



PATIENT

Panzer Kosen

PRESENTING CLINICAL SIGNS

Weight loss, lethargic, vomiting, diarrhea, poor appetite
Abnormal PE/Chem/CBC/UA Results: Blood NSF

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Alaskan Malamute

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

SEX

Neutered Male

The prostate is normal in size (1.5 cm) and shape for this neutered male dog. The parenchyma is homogenous and the external margins are smooth. The prostatic urethra appears normal with no evidence of irregularity, invasion, mass effect or calculi.

AGE

9 Years

The left kidney has a normal shape and size (7.16 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

91.5

The right kidney has a normal shape and size (6.6 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

Adrenal Glands

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

There is a large mass effect in the area of the left adrenal gland. There appear to be two portions. The larger of the two measures 3.39 cm x 7.94 cm. It is oblong and hypoechoic and lies cranial to the left kidney. Adjacent to that mass is a secondary mass that measures 3.7 cm x 5.5 cm. I suspect there is vascular invasion in this area. There is free abdominal fluid. A normal left adrenal is not visualized.

IMAGING PERFORMED BY

JK

The region of the right adrenal (between right cranial kidney and vena cava) is unremarkable, but the adrenal is not distinctly visualized. No evidence of a mass effect.

HOSPITAL NAME

Hamburg Vet Clinic

Spleen

The spleen is subjectively normal in size, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

Liver

REFERRING VET

Dr. DenHeyer

The liver is large in size, and echogenicity with smooth peripheral margins. The parenchyma is heterogenous in echotexture with subtle, indistinct focal mottling. Dilated congested vessels are noted. No focal nodules or cystic lesions are observed.

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The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. There is mild dependent echogenic debris present. The cystic and common bile ducts appear normal.

DATE

10/6/21

Gastrointestinal



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The stomach contains minimal luminal contents. It measures at a normal thickness of <0.7cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

SPECIES

Canine

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. The duodenum measured as normal (between 0.3-0.5cm in wall thickness) and the jejunum measured as normal (between 0.2-0.47cm.)

BREED

Alaskan Malamute

Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

SEX

Neutered Male

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

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.

AGE

9 Years

Free Abdomen

There is a large amount of anechoic free fluid. No obvious mesenteric lymphadenopathy. The omentum is generally of increased echogenicity.

WEIGHT

91.5

Other

A large amount of pleural effusion is visualized cranial to the diaphragm with irregular tissue very concerning for metastatic lesions

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There is a very large dilated hypoechoic structure caudal to the liver measuring 7.47X6.4cm. This is most consistent with a severely dilated obstructed vena cava with a large hyperechoic mass effect within it. This is most consistent with severe vascular obstruction due to an invasive adrenal mass (pheochromocytoma most likely).

IMAGING PERFORMED BY

JK

ULTRASONOGRAPHIC FINDINGS

- Large, hypoechoic mass cranial to left kidney – suspect adrenal origin. Left adrenomegaly This is very concerning for neoplasia-most consistent with an invasive pheochromocytoma. There is concurrent vascular invasion and severe vascular occlusion of the vena cava.

HOSPITAL NAME

Hamburg Vet Clinic

- Large, heterogeneous, congested liver – This appearance could be due to infiltrative disease, but is more likely due to congestion due to vascular occlusion from the occluded vena cava.

REFERRING VET

Dr. DenHeyer

- Large volume pleural effusion with suspected intrathoracic metastasis

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- Large volume peritoneal effusion.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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There is a large mass effect cranial to the left kidney. This is most consistent with a large invasive adrenal tumor-most likely pheochromocytoma. There is free fluid in the abdomen and pleural effusion



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present. There is evidence of venous congestion in the liver secondary to a large invasive mass in the vena cava.

SPECIES

Canine

Additionally there is a large amount of pleural effusion visualized with abnormal tissue in the thorax concerning for metastatic lesions.

BREED

Alaskan Malamute

I am concerned that this would be a very challenging surgery, and prognosis is poor.

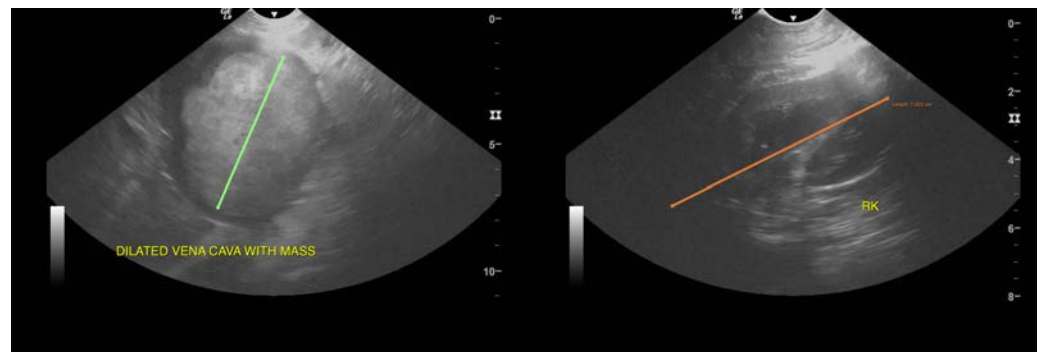
SEX

Neutered Male

If pursual of the left cranial abdominal mass is considered. Recommend 3 view thorax. Thoracocentesis and submission of pleural fluid and advanced imaging of the thorax and abdomen to see if surgery is an option. Additionally a blood pressure and catecholamine levels could be considered.

