



**PATIENT PRESENTING CLINICAL SIGNS**

Pippen Ringold

**SPECIES**

Canine

**BREED**

Pomeranian

**SEX**

Neutered Male

**AGE**

5 Years

**WEIGHT**

7 Pounds

History: June 7 2021:DIAGNOSTIC RESULTS: seen at specialty center Findings The size and echotexture of the liver and spleen are within normal limits and the biliary system is unremarkable. The pancreas is not enlarged or visibly inflamed. There is a 3.5 x 2.5 cm well circumscribed, moderately vascularized mass involving the caudal aspect of the left kidney. No ascites or mesenteric nodules identified. The right kidney is mildly reduced in size, measuring 3.2 cm in length, and has ill-defined internal architectural definition. The renal pelves and ureters are unremarkable. The bladder morphology is normal and no sediment or calculi are present in the bladder lumen. The size and echotexture of the liver and spleen are within normal limits and the biliary system is unremarkable. The pancreas is not enlarged or visibly inflamed. The stomach and small bowel are empty and have normal wall thickness and architecture. Brief thorax: the pulmonary nodules visualized radiographically could not be identified at the surface of the lung. No pleural effusion evident. Conclusions Small left sided renal mass. Considering the age and characteristics of the lesion, a malignant nephroblastoma is probable. Aspirate biopsy could be utilized for a definitive diagnosis. Probable pulmonary metastatic neoplasia. Evidence of chronic mild degenerative disease involving the right kidney. Cytology kidney- nephroblastoma Intermittent hematuria otherwise doing well.

**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 2.0 cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

**INTERPRETED BY**

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

The prostate is normal in size (0.54 cm) and shape for this neutered male dog. The parenchyma is homogenous and the external margins are smooth. The majority of the prostatic urethra appears normal with no evidence of irregularity, invasion or mass effect. There is a small (0.17 cm) shadowing pinpoint mineralization visualized which is suspicious for either a small stone in the urethra or the parenchyma of the prostate.

**IMAGING PERFORMED BY**

Loetitia Saint-Jacques, RVT

The left kidney is very regular in shape and large in size, measuring 3.7 cm in length. There is a large irregular hypoechoic mass effect effacing the cranial portion of the kidney, measuring 2.92 cm x 4.14 cm (previous measurements 3.5 cm x 2.5 cm). There is very little normal renal parenchyma visualized. There is pyelectasia present at 0.45 cm. There is no evidence of nephroliths or hydroureter. The mass appears very vascular.

**HOSPITAL NAME**

Donner Truckee VH

The right kidney has a normal shape and size (3.8 cm). Overall echogenicity is slightly hyperechoic with poor 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.

**REFERRING VET**

Dr. India Vannini

**Adrenal Glands**

The left adrenal gland is normal in size measuring 0.33 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.

**INVOICE**

12560

**DATE**

8/17/21



**PATIENT** The right adrenal gland is normal in size measuring 0.27 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.

Pippen Ringold

**SPECIES** *Spleen*

Canine 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.

**BREED** *Liver*

Pomeranian The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed. 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.

**SEX**

Neutered Male

**AGE** *Gastrointestinal*

5 Years 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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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.

**IMAGING PERFORMED BY**

Loetitia Saint-Jacques, RVT

**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.

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**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.

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**Other**

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Suspect (0.61 cm) shadowing nodule visualized in the cranial to diaphragm most consistent with pulmonary metastatic nodule.

**ULTRASONOGRAPHIC FINDINGS**

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**PATIENT Primary Findings**

- Pippen Ringold
- Left sided renal nephroblastoma- Measurements indicate possible mild progression
  - Suspect pulmonary nodule- Correlate with thoracic radiographs

**SPECIES Secondary Findings**

- Canine
- Possible pinpoint mineralization in the area of the prostate/prostatic urethra

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**INVOICE**

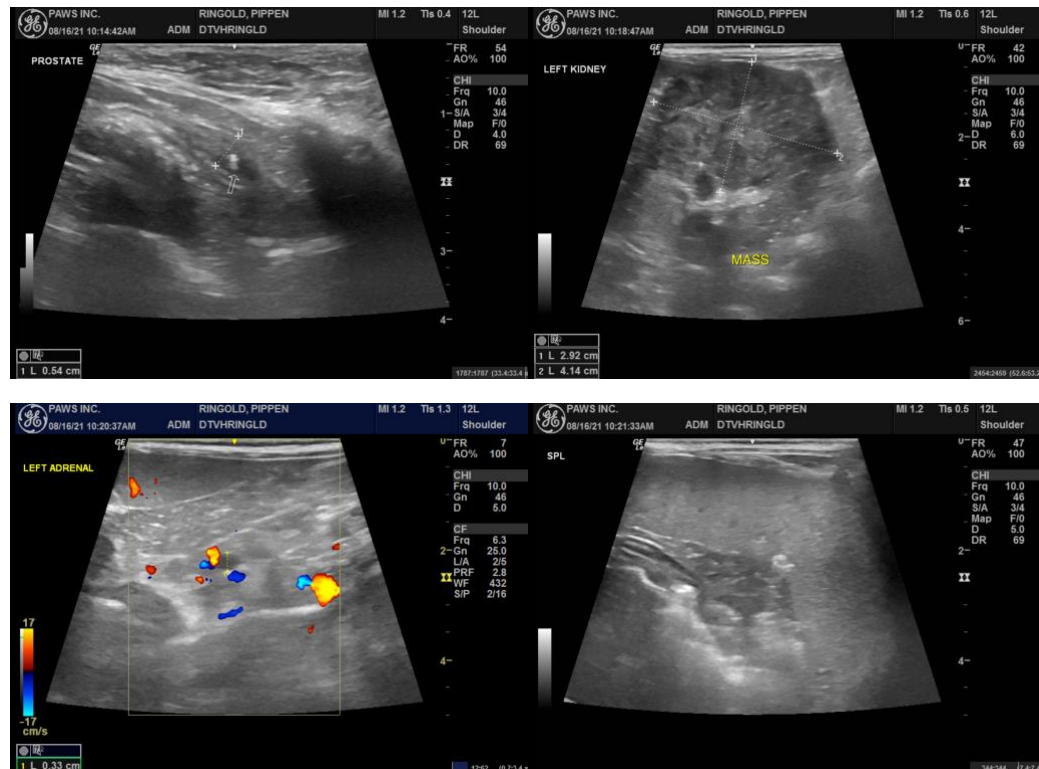
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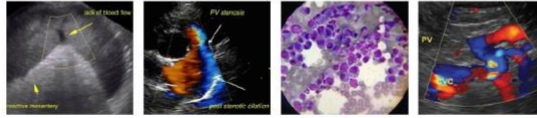
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The renal lesion is visualized and appears to have gotten a little bit larger as compared to previous measurements. Additionally, a suspected pulmonary nodule is visualized. There is a small mineralization in the area of the prostatic urethra, a significance of this is uncertain, but could be associated with the reported hematuria, correlate with radiographs to try and determine if this is of clinical significance at this time. 3 view thoracic radiographs are recommended to monitor the pulmonary metastasis. I recommended consultation with a veterinary oncologist regarding treatment options.





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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.

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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