



PATIENT

Rocky Irizarry

SPECIES

Canine

BREED

Pomeranian

SEX

MN

AGE

11yr

WEIGHT

12.5lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Jose

HOSPITAL NAME

Animal Clinic of
Queens

REFERRING VET

Dr. Thomas

INVOICE

11127ag

DATE

07/12/2022

PRESENTING CLINICAL SIGNS

History: Hx of distended abdomen , Pt is PU/PD and is eating a lot more, pants a lot these days, no V/D for the past 2 weeks Pt had diarrhea, improved with the treatment, after the treatment finish diarrhea is back, diarrhea is pudding consistencies, no blood or mucus been noticed by the owner,

Abnormal PE/Chem/CBC/UA Results: Distended abdomen, non painful, X-rays wnl BW CBC: WNL CHEM: BUN: 46.4 CRE: 1.6 PHOS: 5.9 GLUCOSE: 127 CHOL: 332 AST: 61 ALP: 170 GGT: 16 TRIGLY: 242 (H) UA: not performed.

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ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. Bilateral small cortical cysts were present. No evidence of pelvic dilation was present. The left kidney measured 3.6 cm in length. The right kidney measured 3.5 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.44 cm width in the caudal pole.

The right adrenal gland exhibited a spherical mass with pinpoint parenchymal mineralization measuring 2.3 cm x 1.3 cm. Potential for vascular invasion was not definitive yet cannot be excluded.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver

The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with primarily anechoic luminal content and mildly congealed nonorganized mildly hyperechoic debris. 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 was empty with no signs of ileus, obstruction or foreign material.

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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

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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.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

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ULTRASONOGRAPHIC FINDINGS

- Right adrenal mass
- Vacuolar hepatopathy pattern
- Mild gallbladder debris
- Mild bilateral chronic renal changes with small cortical cysts

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12.5lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The primary finding in this case is the right adrenal mass which is most suggestive of neoplastic criteria. A full adrenal workup with LDDST is warranted given the patient's clinical signs. Screening BP is suggested to assess for evidence of hypertension which may allude to potential pheochromocytoma. Ideally an abdominal CT is recommended for further assessment as well as surgical planning if surgical options are a potential in this case.

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No obvious evidence of regional right peri adrenal or hepatic metastasis.

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Continued as needed GI support is recommended.

