



PATIENT PRESENTING CLINICAL SIGNS

Schuster Cardo

DIARRHEA POLYURIA / POLYDIPSIA ABDOMINAL DISTENSION DENTAL CALCULUS/GINGIVITIS ATAXIA PROPRIOCEPTIVE DEFICIT ARTHRITIS*. neuro issues r/o IVDD type II, degenerative myelopathy, other pu/PD r/o cushing's dz, liver dz, renal dz, neoplasia, other abdominal distension r/o organomegaly, ascites, free abdominal fluid, neoplasia, other. No medications. Active fleas running on dog during scan.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: high ALP slightly anemic hypothyroidism

BREED

Beagle Mix

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

MN

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.

AGE

16yr

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 moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Bilateral to focal areas of medullary mineral were present with left kidney infarcts. Mild pyelectasia was present in the left kidney. The left kidney measured 6.2 cm in length. The right kidney measured 7.1 cm in length.

WEIGHT

20.1kg

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

INTERPRETED BY

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

A non homogeneous spherical appearing mass in the area of the left adrenal gland was present measuring ~ 3.8 cm x 3.1 cm. The parenchyma of the enlarged adrenal gland presented heterogenous to mixed echogenic with nonuniform echotexture and no evidence of mineralization. Vascular invasion was not apparent yet cannot be definitively excluded. The right adrenal gland was not definitively visualized.

IMAGING PERFORMED BY

Crystal Hill

Spleen

The spleen exhibited parenchyma heterogeneity which was hyperechoic to the liver and renal cortical parenchyma. Multifocal, well-defined, symmetrical, echogenic nodules were present throughout the cranial to caudal parenchyma. Areas of minor capsule asymmetry were present. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas. An example of a splenic nodule measured 0.52 cm in diameter.

HOSPITAL NAME

Arc Animal Hospital

REFERRING VET

Dr. Zaki

Liver

The liver was markedly enlarged with rounded contour and normal parenchyma exhibiting moderate 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 with moderate variably hyperechoic to pinpoint mineralized non-dependent luminal debris. The cystic and common bile ducts were normal.

INVOICE

11698ag

Gastrointestinal

DATE

09/26/2022



PATIENT

Schuster Cardo

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

SPECIES

Canine

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.

BREED

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Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

SEX

MN

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present. Subjective mild increased intra-abdominal fat was present.

AGE

16yr

ULTRASONOGRAPHIC FINDINGS

- Left adrenal mass
- Hepatomegaly exhibiting minor parenchyma remodeling-subjectively benign
- Moderate gallbladder debris-possible early to emerging mucocele
- Benign splenic nodules-consistent with myelolipomas, hyperplasia or emerging mineralization
- Bilateral chronic renal changes with pinpoint medullary mineral and left kidney pyelectasia

WEIGHT

20.1kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

THE left adrenal mass is strongly suggestive of neoplastic criteria i.e. cortisol secreting tumor, adenocarcinoma, pheochromocytoma with potential for mixed etiologies. A full adrenal workup with LDDST as well as screening BP. Hepatosupportive medications such as Denamarin and Ursodiol are suggested.

Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

Abdominal CT for further assessment of the left adrenal mass is likely ideal for further clarification.

