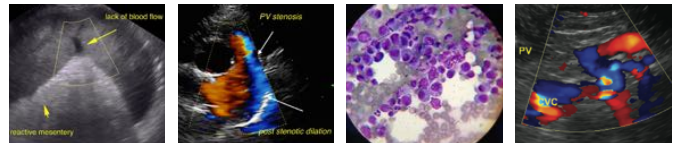




PATIENT	PRESENTING CLINICAL SIGNS
Sawyer Herman	History: High grade MCT disease staging. Hx-Complete excision 9/1/2022 . 3 view rad report noted normal thorax, no evidence of intrathoracic neoplasia. Current meds: Benadryl and Pepcid Abnormal PE/Chem/CBC/UA Results: ALKP 1452 (131 H)
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	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.
Mix	
SEX	The residual prostate was uniform and measured 1.0 cm.
Neutered male	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 right kidney measured 6.0 cm. The left kidney measured 6.02 cm.
AGE	
14 years	
WEIGHT	Adrenal Glands
35.5 lbs	The right adrenal gland was heterogenous and mildly irregular. Vena cava invasion was noted from the right adrenal gland. The vena cava invasion extended to approximately the diaphragmatic inlet. The right adrenal gland measured 3.03 x 1.86 cm at the cranial pole and 0.86 cm at the caudal pole. The right adrenal gland was significantly vascular. Some of the caval occupation may be thrombus, others mass. The left adrenal gland was normal in size and contour measuring 2.08 x 0.48 cm at the cranial pole and 0.5 cm at the caudal pole.
INTERPRETED BY	Spleen
Eric Lindquist, DMV DABVP, Cert. IVUSS	The spleen was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. A focal, hypoechoic, 0.68 cm mid body nodule was noted. These changes are consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active acute or chronic inflammatory, neoplastic, or infarctual changes was noted.
IMAGING PERFORMED BY	Liver
Shari Reffi, CVT	The left liver revealed an expansive, mixed echogenic nodular mass that measured 7.0 x 4.0 cm. The mass extended cranially to the diaphragm deviating the gallbladder medially and caudally. The right liver revealed nodules and moderately disruptive. The portal vein was unaffected. The gallbladder
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Budd Lake AH	
REFERRING VET	
Dr. Horn	
INVOICE	
39497	
DATE	
9/20/22	



PATIENT presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.
Sawyer Herman

SPECIES *Gastrointestinal*

Canine 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.

BREED

Mix

SEX

Neutered male 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.

AGE

14 years

WEIGHT

35.5 lbs

Pancreas

ULTRASONOGRAPHIC FINDINGS

Right adrenal mass with caval invasion with separate hepatic masses and nodules. There is a strong concern for metastatic disease. Pheochromocytoma of the right adrenal is suspected, carcinoma is possible.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The right adrenal pathology is the more prominent issue at this point. Serial blood pressure measurements are warranted. Palliative care for pheochromocytoma is indicated if urine catecholamine is positive. Some quality of life may be obtained in this patient depending upon the clinical status.

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

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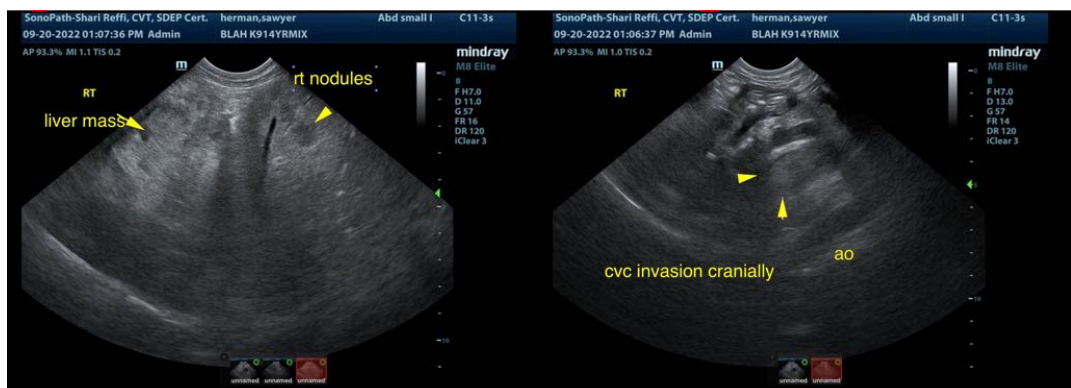
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PATIENT

