



PATIENT PRESENTING CLINICAL SIGNS

Ellie Cruz Elevated LEZ. Liver looked enlarged on rads. Rec ABD US.

SPECIES Abnormal PE/Chem/CBC/UA Results: ALT 247, ALP 256

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

Pit Bull x Boxer

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

Spayed Female

The left kidney has a normal shape and size (7.41 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

AGE

13 Years

The right kidney has a normal shape and size (7.94 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

63 Pounds

INTERPRETED BY

Adrenal Glands

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

The left adrenal gland is normal in size measuring 0.57 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 0.49 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.

IMAGING PERFORMED BY

Jessica Miller, RDMS

Spleen

HOSPITAL NAME

Animal General on the
Hudson

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.

REFERRING VET

Dr. Ng

Liver

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The liver is large and irregular with rounded margins. The parenchyma is heterogenous in echotexture with subtle, indistinct focal mottling. The visible portions of the vasculature and biliary tract appear normal. The caudal left aspect of the liver appears rounded and isoechoic, almost forming a mass effect. this area measures 8.05 cm x 5.6 cm.

DATE

8/16/23

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



PATIENT *Gastrointestinal*

Ellie Cruz The stomach contains mild shadowing ingesta. 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. Duodenum wall measures 0.51 cm. Jejunum wall measures 0.28 cm. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

BREED

Pit Bull x Boxer

SEX

Spayed Female

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.

AGE

13 Years

Pancreas

The pancreas is prominent and mottled compared to the surrounding isoechoic mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

WEIGHT

63 Pounds

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. The sublumbar lymph nodes appear large and cystic, measuring 1.46 cm x 2.6 cm and 1.9 cm x 2.29 cm. The omentum is generally of normal echogenicity.

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Medicine)

ULTRASONOGRAPHIC FINDINGS

- Prominent, mottled pancreas – The pancreatic changes are most consistent with mild pancreatitis or a recent episode of pancreatic inflammation.
- Large, rounded, heterogeneous liver with an ill-defined, rounded mass effect/liver lobe – 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 nature of the rounded area of liver is uncertain. This could represent a rounded liver lobe or a primary hepatic mass lesion (seems less likely).
- Enlarged, cystic sublumbar lymph nodes – The moderate mesenteric lymphadenopathy could be concerning for a neoplastic process, although you can see significant lymphadenopathy in some cases of autoimmune/inflammatory disease, infectious disease (tick born disease-such as bartonella, fungal infections, FIP (cats)) etc. A fine needle aspirate with cytology is recommended for further evaluation.

IMAGING PERFORMED BY

Jessica Miller, RDMS

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver is large, heterogeneous and rounded with an ill-defined mass effect on the left caudal aspect of the liver, which could be an extension of the rounded large liver or be a primary hepatic mass lesion (this seems less likely). Consider a fine needle aspirate of this region of the liver. Additionally, you could consider a liver function test to further evaluate the liver enzyme elevation reported.



PATIENT

Ellie Cruz

The sublumbar lymph nodes are large and slightly cystic. This is concerning, as they appear slightly more prominent than a reactive lymph node would appear. Recommend a thorough digital rectal exam, looking for any mass lesions (anal glands). Additionally, carefully exam the pelvic limbs for any cutaneous mass lesions.

SPECIES

Canine

If a source cannot be identified, recommend continued monitoring of these lesions. Sampling could be considered, but the proximity to the great vessels at this time is concerning.

BREED

Pit Bull x Boxer

The left limb of the pancreas appears prominent but not overtly enlarged. Findings are likely consistent with pancreatic remodeling secondary to previous episodes of pancreatic inflammation, but mild current inflammation cannot be ruled out.

SEX

Spayed Female

Recommend three view thoracic radiographs to evaluate for possible concurrent thoracic disease/involvement.

