

PATIENT

Alice Dickson

PRESENTING CLINICAL SIGNS

Gabapentin 300 mg 1 C PO q8-12h PRN Procedure: Abdominal ultrasound and 3 view chest rads / staging for Melanoma Current Problem List: Cutaneous Melanoma (histologically malignant) with narrow excision removed from ventral abdomen on 8/11/21 History of elevated ALT that has been monitored and showing improvement since 6/11/21 Laryngeal paralysis Multiple lipomatous masses Presenting Complaint: Patient had a histologically malignant melanoma narrowly excised from ventral abdomen on 8/11/21. Presenting today for further staging (AUS and chest rads). We have also been monitoring px liver values, 6/11/21 px ALT was 515 and AST was 63. Recheck labs on 6/25/21 ALT decreased to 315, remainder of L/E WNL. Rechecked a 3rd time on 7/23/21 ALT down to 207. Pertinent Diagnostic Results: June 11 2021: Senior Wellness CBC - unremarkable CHEM - ALT 515 (H) - AST 63 (H) - CHOL 375 (H) T4 - 1.4 (N) UA - USG 1.013 June 25 2021: ALT 315 July 23 2021 ALT 207

SPECIES

Canine

BREED

Lab Retriever

SEX

Spayed Female

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

AGE

13.6 Years

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.

WEIGHT

72 Pounds

The left kidney has a normal shape and size (6.87 cm). 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.

INTERPRETED BY

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Medicine)

The right kidney has a normal shape and size (6.39 cm). 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.

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

Adrenal Glands

HOSPITAL NAME

Truckee Meadows VH

The left adrenal gland is normal in size measuring 0.76 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 0.75 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.

REFERRING VET

Dr. Rachel Kuester

Spleen

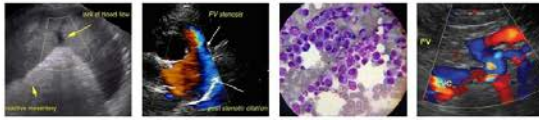
The spleen is subjectively large in size. The spleen echotexture is heterogenous and mildly mottled, the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. There are numerous small, hyperechoic foci in the spleen, most consistent with myelolipomas or small mineralizations, varying in size from approximately 0.1-0.3 cm. Additionally, there are some areas that have a mild hypoechoic area around the hyperechoic center. One of these nodules is measured at 1.24 cm x 1.37 cm. Another is measured at 0.74 cm.

INVOICE

25284

DATE

9/9/21



PATIENT

Alice Dickson **Liver**

SPECIES

Canine

BREED

Lab Retriever

SEX

Spayed Female

AGE

13.6 Years

WEIGHT

72 Pounds

The liver is normal/small in size, with normal echogenicity and 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 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 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.

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 measured 0.46 cm. Jejunum wall measured 0.32 cm. 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 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.

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. Prominent sublumbar lymph nodes were noted, the left measuring 0.77 cm in diameter and the right measuring 0.68 cm in diameter. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is generally of normal uniform echogenicity.

ULTRASONOGRAPHIC FINDINGS

- Mildly mottled spleen with hyperechoic foci and two small mixed echogenic nodules – The appearance of these lesions favors a benign process. Recommend continued monitoring with ultrasound +/- fine needle aspirate of the spleen.
- 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.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The changes observed in the spleen favor a benign process. Recommend continued monitoring with ultrasound.

The liver is somewhat heterogeneous and small-ish in size. This may be normal, but in a female Lab with

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a chronic ALT elevation, I always recommend a liver function test, as sometimes the liver mass will be reduced, resulting in improved-looking ALT when liver function is still very abnormal. No focal lesions were observed associated with the liver or biliary tract.

SPECIES

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The sublumbar lymph nodes were measured and are mildly prominent, but I do not feel that they are enlarged. We have a good baseline for subsequent met checks in the future. There is no overt evidence of metastatic disease.

