



PATIENT PRESENTING CLINICAL SIGNS

Finn Chaput History: Abdomen: Abnormal: no obvious pain; gut sounds WNL Rectal exam-no blood or foreign material Appearance: Abnormal: QAR Was brighter in hospital and barking; voided large volume of urine in hospital Current Medications Metronidazole

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: n house bldwork shows decreased RBC, Hgb and HCT consistent with m2 anemia ; also thrombocytopenia ; biochem shows mild hypoglobulinemia as well as mild hyponatremia (vomiting) Radiographic Findings Thorax Lat : NSF in lateral view of thorax but mild hepatomegaly and slightly rounded SOL cranial abdomen VD Ab : Suspicious shadow RT cranial abdominal quadrant Lat Ab : RT lateral abdomen- irregular radio opaque shadow in cranial abdomen LT lateral abdomen minimal gaseous distension in gut loops

BREED

Golden Retriever

SEX

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Spayed Female

Urinary System

AGE

The urinary bladder is moderately distended with anechoic urine. The bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2.0 cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

13 Years

WEIGHT

The left kidney has a normal shape and size (6.02 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 hydroureter. Renal vasculature is normal.

74 Pounds

The right kidney has a normal shape and size (6.82 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 hydroureter. Renal vasculature is normal.

INTERPRETED BY

Kathleen Sennello DVM,
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(Small Animal Internal
Medicine)

IMAGING

PERFORMED BY

Kelly Reschny

Adrenal Glands

The left adrenal gland is normal in size measuring 0.75 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

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The right adrenal gland is normal in size measuring 0.73 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

REFERRING VET

Dr. Toles

Spleen

The spleen is large and irregular. The blood flow through the hilus and splenic parenchyma appears normal. There is a large mixed echogenicity, partially cavitated mass effect, arising from the spleen, measuring 6.23 cm x 5.7 cm.

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Liver

The liver is subjectively (normal, large, small, normal/large, normal/small) in size, and echogenicity with smooth peripheral margins. The parenchyma is heterogenous in echotexture with subtle, indistinct focal mottling. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

DATE

2/24/23



PATIENT

Finn Chaput

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are primarily anechoic. The cystic and common bile ducts are normal/not visible.

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Gastrointestinal

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.

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Golden Retriever

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 (0.56 cm) and the jejunum measured as normal (0.4 cm) Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

SEX

Spayed Female

AGE

13 Years

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.

WEIGHT

74 Pounds

Pancreas

The region 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.

Free Abdomen

There is a small amount of free abdominal fluid. No lymphadenopathy is visualized. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is hyperechoic around the large splenic mass.

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Other

The right auricle and pericardium were visualized and were unremarkable. No obvious pathology is visualized. If cardiac function evaluation is desired a full echocardiogram is warranted.

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ULTRASONOGRAPHIC FINDINGS

REFERRING VET

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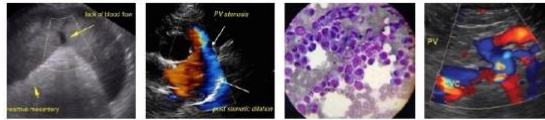
- Large mixed echogenicity, mildly cavitated splenic mass. A large, heterogenous mass with cavitations is present within the splenic parenchyma. The mass distorts the splenic capsule. Differentials for the mass include neoplasia (e.g., hemangiosarcoma, hemangioma), hematoma, abscess, other. A neoplastic process is favored.
- Heterogenous liver. The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, nodular hyperplasia, inflammatory/immune-mediated disease, fibrosis, extramedullary hematopoiesis, toxic hepatopathy (e.g., copper), infiltrative neoplasia (less likely) or other hepatopathy.
- Small volume free abdominal fluid. Recommend sampling, as this could be consistent with a hemoabdomen.