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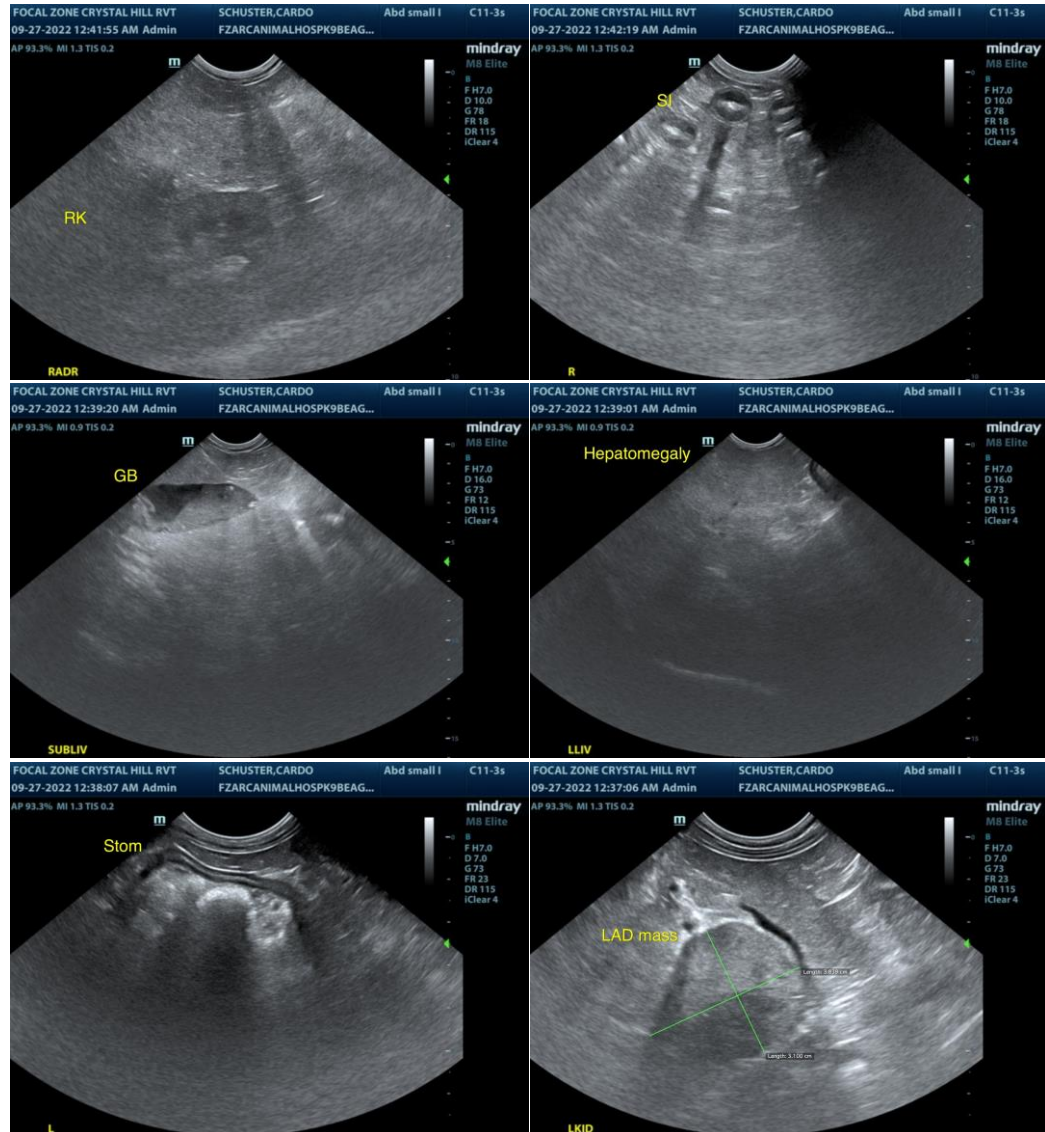
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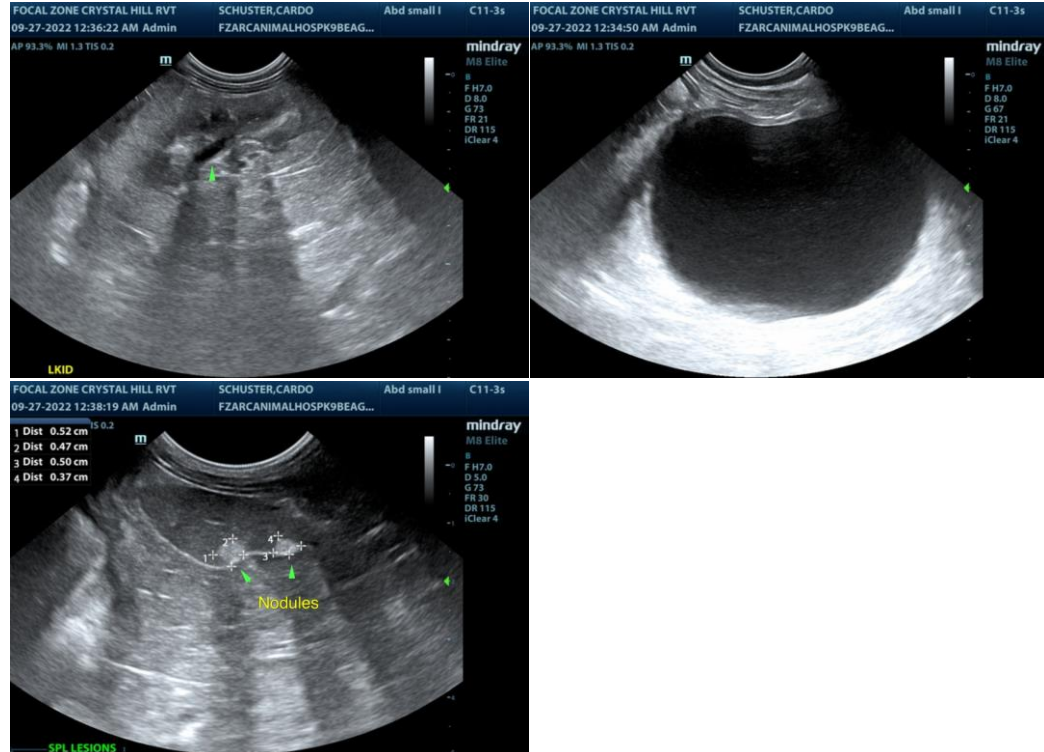
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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