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SEX

Spayed Female

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WEIGHT

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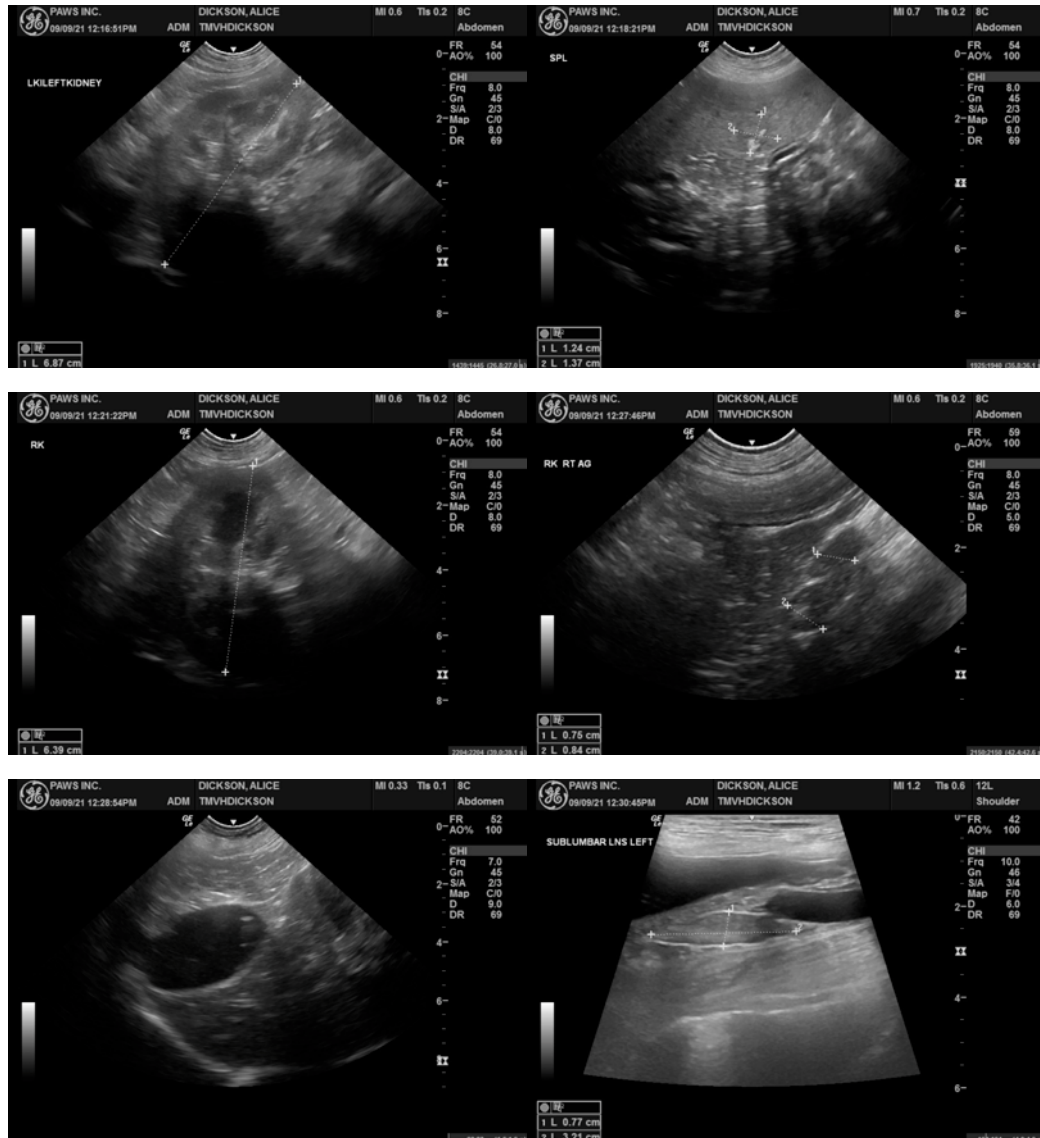
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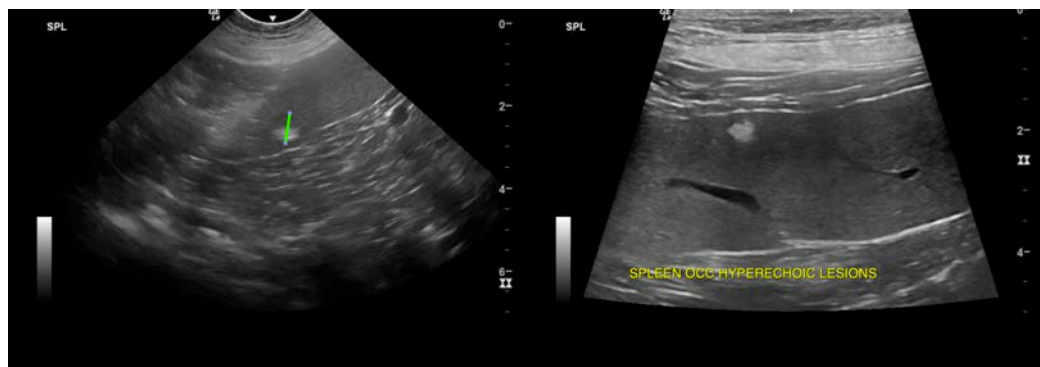
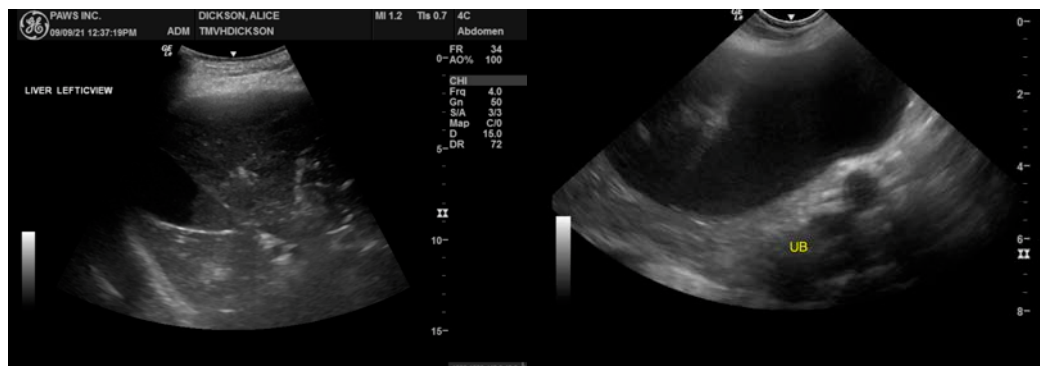
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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