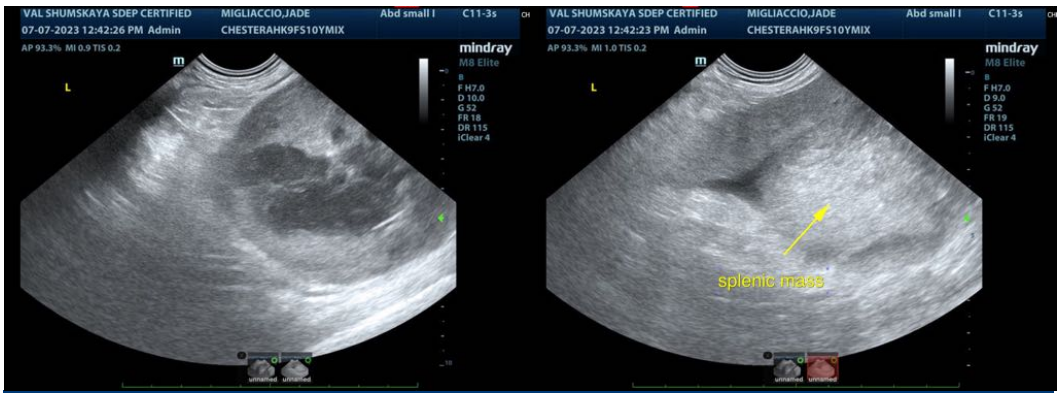

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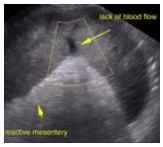
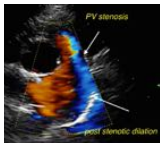
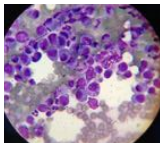
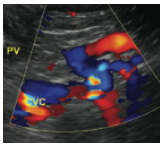

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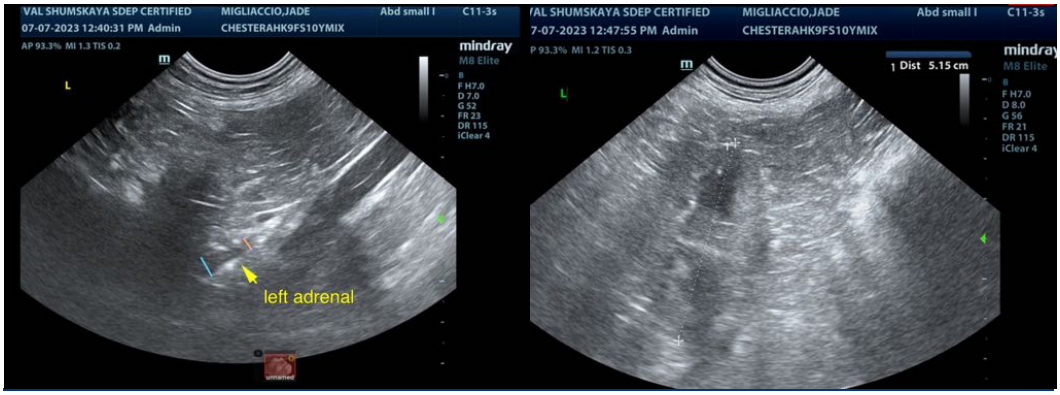

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
info@SonoPath.com