



PATIENT

Coco Rodgers

SPECIES

Canine

BREED

Shih Tzu

SEX

Spayed Female

AGE

12 years

WEIGHT

15 lbs

INTERPRETED BY

Anthony Smatt

IMAGING PERFORMED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

HOSPITAL NAME

The Pets I Love

REFERRING VET

Dr. Smatt

INVOICE

96847

DATE
3/14/22

PRESENTING CLINICAL SIGNS

History: Patient has elevated ionized Ca and Ca. Concerned about hypercalcemia of malignancy Today getting 3 view chest radiographs and abd U/S
Abnormal PE/Chem/CBC/UA Results: ionized Ca and Ca are both elevated 1.64/ 12.7 pth 2.5 (1.1- 10.6) normal levels

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is somewhat under filled making it difficult to evaluate wall thickness, but it is smooth and regular. No abnormalities are present with the trigone or proximal urethra, and there is no evidence of sediment, cystoliths, polyps or a mass.

The left kidney measures 4.1 cm; within normal limits in size for the patient's weight. The capsule is smooth. Its overall architecture, including the definition of the cortico-medullary junction, are preserved. There is mild mineralization of the diverticuli. There are no signs of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

The right kidney measures approximately 3.8 cm (within normal limits). The capsule is smooth. Its overall architecture, including the definition of the cortico-medullary junction, are preserved. There are no signs of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

Adrenal Glands

The left adrenal gland measures 0.67 cm at the cranial pole, 0.58 cm at the caudal pole and 1.6 cm in length. The cranial pole is mildly enlarged for a dog of Coco's stature, and is rounded. A nodule due to hyperplasia or an adenoma cannot be excluded. An obvious mass is not observed. The caudal pole is mildly rounded and at the high end of the normal reference range. There are no obvious signs of a mass. No abnormalities are noted with its echogenicity, echotexture or surrounding vasculature.

The right adrenal gland was seen in passing; no obvious abnormalities are observed.

Spleen

The spleen is within normal limits in size, architecture, echotexture, and echogenicity. It is hyperechoic to both the liver and renal cortex. The capsule is smooth. No abnormalities are observed with its vasculature, i.e. congestion and thrombi are not identified.

Liver

The liver is homogenous and normal in echogenicity, echotexture and architecture. The borders are smooth and sharp. There are no abnormalities observed with the vasculature.

The gall bladder is dilated, which is attributed to Coco having been fasted. A trivial amount of echogenic material is present at the neck of the gall bladder and no considered clinically significant.

Gastrointestinal



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|--|---|
| PATIENT | The gastric wall and pylorus are normal in thickness. There is no loss of definition of the normal architecture of the layers of the stomach wall. No obvious abnormalities are observed with its peristalsis. |
| Coco Rodgers | |
| SPECIES | The small intestinal wall thickness is within normal limits and there is no evidence of dilation. The definition of the wall layers is preserved. The colonic wall is not thickened and mural detail is considered normal. There are no obvious signs of a mass, foreign body, infiltrative disease or an obstruction. |
| Canine | |
| BREED | Pancreas |
| Shih Tzu | Within normal limits regarding echogenicity and echotexture. There is no evidence of hyperechogenicity of the mesenteric fat; active pancreatitis is considered unlikely. |
| SEX | Other |
| Spayed Female | Lymph nodes: No abnormalities are observed. |
| AGE | Abdominal effusion is not visualized. |
| 12 years | |
| WEIGHT | ULTRASONOGRAPHIC FINDINGS |
| 15 lbs | <ul style="list-style-type: none"> • There are no obvious signs of neoplasia on today's abdominal ultrasound, however, subtle changes may be overlooked if very early in the disease process. An obvious cause of Coco's hypercalcemia is not identified. • The renal changes are mild and most likely age related. • The small amount of sludge in the gall bladder is not considered clinically significant, providing Coco is not demonstrating signs of vomiting or gastroesophageal reflux. |
| INTERPRETED BY | INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS |
| Anthony Smatt | One may consider performing PTHrP and vitamin D concentrations, however, a negative PTHrP does not rule out the presence of neoplasia. Evaluation of Coco's diet is recommended in addition to determining whether she has access to vitamin D containing ointments, for example licking client's, arms, etc. as the latter may cause hypercalcemia. |
| IMAGING PERFORMED BY | A re-evaluation of the mammary glands, lymph nodes and a rectal exam, before and after having expressed the anal sacs, are also recommended as changes may have occurred since the original exam. A urinalysis may also help identify proteinuria, which can help exclude multiple myeloma. |
| Lisa Carioto, DVM, DVSc, Diplomate ACVIM | Assessment of the ribs, vertebrae, and vertebral bodies is also suggested to exclude lesions that are suggestive of multiple myeloma. The latter is less likely if hyperglobulinemia is not present on the serum biochemical profile. |
| HOSPITAL NAME | An ultrasound of the cervical region to identify a parathyroid nodule or nodules is suggested. |
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| REFERRING VET | If neoplasia is highly suspected it may be necessary to perform FNAs of the liver and spleen. |
| Dr. Smatt | |
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A re-evaluation of a CBC may be performed; if any of the cell lines are affected, a bone marrow aspirate may be necessary in the future.

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