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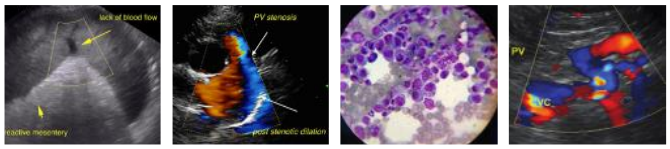

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Brandy Jackowitz

SPECIES

Canine

BREED

Lab Retriever X

SEX

Spayed Female

AGE

12 Years

WEIGHT

41.5 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Megan Cassels-Conway

HOSPITAL NAME

Central Broward AH

REFERRING VET

Dr. Janeen Lezcano

INVOICE

37771

DATE

5/19/22

PRESENTING CLINICAL SIGNS

FOCAL AUS, to re-evaluate findings on previous AUS dated 10/18/2021 (please refer to previous report). P is doing well so far. No v/d/c/s. P has lost weight but is also on soloxine and the post T4 is high in the most recent blood work.
Abnormal PE/Chem/CBC/UA Results: 5/18: FASTED: CBC: plt ct: WNL, Chem: ALP: 215H, triglyc: 767H, post -T4: 5.2H, UA: SG: 1.018, 3+ prot, quiet sediment (cysto).

LIMITED ULTRASONOGRAPHIC EXAMINATION

Adrenal Glands

The left adrenal gland is large in size and somewhat irregular. It is visualized in its normal position cranial to the left renal artery. It is irregular in appearance in that it is round and mottled with a mass effect measuring 2.65 cm x 3.01 cm (previous measurement on 10/8/21 was 1.31 cm x 0.84 cm). No overt vascular invasion is visualized.

The right adrenal gland is normal in size measuring 0.59 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.

Liver

The liver is subjectively normal 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.

The gall bladder lumen is significantly distended. Some areas of the wall appear mildly thickened with adherent debris. There is a large amount of primarily non-organized echogenic debris, but some of this material near the edge has become hypoechoic and has some mucosal stranding, consistent with an early mucocele There is no evidence of bile duct dilation.

ULTRASONOGRAPHIC FINDINGS

- Left-sided adrenal mass – This lesion appears to be somewhat larger than the last scan. There is no overt vascular invasion visualized.
- Heterogeneous 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.
- Large gallbladder sludge with early mucocele development.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Today's scan appears relatively similar to the scan reported 10/8/21. The adrenal mass is possibly larger than the previous exam. Consider a contrast CT scan, bot to further evaluate the left adrenal mass and the gallbladder. The gallbladder changes appear stable. Recommend continued medical management for the gallbladder disease with Ursodiol +/- antibiotics, Denamarin, etc. Consider 3-view thoracic radiographs and additional workup for the adrenal nodule as previously indicated if desired.

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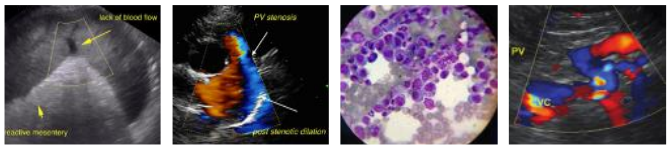

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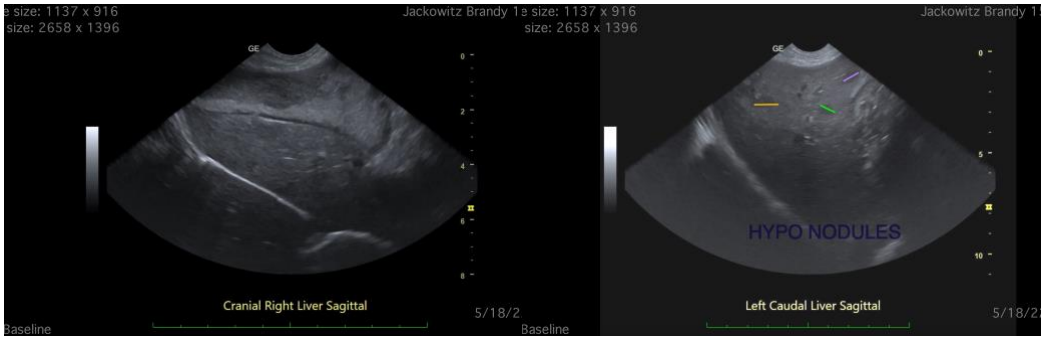

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

kathleen.sennello@sonopath.com