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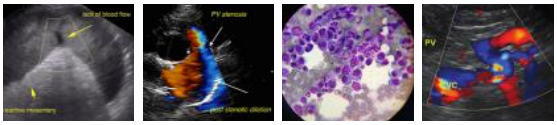


ANIMAL SOUNDS NW
MOBILE VETERINARY ULTRASOUND
IMAGING PERFORMED BY
AnimalSoundsNW.com 541-357-9423

PATIENT

Bravo Cushman

SPECIES

Canine

BREED

PitBull

SEX

MN

AGE

8

WEIGHT

73 lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Q Street Animal Hospital

REFERRING VET

Dr. Cone

INVOICE

10897ag

DATE

06/22/2022

PRESENTING CLINICAL SIGNS

History: Low grade cutaneous hemangiosarcoma removed on 6/8/22.

Abnormal PE/Chem/CBC/UA Results: Current Medications Apoquel, Cyclosporine, Carprofen, Benadryl

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 7.5 cm in length. The right kidney measured 7.1 cm in length.

The area of the aortic trifurcation was free of pathology.

No overt pathology in the area of the residual prostate.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.50 cm width at the caudal pole and 3.2 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.78 cm width at the caudal pole and 2.9 cm length.

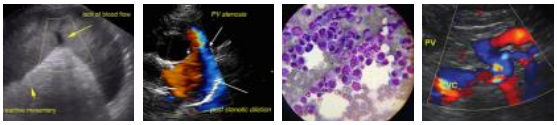
Spleen

The spleen exhibited primarily normal size with symmetrical capsule contour and a finely textured and homogenous parenchyma. An unspecified spherical appearing nonhomogeneous mass exhibiting areas of hyperechoic mineralization and secondary distal acoustic shadowing was present in the area of the mid to cranial spleen measuring approximately 6.5 cm in diameter. No evidence of capsular escape, peri splenic or peritoneal free fluid was noted. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

Liver

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal



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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate variably echogenic retained ingesta exhibiting areas of focal distal acoustic shadowing with no signs of ileus, obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Unspecified splenic mass/lesion exhibiting areas of mineralization
- Moderate gastric ingesta
- Normal liver

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The primary finding of the spherical splenic mass/lesion may indicate mineralized granuloma, consolidated chronic abscessation, mineralized hyperplasia or chronic splenitis while the possibility of primary or metastatic splenic neoplasia given the history of cutaneous hemangiosarcoma is possible. The possibility of a perisplenic i.e. omental or lymphatic mass impinging upon the spleen cannot be definitively excluded. Assuming normal clotting status and if accessible, an ultrasound guided FNA of the mass/lesion is recommended for screening cytology. No other evidence of intra-abdominal metastatic criteria was present. Sonographic monitoring of the mass/lesion for evidence of progression with initial recheck in 4-6 weeks would be a more conservative approach.

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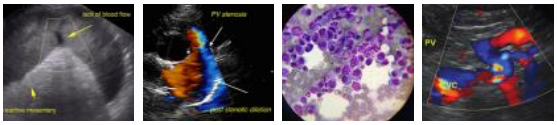

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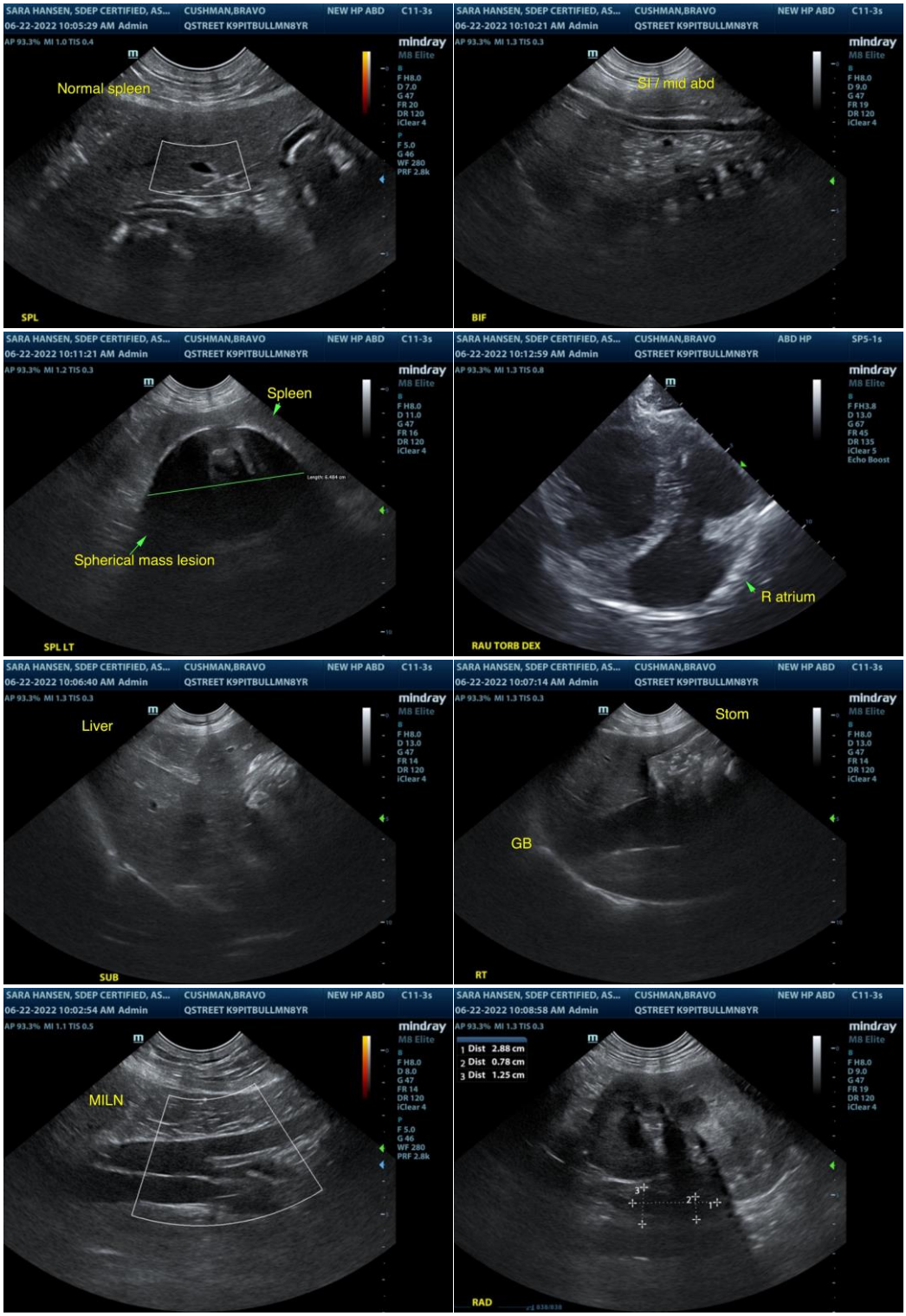

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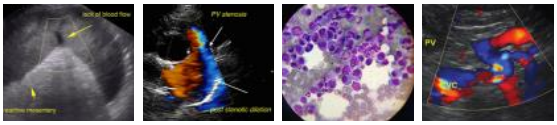

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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com