

PATIENT

Maya Gallagher

PRESENTING CLINICAL SIGNS

History: PU/PD, ravenous appetite, severe arthritis

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Severe OA, multiple large subcutaneous masses, tense abdomen, not allowing deep palpation RBC 5.11 HCT 37 Hg 12.5 Retic Hg 23.4 K+ 5.5 Na:K 27 ALT 2081 AST 197 AMY 1726 CK 779 USG 1.010 BAs pending; FNA mass noted during AUS; cytology pending

BREED

Labrador Retr

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Female Spayed

Urinary System

The urinary bladder mucosa, trigone, and visible urethra are normal in thickness and there is no evidence of mucosal irregularities. The bladder lumen is mildly distended with a moderate volume of anechoic urine and bladder thickness is considered normal for volume of urine.

AGE

14 years

The left kidney is normal in size, shape and architecture with smooth peripheral margins and measures 7.04 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

The right kidney is normal in size, shape and architecture with smooth peripheral margins and measures 6.94 cm. There is normal corticomedullary distinction and normal echogenicity. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

WEIGHT

NP

Adrenal Glands

The left adrenal gland is normal in size at 0.66 cm. The left adrenal gland has normal in shape and is normal in appearance and echogenicity.

INTERPRETED BY

Jessica Midence, DVM,
DACVIM (SAIM)

The area of the right adrenal gland is normal in size and did not have any significant abnormalities.

Spleen

The splenic echotexture is homogeneous with parenchyma isoechoic to liver and renal cortical parenchyma. The capsule is smooth with no irregularities. The splenic vasculature is normal without signs of congestion or thrombosis.

IMAGING PERFORMED BY

Gillian Striano-Kaplan

Liver

The liver is subjectively enlarged with normal contours, structure, with smooth and rounded peripheral margins. The echogenicity appears hyperechoic with decreased portal markings. There is an enormous complex mass (11.76 x 13.73 cm) suspected to be arising from the right liver, though it is difficult to discern given the size of the mass. The mass is complex and round with distinct borders. The majority of the mass is hyperechoic with subtle mottling, but there is a large cavitated area. The visible portions of the vasculature and biliary tract appear normal. No pathological hepatic lymphadenopathy observed.

HOSPITAL NAME

Ramsey VH

REFERRING VET

Gillian Striano-Kaplan

The gallbladder lumen is moderately distended. The wall is a normal thickness and smooth. Luminal contents show a moderate volume of dependent echogenic debris. The cystic and common bile ducts are not visible.

INVOICE

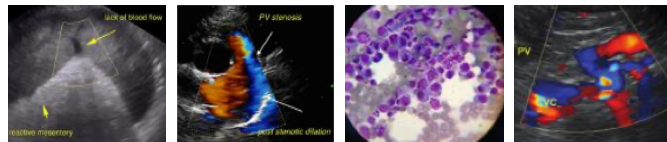
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Gastrointestinal Tract

The gastric lumen is empty. The stomach wall measures at the high end of normal (0.45 cm), but some sections measure as thick as 1.00 cm. The muscularis layer is thickened diffusely, with subtle hyperechoic striations, which could represent edema. There is otherwise normal gastric wall layering. There are no masses or focal lesions observed and the pyloric outflow tract appears patent.

DATE

4.7.23



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The visualized areas of duodenum, jejunum and ileum appear normal in thickness. The duodenum is normal with distinct wall layering. The remainder of the small intestines are normal with normal wall layering. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. No focal lesions observed.

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The sections of colon are visualized with formed fecal material and gas shadowing distally.

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Pancreas

The area of the pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid. The visible pancreatic duct was normal.

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Female Spayed

Peritoneum

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The omentum is of normal uniform echogenicity.

ULTRASONOGRAPHIC FINDINGS

Findings

- Enormous liver mass
- Gastritis versus gastric edema

AGE

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WEIGHT

NP

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver mass is enormous and does not have distinct borders. This mass may be a hepatocellular carcinoma, versus biliary cystadenoma, versus histiocytic sarcoma, versus other carcinoma, etc. There is a cavitated area that could represent an area of bleeding or an area of necrosis. CT scan would be needed to evaluate for the possibility of surgical removal, although just based on the size, there is concern it could not be removed with a single lobectomy.

The appearance of the stomach would support a chronic gastritis/enteropathy. Correlate with clinical signs.

