



PATIENT PRESENTING CLINICAL SIGNS

Skye Lake
P presented as a transfer for HGE/pancreatitis. ALT mildly elevated

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine
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.

BREED

American Pit Bull
Terrier

SEX

Spayed Female

The left kidney has a normal shape and size (6.45 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

11 Years

The right kidney has a normal shape and size (6.1 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.

Adrenal Glands

WEIGHT

27.85 Pounds

The region of left adrenal (Cranial to left renal artery) is unremarkable but the adrenal is not distinctly visualized. No evidence of a mass effect.

INTERPRETED BY

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

The right adrenal gland is normal in size measuring 0.56 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

IMAGING PERFORMED BY

Dr. Alyssa Carver

The spleen is subjectively normal in size, echotexture is homogenous. It is somewhat irregular in shape. The blood flow through the hilus and splenic parenchyma appears normal. There is a rounded, somewhat irregular, and partially cavitated mass lesion visualized in the cranial abdomen. This mass lesion measures >3.5 cm x 4.5 cm and has a hypoechoic/cavitated area measuring 2.39 cm x 2.31 cm. In multiple view, there appears to be a very small attachment to the spleen, but I cannot rule out the possibility of an association with the liver, pancreas, etc.

HOSPITAL NAME

Aimal Emergency
Hospital

Liver

The liver is normal/borderline small, with normal echogenicity and 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.

REFERRING VET

Dr. Alyssa Carver

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.

INVOICE

41449

Gastrointestinal

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.

DATE

9/21/22



PATIENT

Skye Lake

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 measures 0.36 cm. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

SPECIES

Canine

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.

BREED

American Pit Bull Terrier

Pancreas

The area of 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.

SEX

Spayed Female

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.

AGE

11 Years

PRIMARY FINDINGS

- Large cranial abdominal mass effect with cavitated area – findings are most suggestive of a splenic mass. Differentials for the mass include neoplasia (e.g., hemangiosarcoma, hemangioma), hematoma, abscess, other. A neoplastic process is favored.

WEIGHT

27.85 Pounds

SECONDARY FINDINGS

- Borderline small liver – The liver appears relatively normal but is subjectively slightly small. Correlate with abdominal radiographs, as this will provide a more accurate evaluation of liver size, as this could be within normal limits for this individual.

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There is a cavitated mass effect in the cranial abdomen, which I suspect is splenic in origin. In some views there appears to be a pedunculated attachment, but color flow would be necessary to definitively confirm this attachment. Alternately, this could be hepatic, a cystic lymph node, or pancreatic in origin, but these seem much less likely. Options moving forward would include surgery to resect the mass lesion and submission for histopathology (this could be both diagnostic and therapeutic). Alternately, you could consider a fine needle aspirate of this lesion, trying to avoid the cavitated region. I would not recommend continued monitoring in this case due to the cavitated nature of the lesion and risk for hemorrhage.

IMAGING PERFORMED BY

Dr. Alyssa Carver

It is unknown if this mass lesion is associated with the symptoms described, but I suspect it could be an incidental finding. No lesions were visualized associated with the GI tract to explain the hemorrhagic diarrhea reported.

