



PATIENT

Greta Turowsky

SPECIES

Canine

BREED

Puggle

SEX

FS

AGE

14 yrs

WEIGHT

25 lbs.

PRESENTING CLINICAL SIGNS

Recheck adrenal glands
Abnormal PE/Chem/CBC/UA Results: None

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 was noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were 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. No evidence of pelvic dilation was present. The left kidney measured 5.3 cm in length. The right kidney measured 5.7 cm in length.

INTERPRETED BY

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

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 2.0 cm length x 0.66 cm width in the caudal pole.

IMAGING PERFORMED BY

Jessica Miller

A well-defined, hyperechoic nodule was present in the cranial pole of the right adrenal gland with mild associated symmetrical capsule expansion. The nodule was static in size and appearance compared to the previous ultrasound. The nodule did not exhibit signs of mineralization or vascular invasion. The nodule measured 1.1 cm x 0.76 cm. The overall right adrenal gland measured 2.0 cm length x 0.59 cm width at the caudal pole.

HOSPITAL NAME

Millburn VH

Spleen

The spleen was normal in size and contour with generalized mild splenic parenchyma heterogeneity. A solitary, discrete, non-disruptive, mixed echogenic nodule was present in the medial parenchyma caudal to the hilus measuring 0.7 cm in diameter. The splenic nodule did not distort the associated medial capsule.

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Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Intermittent discrete, non-disruptive, mildly hypoechoic intraparenchymal nodules are noted. An example of a liver nodule measured 2.0 cm in diameter. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size containing anechoic content primarily with mild congealed, mildly



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hyperechoic debris in the cranial lumen. No evidence of peripheral gallbladder inflammation was noted. The common bile duct was normal.

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Gastrointestinal

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.

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

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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 were evident.

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Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

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DVM, DABVP
(Canine and Feline)

ULTRASONOGRAPHIC FINDINGS

- Static right adrenal nodule
- Static hepatopathy exhibiting nonuniform to discretely nodular parenchyma
- Mild congealed gallbladder debris (non-mucocele)
- Focal subtle nondisruptive splenic nodule
- Static mild chronic renal changes

IMAGING PERFORMED BY

Jessica Miller

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

Millburn VH

The right adrenal gland appeared similar in appearance and size compared to the previous ultrasound without evidence of progression. This may indicate a higher probability of a benign nodule such as adenoma. Technically, the possibility of an emerging neoplastic right adrenal nodule is still possible, yet may be considered less likely given the lack of progression. Periodic sonographic monitoring of the nodule, as well as systemic BP would be reasonable.

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Previously mentioned etiologies for the liver are still applicable.

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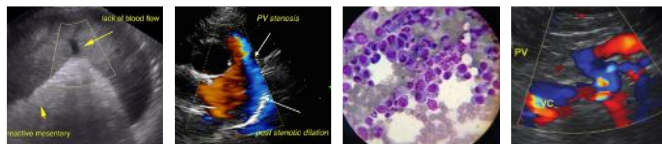
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Considerations for the subtle splenic nodule may include focal hyperplasia, hematopoiesis, atypical myelolipoma, and granuloma, with emerging neoplastic splenic criteria considered a less likely differential diagnosis.

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In addition to sonographic monitoring of the right adrenal nodule, sonographic monitoring of the liver and spleen for evidence of progressive parenchymal or nodular changes would be ideal. Continued hepatosupportive medications are recommended.



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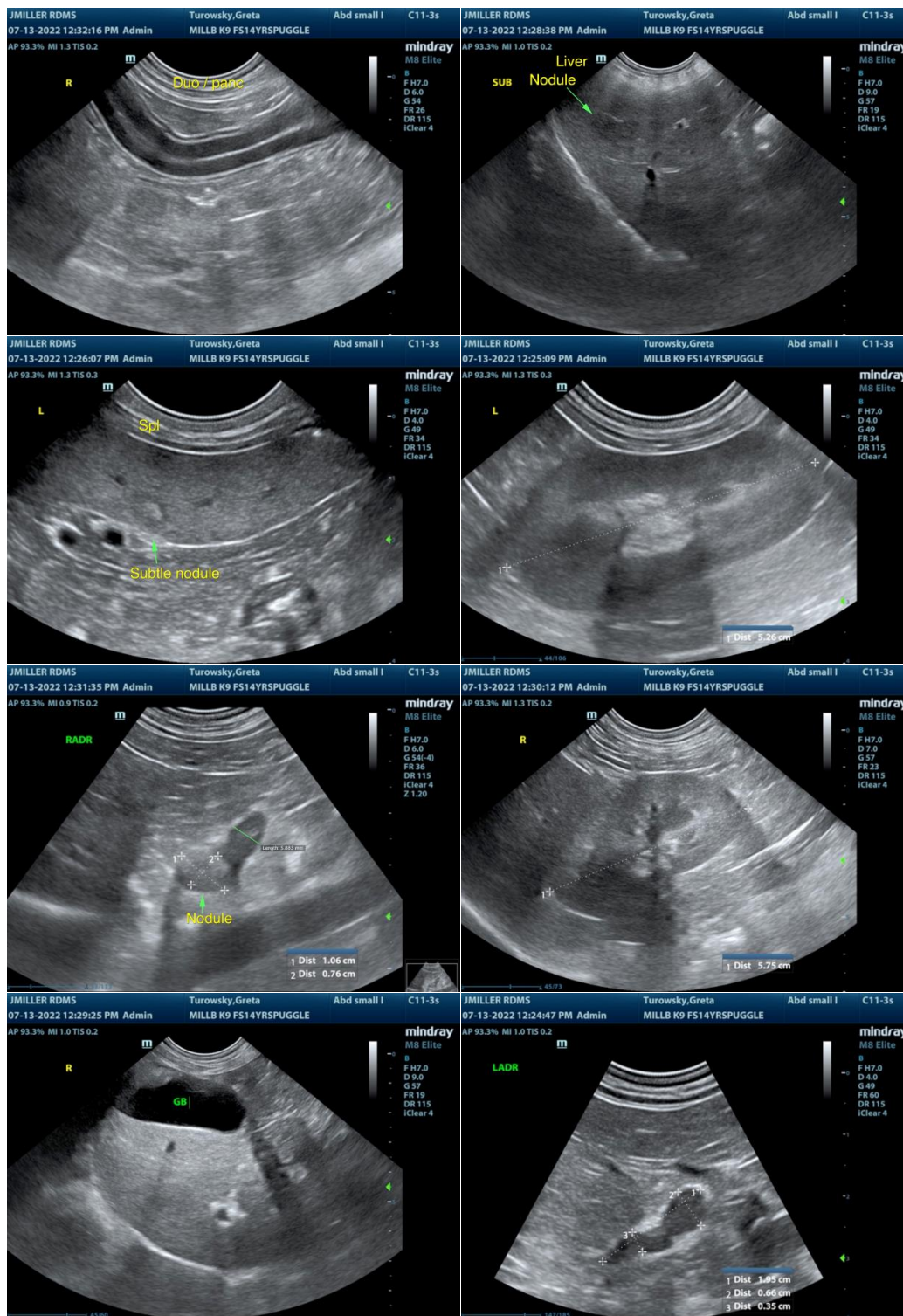
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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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