



PATIENT PRESENTING CLINICAL SIGNS

Lilly O'Brien

History: Proteinuria confirmed with UPC. Previous US (10/14/21 R. McKenzie Daniel, DVM, Sonopath) showed mild hepatomegaly, slightly enlarged left adrenal gland; bilateral mild chronic renal changes. On Ursodiol 250mg: half a tablet PO Q24, Denamarin Advanced. *Study limited to urinary system and adrenal glands

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: UPC 1.14H, USG 1.020, ALT 137 sl H, ALKP 244 sl H but static

BREED

Mixed

LIMITED ULTRASONOGRAPHIC EXAMINATION

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

SEX

Spayed Female

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. Subtle uniform cortical hypertrophy was present with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. Mild pyelectasia was present in both kidneys. The left kidney measured 4.3 cm in length. The right kidney measured 4.6 cm in length.

AGE

11 Years

Previously noted, mildly progressive enlarged left adrenal gland, exhibiting primarily symmetrical swollen to focal asymmetrical contour, owing to focal areas of subjective regional parenchymal expansion. Nonhomogeneous focally cystic left adrenal parenchyma noted with pinpoint to minor hyperechoic parenchymal foci. Overall, the left adrenal gland measured 2.9 cm in length x 1.8 cm at the cranial pole and 1.24 cm at the caudal pole. The enlarged left adrenal gland was noted directly adjacent to periadrenal vasculature, while the possibility of early vascular invasion, although not definitive, cannot be excluded.

WEIGHT

15.9 Pounds

INTERPRETED BY

R. McKenzie Daniel, DVM,
DABVP (Canine and Feline)

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.44 cm width at the caudal pole and 0.38 cm width at the cranial pole.

IMAGING PERFORMED BY

Pamela Harrigan, RDCS

ULTRASONOGRAPHIC FINDINGS

- Static mild chronic renal changes with minor pyelectasia
- Mildly progressive left adrenomegaly, exhibiting nonhomogeneous to focally hyperechoic parenchyma- consistent with probable neoplastic criteria with suspect emerging parenchymal mineralization.
- Overtly normal right adrenal gland
- Sonographically unremarkable urinary bladder and visible proximal urethra

HOSPITAL NAME

Falmouth AH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

CT assessment of the left adrenal gland for further clarification as well as surgical planning if surgical options are a possibility in this case would be ideal. Left adrenalectomy recommended if possible and pending CT assessment. The possibility of very early vascular invasion cannot be excluded.

REFERRING VET

Lilan Hauser, DVM

Empirically, continued therapy for PLN with periodic monitoring of UPC, as well as sonographic monitoring of the left adrenal gland for evidence of progression would be a more conservative approach.

INVOICE

14893

DATE

4/25/22



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REFERRING VET

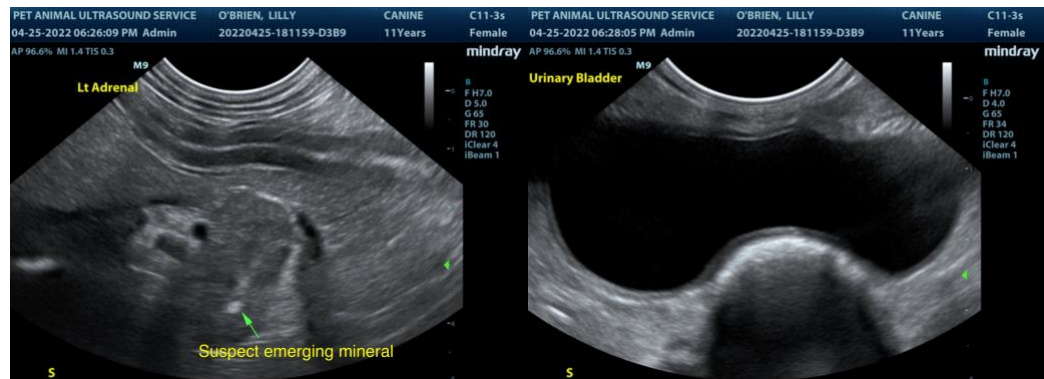
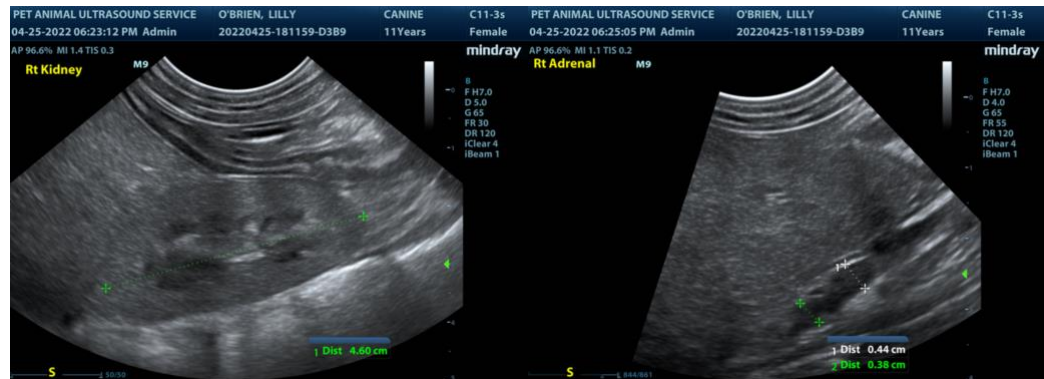
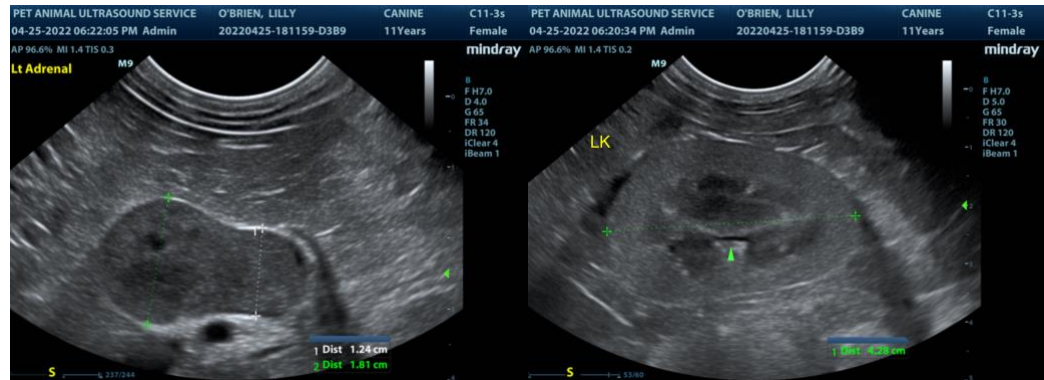
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



PATIENT

Lilly O'Brien

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.

SPECIES

Canine

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

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Spayed Female

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