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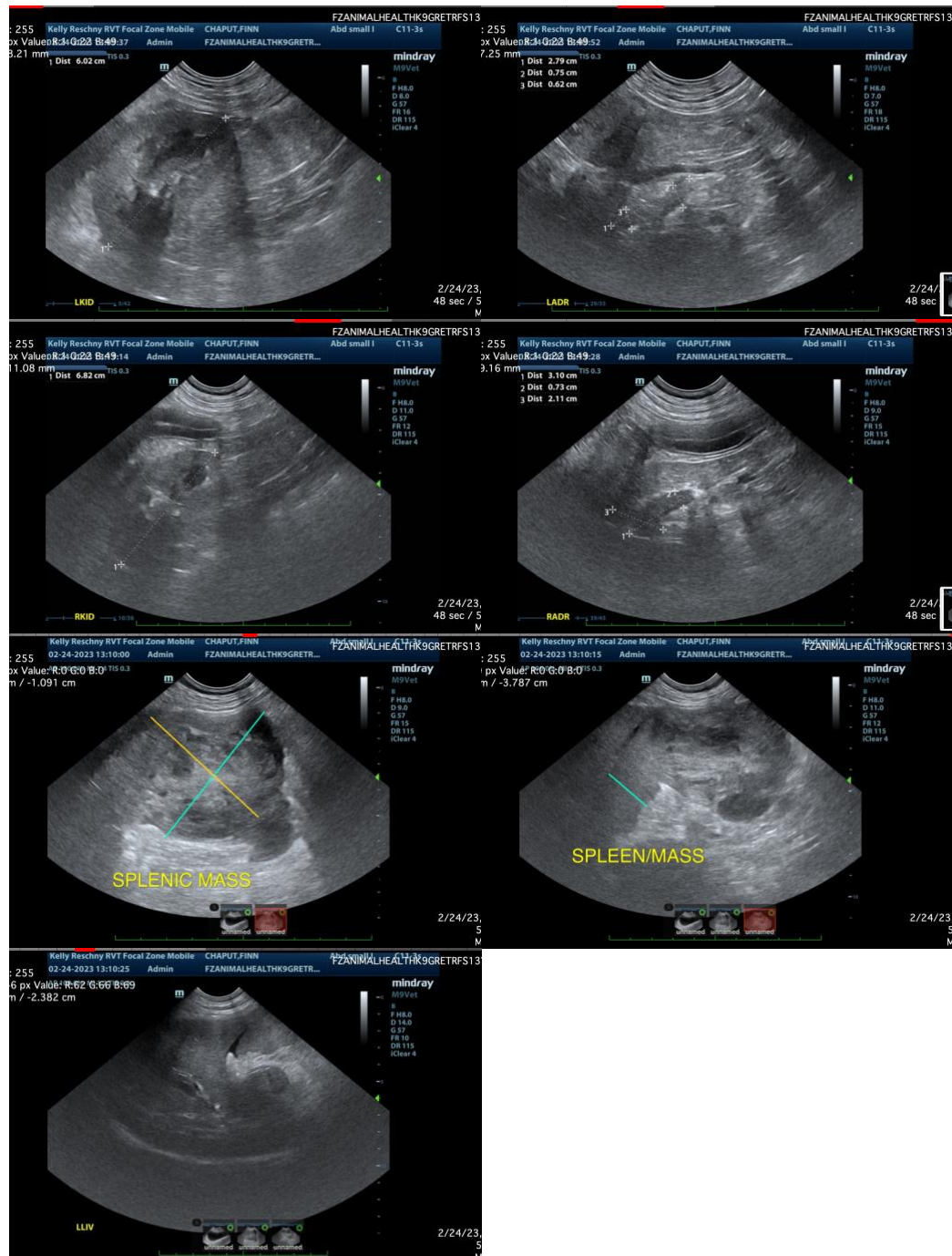
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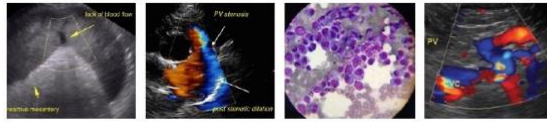
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a large mixed echogenicity, somewhat cavitated mass lesion involving the spleen in addition to some free abdominal fluid. There is concern for a possible hemoabdomen. Recommend a splenectomy for both diagnostic and therapeutic purposes, provided three view thoracic radiographs are free of any lesions. The liver appears somewhat heterogenous. No focal nodules are visualized. Further evaluation of the liver should be performed at the time of surgery.





PATIENT

Finn Chaput

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.

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

Golden Retriever

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