AGE

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HOSPITAL NAME

Animal General on the Hudson

REFERRING VET

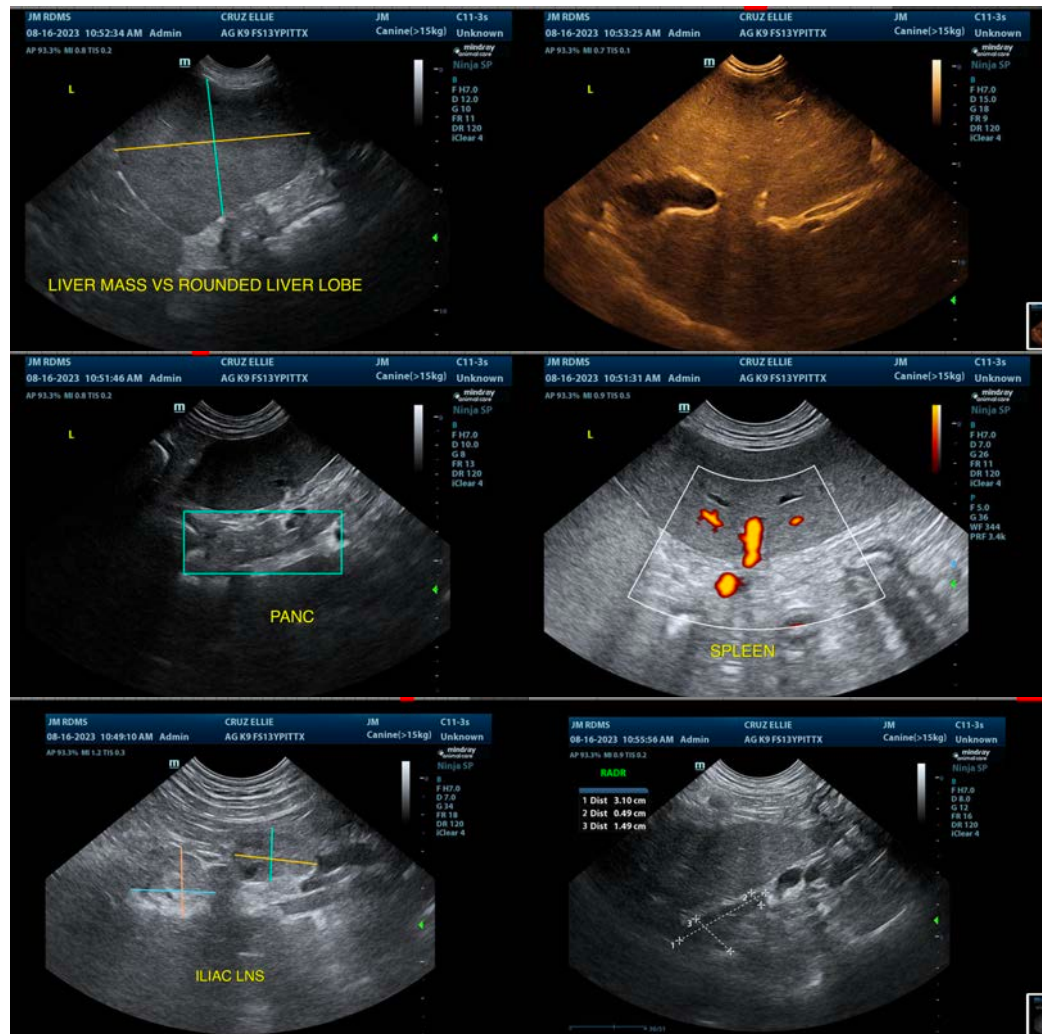
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PATIENT

Ellie Cruz

SPECIES

Canine

BREED

Pit Bull x Boxer

SEX

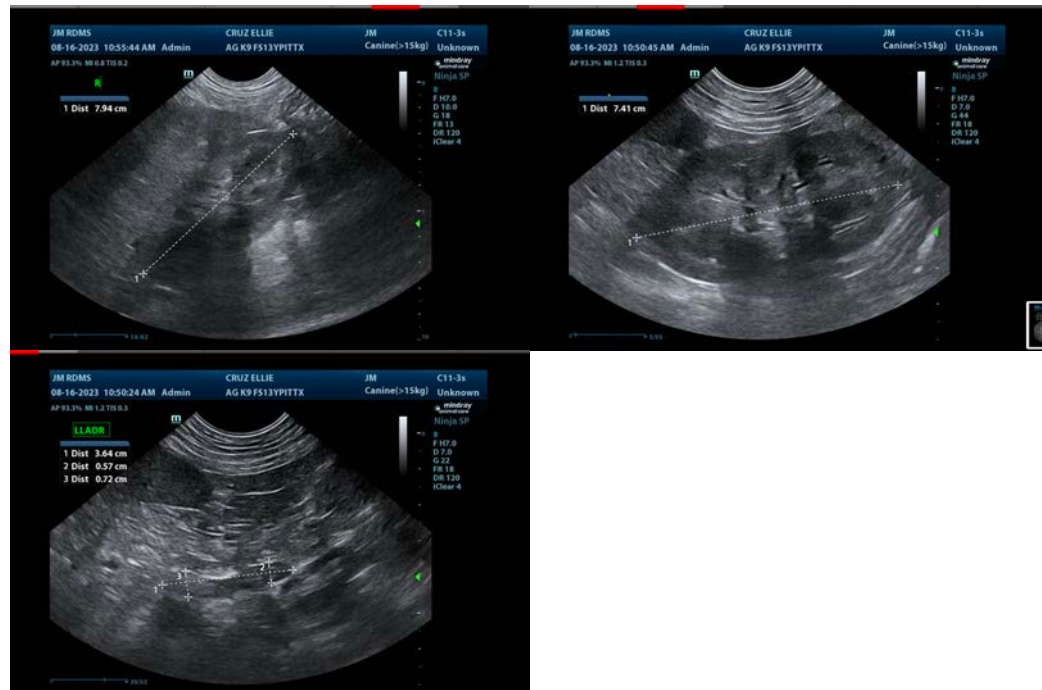
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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