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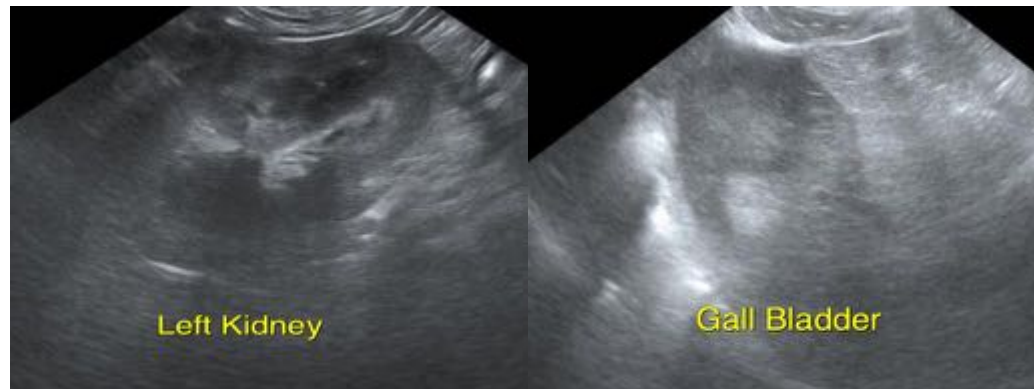
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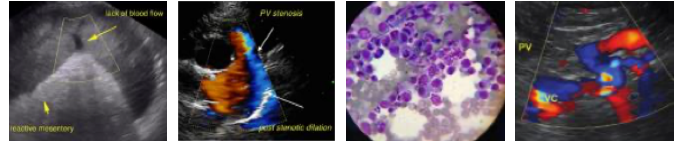
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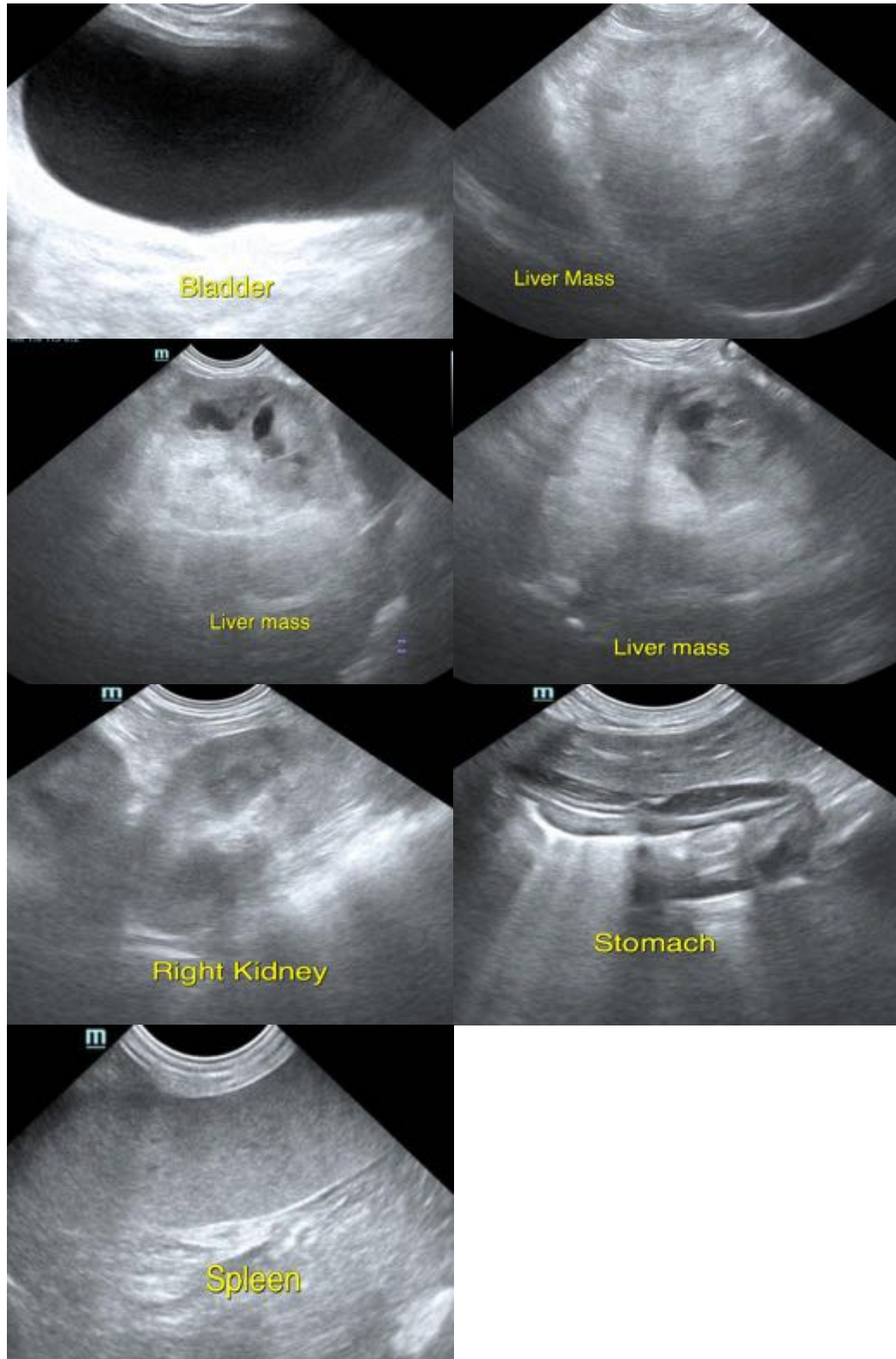
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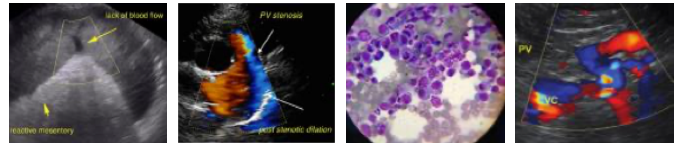
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

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