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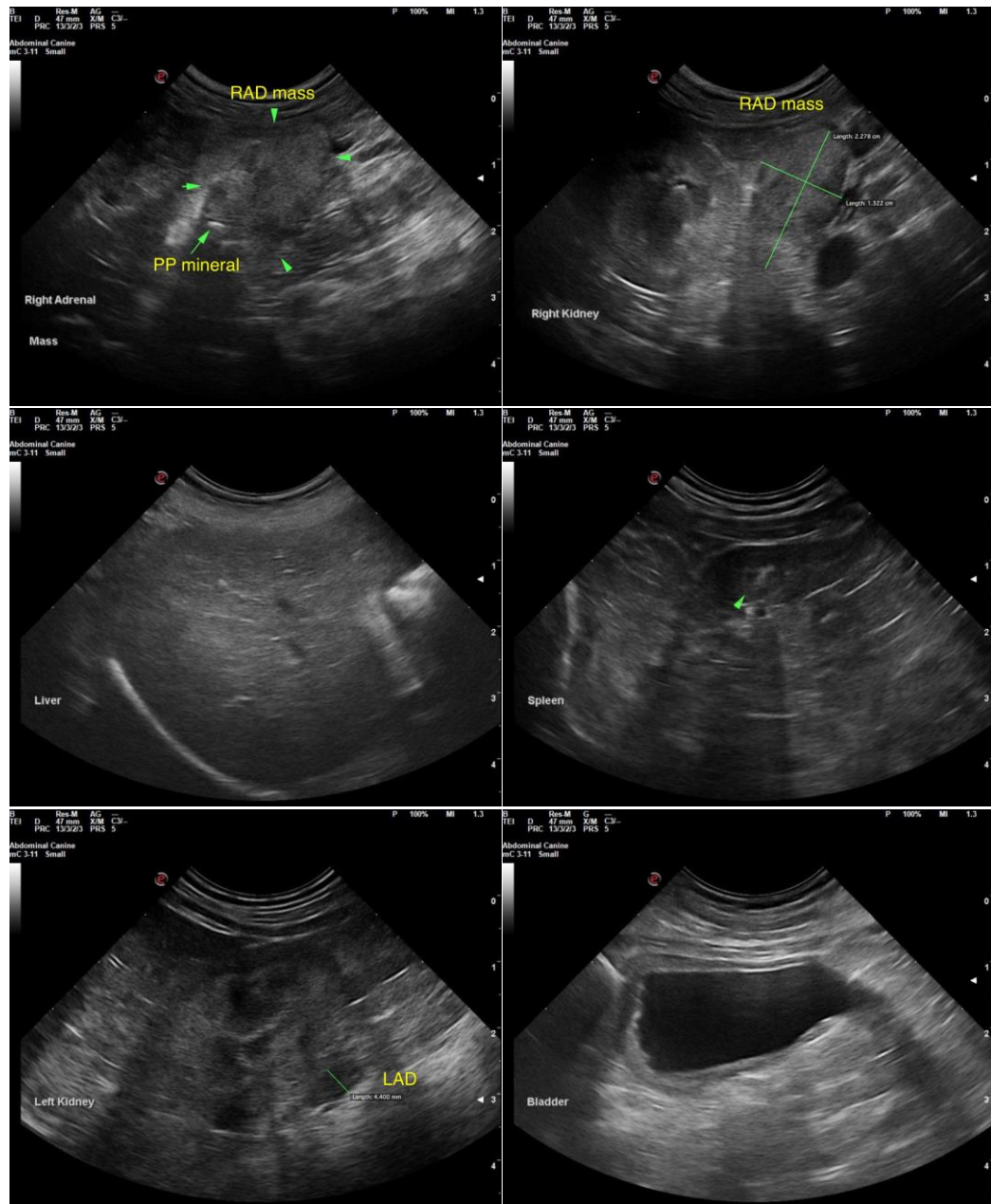
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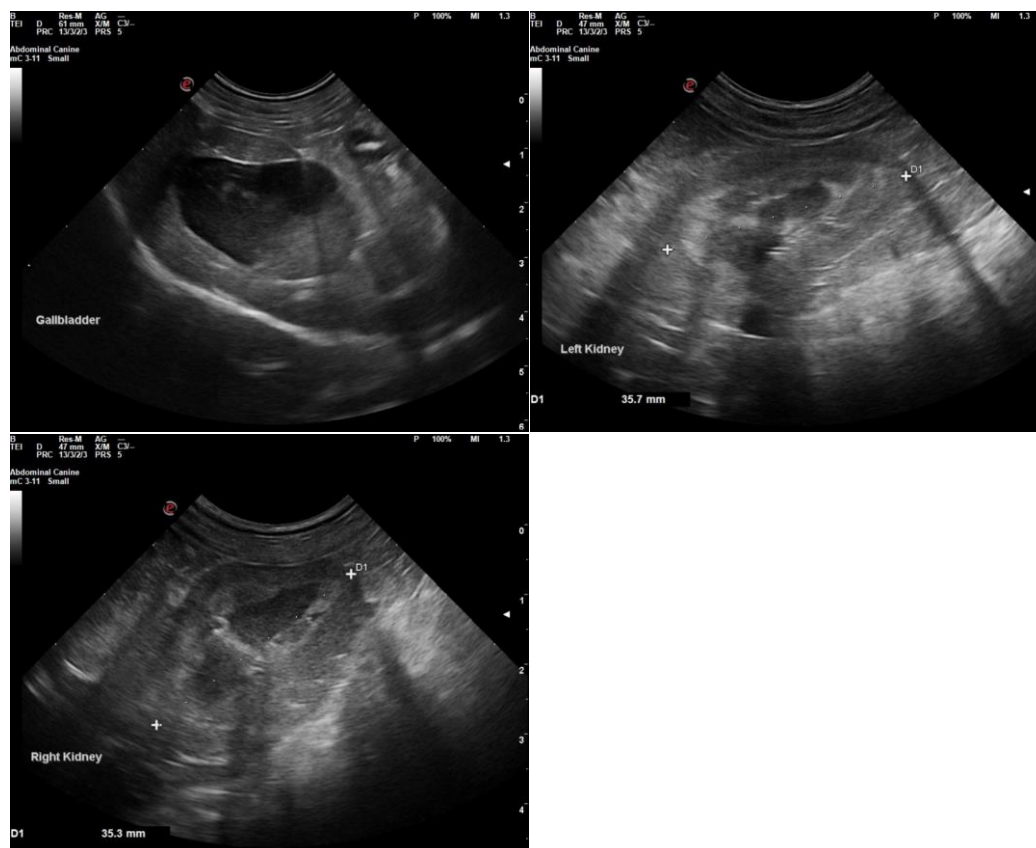
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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