


PATIENT PRESENTING CLINICAL SIGNS

Chip Nutting History: Splenic nodules and microhepatica on previous ultrasound.

SPECIES Physical Examination: N/A.

Canine Urinalysis: N/A

CBC: N/A.

BREED Serum Biochemistry: N/A.

Golden retriever Radiographic Findings: N/A.

SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

MN **Urinary System**

Age Full urinary bladder with a normal thickness and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

8 years

Normal trigone area, proximal urethra (0.7 cm), and iliac blood vessels.

WEIGHT

82 #

Iliac lymphadenomegaly (right 0.8 x 2.4 cm, left 1.2 x 3.6 cm) with normal shape and echogenic appearance. Ureters not visualized.

INTERPRETED BY Normal renal size (left 6.6 cm, right 6.9 cm), echogenic appearance, cortico-medullary differentiation, pelvis and capsule.

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ECVIM

Reproductive System

Small hypoechogenic prostate (1.3 cm).

IMAGING PERFORMED BY

Sonya Myers, DVM

Adrenal Glands

Normal position, echogenic appearance, shape, and size. Left 0.58/0.5 cm, right 0.5/0.67 cm.

HOSPITAL NAME

Spleen

Lake Emma Animal
Hospital

Normal size (2.8 cm) with a nodular echogenic appearance. Nodules are small parenchymal, and hypoechogenic (0.5 x 0.8 cm). Irregular capsule. Smooth homogenous parenchyma and normal vasculature. Hyperechoic appearance of the mesentery surrounding the spleen. FNA taken with no obvious post aspirate hemorrhage.

REFERRING VET

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Liver

INVOICE Small with normal echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal thickness and appearance of the gall bladder wall. Normal bile duct (0.3 cm).

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DATE

1/14/23


PATIENT *Gastrointestinal*

Chip Nutting

Normal appearance of the small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (jejunum 0.44 cm, colon 0.3 cm) and peristaltic activity, and no distension of the lumen. Segmental thickening of the stomach (0.76 cm) and duodenum (0.61 cm) with no loss of layering. Hyperechogenic appearance of the mesentery surrounding the stomach. Small amount of ingesta within the stomach

SPECIES

Canine

BREED
Pancreas

Golden retriever

Normal size (left 0.6 cm, right 1.2 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SEX
Free Abdomen

MN

Normal mesenteric lymph nodes (4.1 cm).

Age

No ascites.

8 years

ULTRASONOGRAPHIC FINDINGS
WEIGHT

82 #

Primary Findings:

- Nodular spleen.
- Iliac lymphadenomegaly.
- Gastroenteropathy.

INTERPRETED BY

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ECVIM

Secondary Findings:

- Micohepatica.

IMAGING PERFORMED BY

Sonya Myers, DVM

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Etiologies for the spleen and iliac lymph nodes would be reactive, hyperplasia, splenitis/lymphadenitis, and infiltrative neoplasia.

HOSPITAL NAME

Lake Emma Animal
Hospital

Etiologies for the gastroenteropathy would be non-specific gastroenteritis (viral, bacterial, protozoa, helminths, toxins, dietary indiscretion), inflammatory bowel disease, and dietary hypersensitivity, with neoplasia, a less likely differential diagnosis.

REFERRING VET

Dr Hecker

With age of the patient, the micohepatica can be considered an incidental finding.

Further assessment needs to be based on the pending cytology results but could include fecal analysis, FNA cytology of the lymph nodes, and endoscopy of the upper GI tract with biopsies.

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Specific therapy would be dependent on an etiological diagnosis.

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PATIENT

Chip Nutting

SPECIES

Canine

BREED

Golden retriever

SEX

MN

Age

8 years

WEIGHT

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HOSPITAL NAME

Lake Emma Animal
 Hospital

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Dr Hecker

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IMAGES

Spleen



Liver





PATIENT

Iliac lymph node

Chip Nutting

SPECIES

Canine

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SEX

MN

Age

8 years

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Stomach



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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.

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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