Sawyer Herman

SPECIES

Canine

BREED

Mix

SEX

Neutered male

AGE

14 years

WEIGHT

35.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Budd Lake AH

REFERRING VET

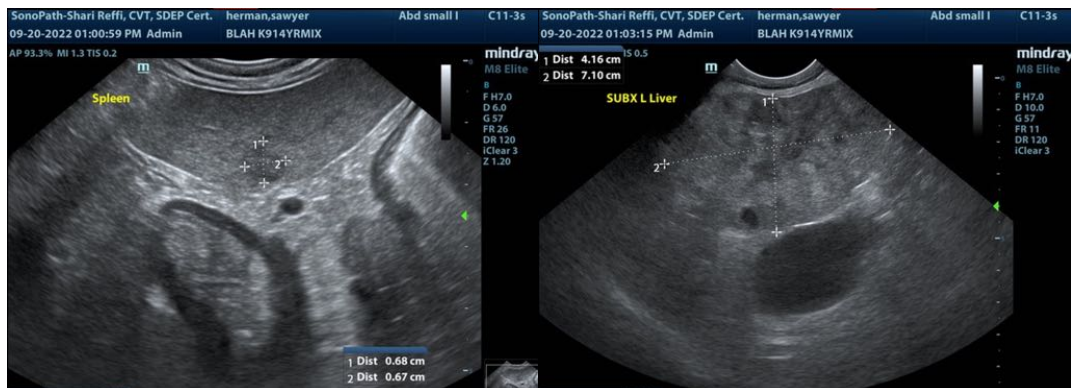
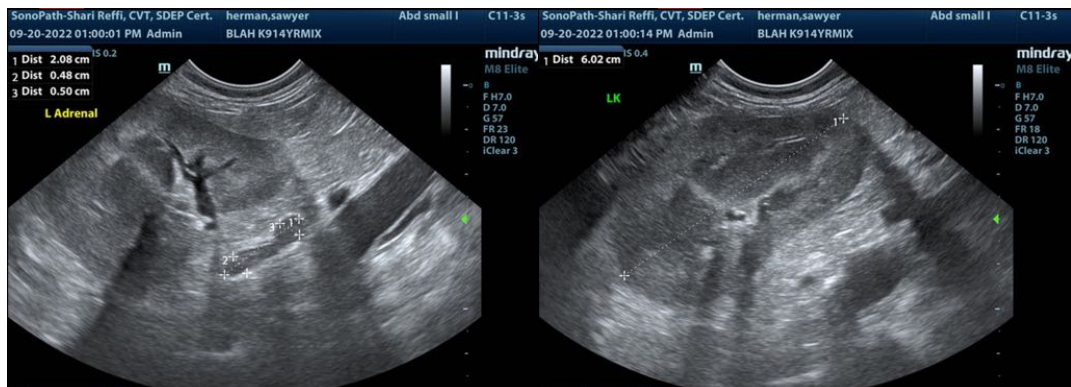
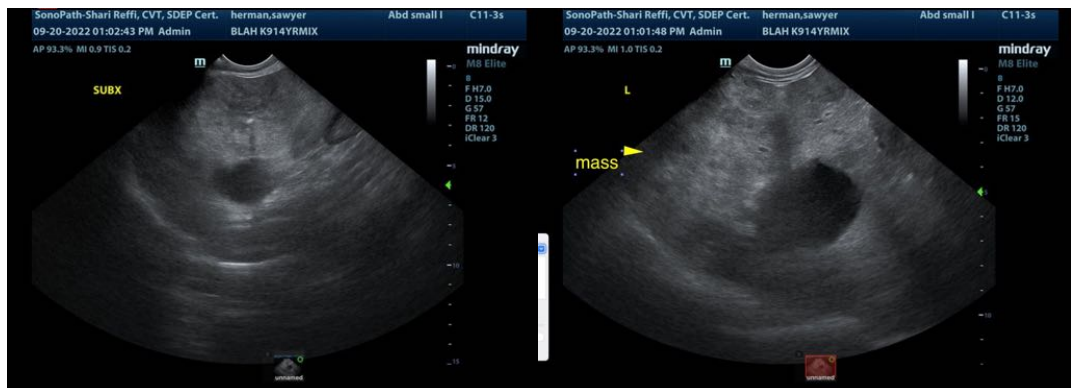
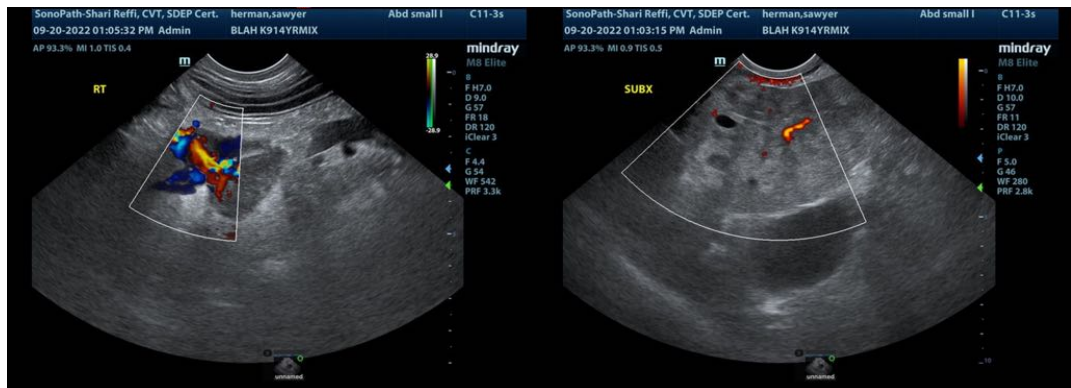
Dr. Horn

