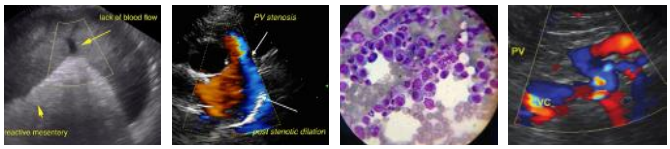
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Tyson Otero

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

10 yr

WEIGHT

69.5 lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Megan Cassels-Conway DVM

HOSPITAL NAME

Central Broward Animal Hospital

REFERRING VET

Dr. Lezcano DVM

INVOICE

10685ag

DATE

05/26/2022

PRESENTING CLINICAL SIGNS

History: P presented for biannual wellness exam in 2/24/22 o reported PU/PD, chronic r/o infectious, metabolic, endocrine, other, intermittent gastroenteritis, w anorexia, hx of mild hyperglob. Further mild inc in ALP noted with repeat blood work. P also has hx of food allergies.

Abnormal PE/Chem/CBC/UA Results: 5/25/22, fasted: UA: SG: 1.025. 1+ prot, quiet sediment 5/17/22, non fasted: CBC: NSF, miniChem: ALP: 344, ALT: 141, glob: 3.7, 2/24/22, non fasted: CBC: eos: 1368, Chem: glob: 3.7, ALT: 117, ALP: 255, choles: 474, trilgyc: 421, T4: 2.1, UA: SG: 1.013, quiet sediment, accuplex: ALL NEG, no further work up pursued at that time.

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. 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 left kidney measured 7.06 cm in length.

The right kidney has a normal shape and size. 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 measured 7.05 cm in length.

The prostate is normal in size (0.85 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.

Adrenal Glands

The left adrenal gland is normal in size measuring 0.7 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.

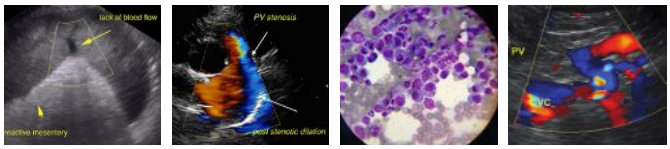
The right adrenal gland is normal in size measuring 0.8 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

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 enlarged 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. There are numerous patchy ill defined hypoechoic regions in the liver, two such areas measured 1.8 cm and 1.49 cm.



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

PATIENT

Tyson Otero

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

10 yr

WEIGHT

69.5 lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Megan Cassels-Conway DVM

HOSPITAL NAME

Central Broward Animal Hospital

REFERRING VET

Dr. Lezcano DVM

INVOICE

10685ag

DATE

05/26/2022

The gallbladder 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.

Gastrointestinal

The stomach contains large shadowing material within the gastric lumen. 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. The duodenum measured as normal (between 0.3-0.5cm in wall thickness) and the jejunum measured as normal (between 0.2-0.47cm.) Visualized 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.

ULTRASONOGRAPHIC FINDINGS

- 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. The lesions observed are relatively subtle and do no disrupt the hepatic architecture/parenchyma. A benign process is suspected although an underlying neoplastic process cannot be excluded.
- Shadowing material within the gastric lumen. Correlate with feedings history and abdominal radiographs. If adequately fasted, then consider such differentials as delayed gastric emptying or a partial outflow tract obstruction (none visualized).

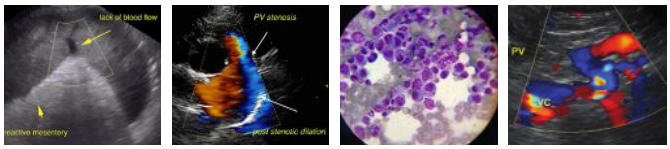
INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver is large and heterogenous with ill-defined hypoechoic lesions. These trend toward benign appearance but an underlying neoplastic cannot be excluded.

- Consider a pre and post prandial bile acids to evaluate liver function
- Consider a FNA of the liver
- If liver function is normal and no significant abnormalities are noted on cytology, then consider adrenal function testing if the clinical presentation of the patient is consistent with Cushing's.

If this patient's presentation is not consistent with Cushing's, recommend UA and C/S to rule out a UTI, quantitating water intake to confirm PU/PD and further evaluation for PU/PD (confirm a normal Ca, etc)

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Tyson Otero

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

10 yr

WEIGHT

69.5 lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Megan Cassels-Conway DVM