HOSPITAL NAME

Aimal Emergency
Hospital

REFERRING VET

Dr. Alyssa Carver

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

INVOICE

41449

DATE

9/21/22



PATIENT

Skye Lake

SPECIES

Canine

BREED

American Pit Bull Terrier

SEX

Spayed Female

AGE

11 Years

WEIGHT

27.85 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Alyssa Carver

HOSPITAL NAME

Aimal Emergency
Hospital

REFERRING VET

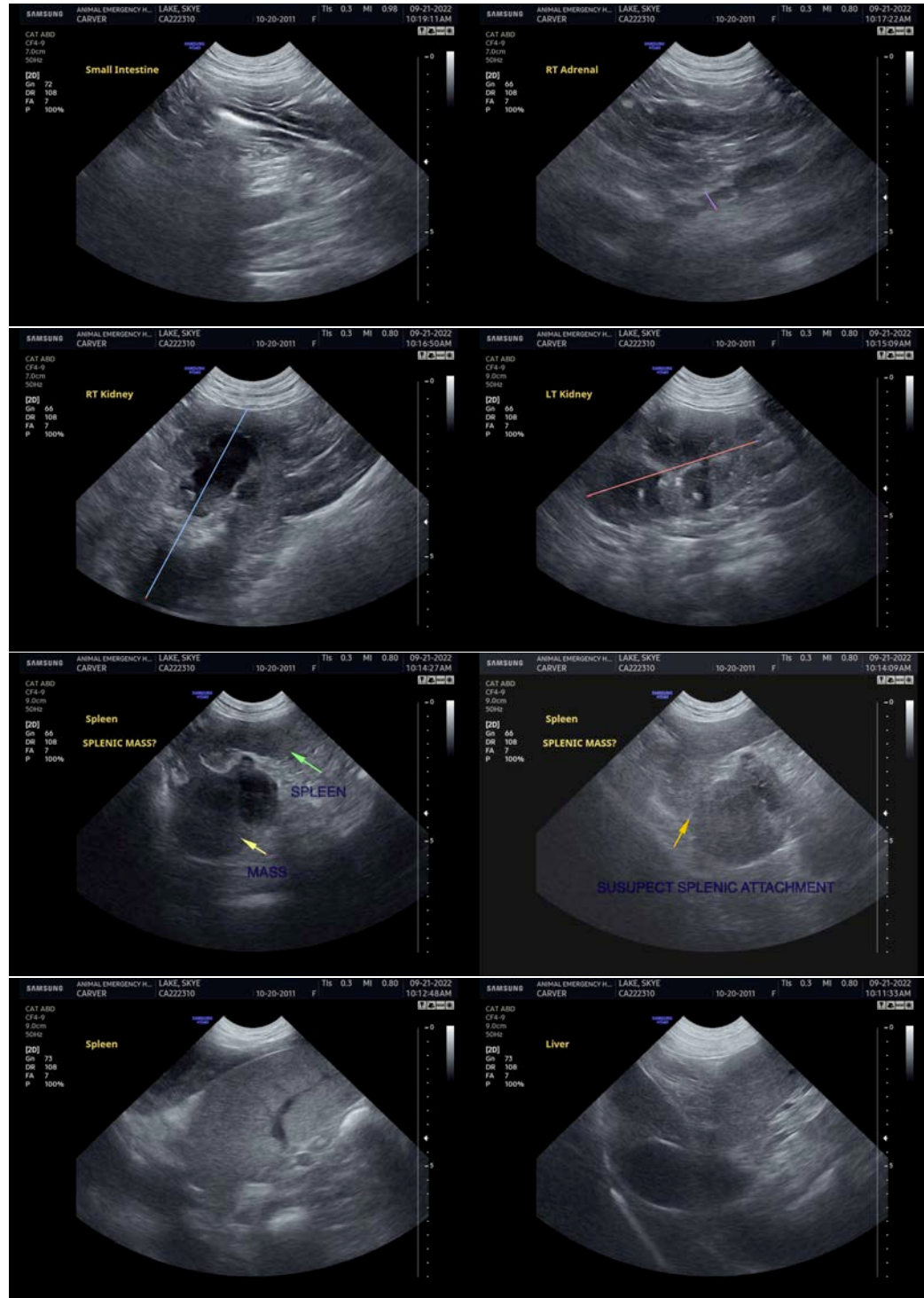
Dr. Alyssa Carver

INVOICE

41449

DATE

9/21/22





PATIENT

Skye Lake

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.

SPECIES

Canine

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

BREED

American Pit Bull
Terrier

SEX

Spayed Female

AGE

11 Years

WEIGHT

27.85 Pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Alyssa Carver

HOSPITAL NAME

Aimal Emergency
Hospital

REFERRING VET

Dr. Alyssa Carver

INVOICE

41449

DATE

9/21/22