

**DATE PRESENTING CLINICAL SIGNS**

3/30/22 Pet was seen at Pet ER 3/25/22- radiographs showed right cranial abdominal mass, suspect kidney mass. Abdominal ultrasound was recommended for more information.

**PATIENT**

Phoebe Harris Smith

Current Medications: None that I am aware of (I have not gotten full report from Pet ER).  
Date of Previous IntraPet Ultrasound: No previous.  
Sedation: Not required to complete full diagnostic ultrasound.  
Stat Report: Not requested.

**SPECIES**

Canine

**BREED**

Bichon Frise

**SEX**

Spayed Female

**AGE**

9/15/13

**WEIGHT**

16 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Stephanie Pearce  
RDMS, RVT

**HOSPITAL NAME**

Banfield Westminster

**REFERRING VET**

Dr. Carroll

**INVOICE**

36593

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

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.

The left kidney has a normal shape and size (3.95 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.

The right kidney is large, measuring 7.25 cm in length and is somewhat irregular in shape. There is a large anechoic cystic structure rising from the cranial pole of the left kidney measuring 6.11 cm x 5.33 cm. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

**Adrenal Glands**

The left adrenal gland is normal in size measuring 0.45 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.

The right adrenal gland is normal in size measuring 0.69 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.

**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**

The liver is subjectively normal in size and echogenicity. It is somewhat rounded and irregular in shape. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. The caudal right aspect of the liver appears somewhat rounded and slightly hyperechoic in echotexture. This could be consistent with an ill-defined mass effect or with a rounded liver lobe. The area of the rounded right liver lobe measured 5.8 cm in diameter. Consider monitoring and fine needle aspirate.

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. There is a moderate amount of non-organized echogenic debris. The cystic and common bile ducts are normal/not visible.

### ***Gastrointestinal***

The stomach contains mild fluid. 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.

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. Jejunum wall measured 0.35 cm. peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

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 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***

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

### ***Other***

There is a small hyperechoic shadowing structure visualized between the urinary bladder and the colon. This is most consistent with a mineralized uterine stump.

## **PRIMARY FINDINGS**

- Large anechoic cyst arising from the cranial pole of the right kidney - most consistent with a benign renal cyst.
- Rounded, hyperechoic right liver lobe – This could be a normal anatomic variant or an ill-defined mass effect. Consider a fine needle aspirate of the right liver lobe.

## **SECONDARY FINDINGS**

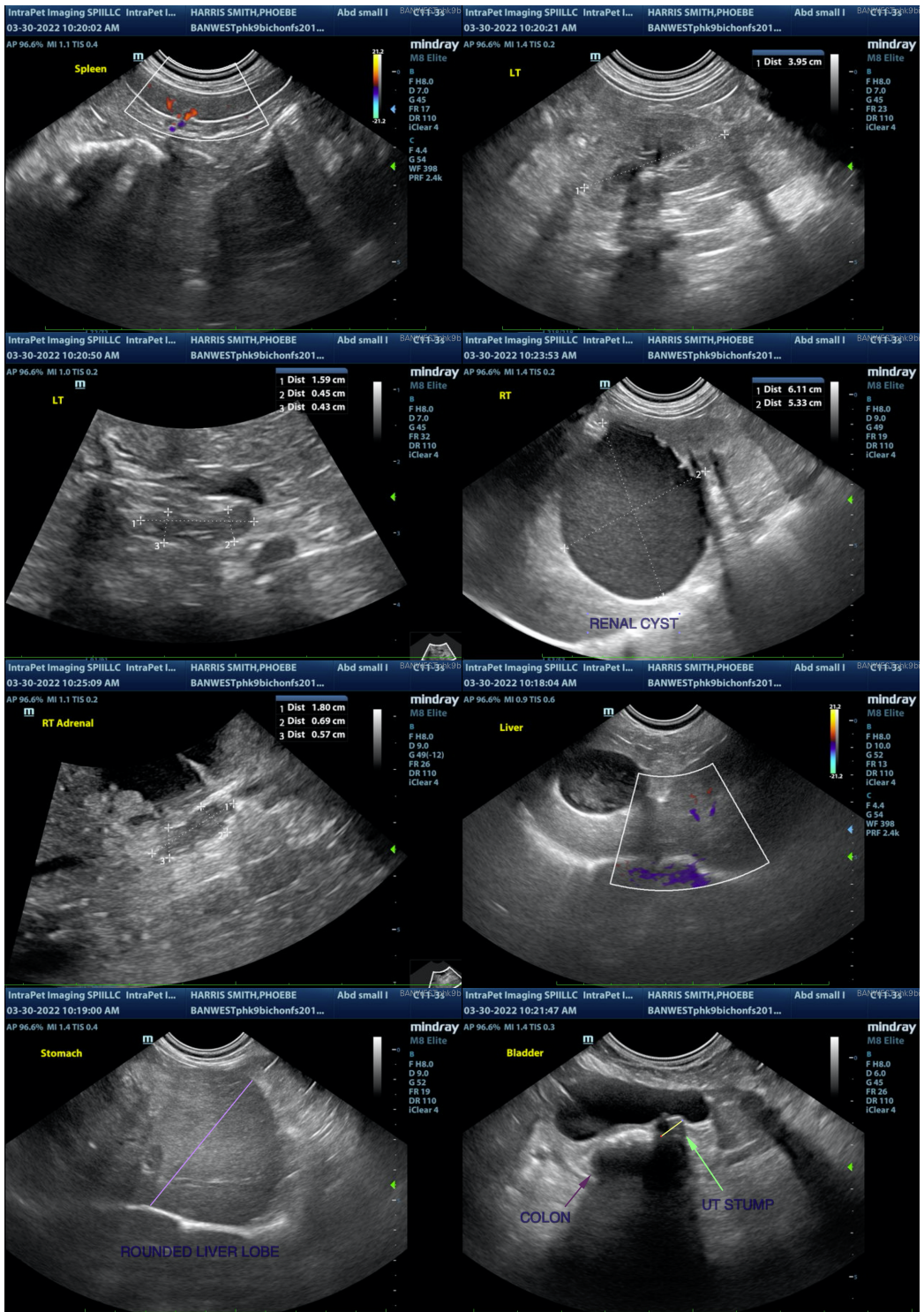
- Mineralized uterine stump – This is likely an incidental finding.

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mass effect visualized on radiographs is likely the large renal cyst observed in today's study. This is likely a benign finding, and hopefully incidental. These can be common in older dogs and typically do not require treatment unless they are large enough to become clinical, in which case percutaneous drainage can be considered, although in my experience, these typically refill fairly quickly.

The right lobe of the liver appears somewhat rounded and irregular. This is a very subtle finding and could be "normal" for this individual. Options include continued monitoring and following liver values on bloodwork. Alternately, a fine needle aspirate of the liver or even a CT scan could better evaluate this area.

There is a small area of mineralization between the colon and urinary bladder, which is most likely consistent with a small mineralized uterine stump. This is likely an incidental finding.



**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.

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