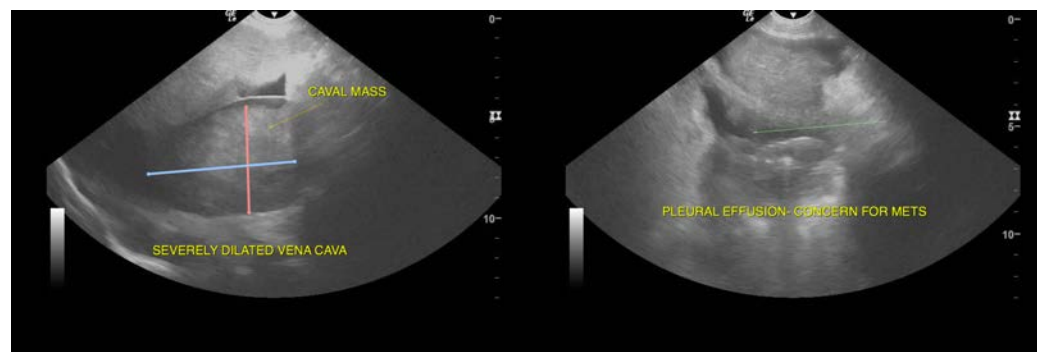
AGE

9 Years



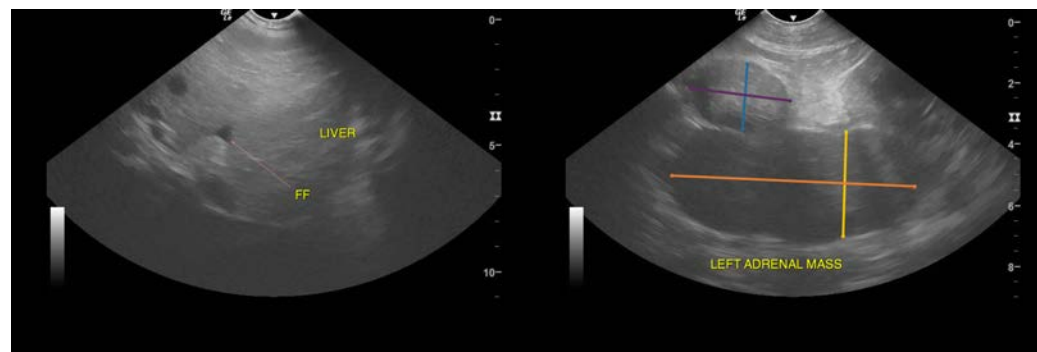
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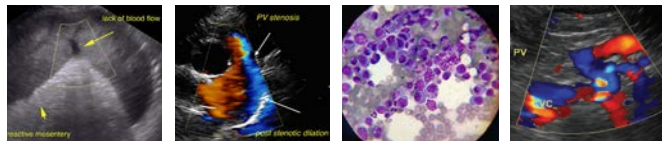
Dr. DenHeyer

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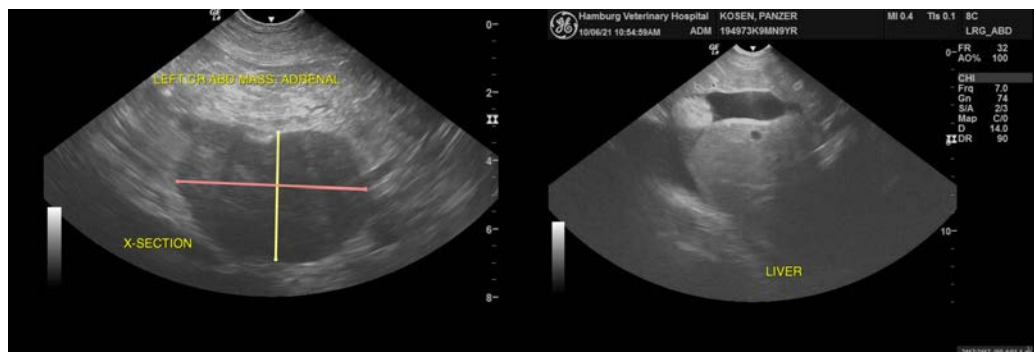
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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