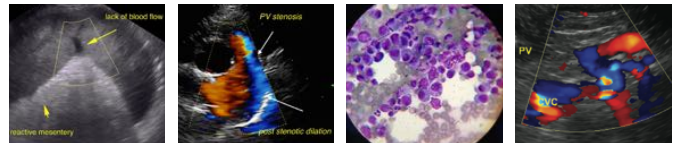
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PATIENT

Sawyer Herman

SPECIES

Canine

BREED

Mix

SEX

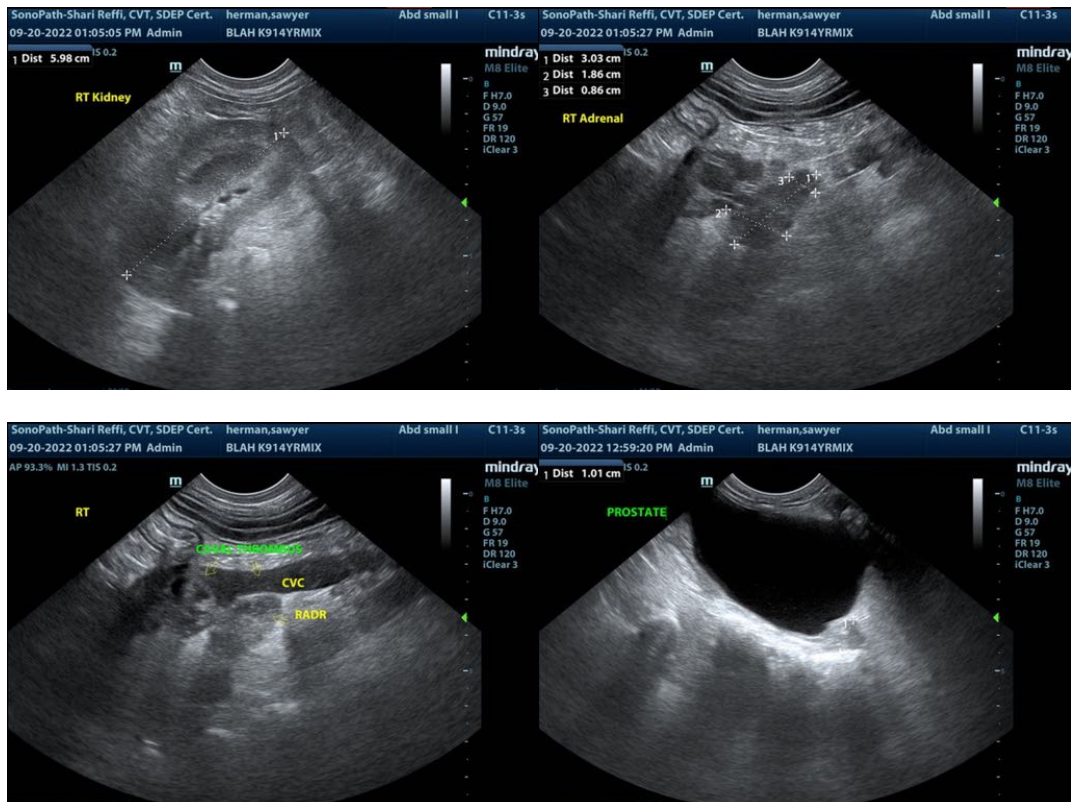
Neutered male

AGE

14 years

WEIGHT

35.5 lbs



INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Budd Lake AH

REFERRING VET

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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
Info@SonoPath.com