HOSPITAL NAME

Central Broward Animal Hospital

REFERRING VET

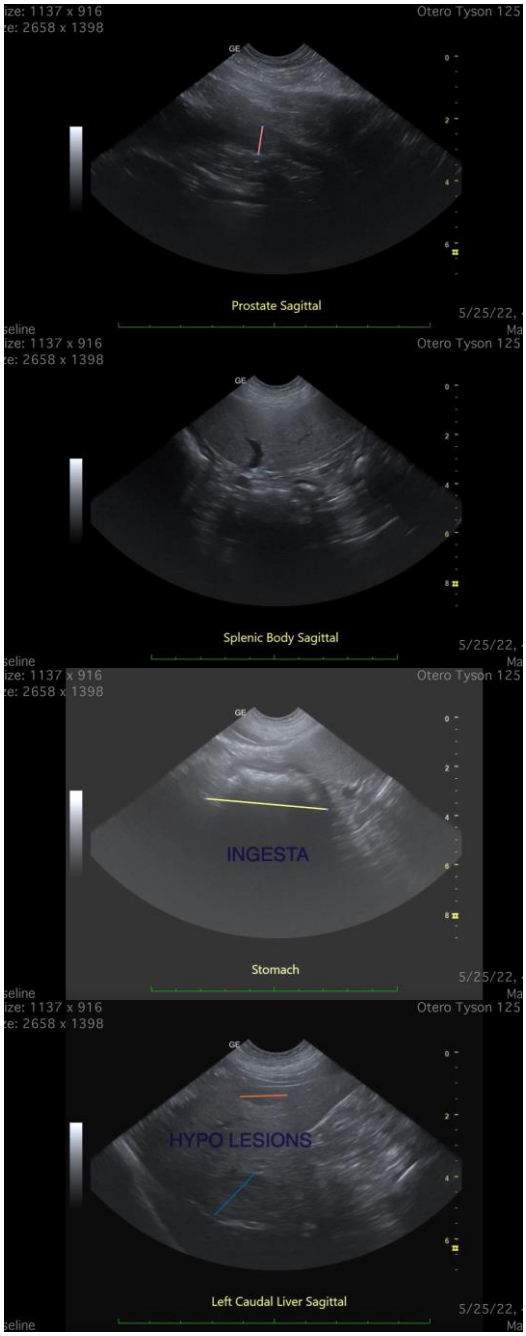
Dr. Lezcano DVM

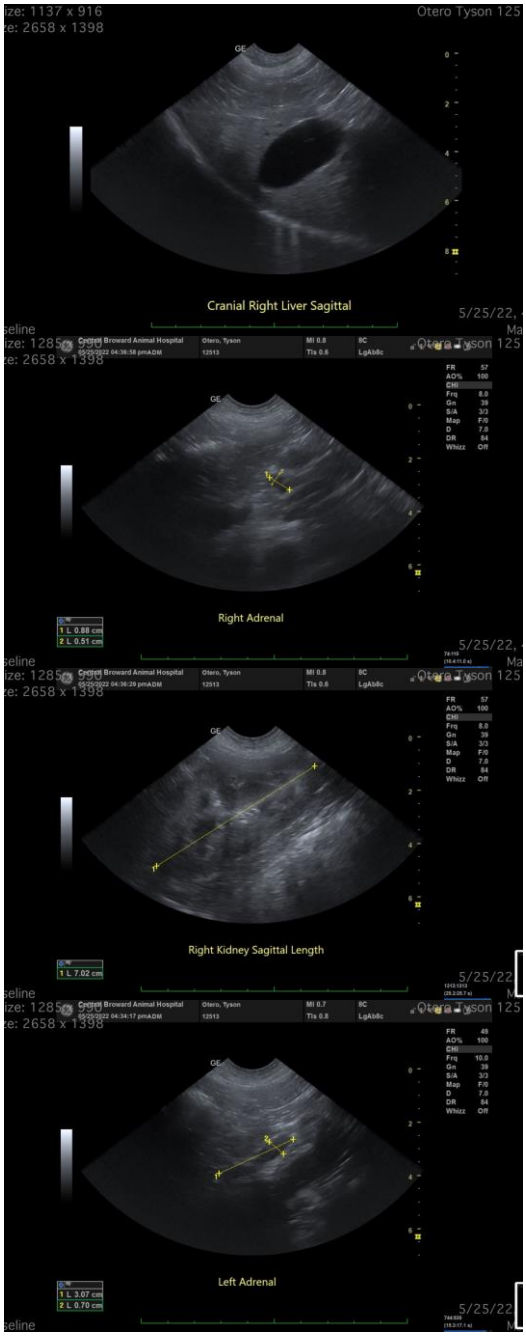
INVOICE

10685ag

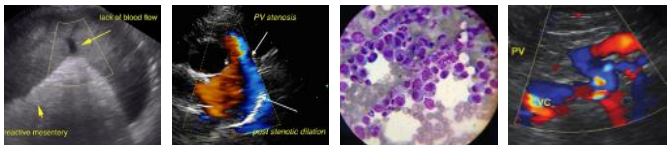
DATE

05/26/2022





SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



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

PATIENT

Tyson Otero

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

10 yr

WEIGHT

69.5 lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Megan Cassels-Conway DVM

HOSPITAL NAME

Central Broward Animal Hospital

REFERRING VET

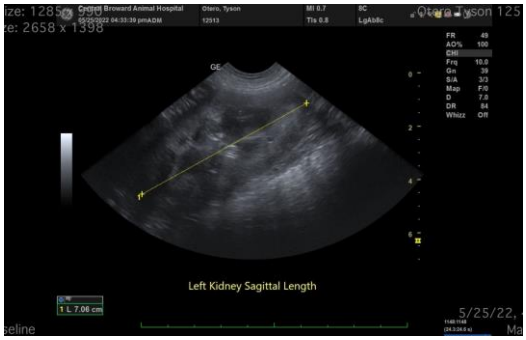
Dr. Lezcano DVM

INVOICE

10685ag

DATE

05/26/2022



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