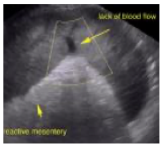
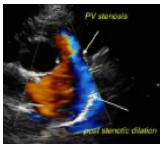
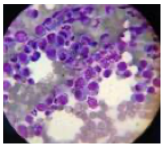
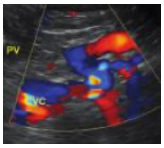
SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Luna King

SPECIES
Canine

BREED
Newfoundland

SEX
Female Spayed

AGE
6 years

WEIGHT
110 lbs

INTERPRETED BY
Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM

IMAGING PERFORMED BY
Sonya Myers DVM

HOSPITAL NAME
VCA Clermont AH

REFERRING VET
Calzada

INVOICE
13720

DATE
7.17.23

PRESENTING CLINICAL SIGNS

History: LDDS consistent with Cushing's. O would like scans to determine if adrenal mass or anything abnormal. Check bladder due to continued abnormal u/a results.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System
The urinary bladder is full, with a normal thickness and smooth appearance of the wall. Small amount of floating hyperechogenic sediment present No. uroliths evident.

Normal appearance of the trigone area, proximal urethra (0.50 cm), and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes (2.60 cm). Ureters not visualized, which can be considered a normal finding.

Normal renal size (left kidney 8.20 cm / right kidney 8.00 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident.

Adrenal Glands
Bilaterally enlarged, with a rounded shape and hyperechogenic appearance, with normal position and appearance of the surrounding vasculature. The left adrenal gland measured 1.10 x 1.00 cm. The right adrenal gland measured 0.75 x 0.86 cm).

Spleen
Normal size (1.80 cm) and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident.

Liver
Normal size, with increased echogenic appearance, normal portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.

Gallbladder
The gallbladder is full, containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct (0.30 cm).

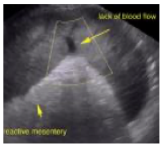
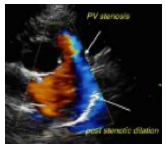
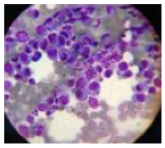
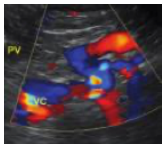
Gastrointestinal
Normal appearance of the duodenum (0.44 cm), jejunum (0.40 cm) small intestine, ileo-cecal junction, and colon (0.21 cm) with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen. Segmental thickening of the gastric wall (up to 0.72 cm) with no loss of layering.

Pancreas
Normal size (right 1.50 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen
Normal mesenteric lymph nodes (3.30 cm).

No ascites evident.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Luna King

SPECIES

Canine

BREED

Newfoundland

SEX

Female Spayed

AGE

6 years

WEIGHT

110 lbs

INTERPRETED BY

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Sonya Myers DVM

HOSPITAL NAME

VCA Clermont AH

REFERRING VET

Calzada

INVOICE

13720

DATE

7.17.23

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Bilateral adrenomegaly
- Hepatopathy
- Gastric wall thickening

Secondary Findings

- Urinary bladder sediment

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the adrenomegaly would be pituitary-dependent Cushing's disease.

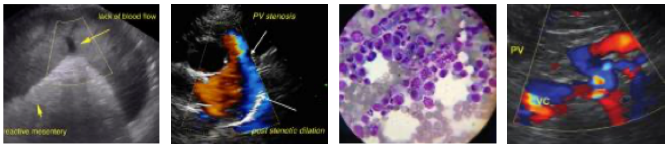
Etiologies for the hepatopathy would be reactive, vacuolar, metabolic, and chronic hepatitis, with infiltrative neoplasia a highly unlikely differential diagnosis.

Etiologies for the gastric wall thickening would be nonspecific gastritis (dietary indiscretion, toxins, viral), helicobacter gastritis, ulcerative gastritis, inflammatory bowel disease, with neoplasia an unlikely differential diagnosis.

Further assessment would be urinalysis, urine culture, adrenal function testing (ACTH stimulation/LDDS test), and possibly FNA cytology of the liver and gastroscopy with biopsies.

Specific therapy would be dependent on an etiological diagnosis.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™



SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Luna King

SPECIES

Canine

BREED

Newfoundland

SEX

Female Spayed

AGE

6 years

WEIGHT

110 lbs

INTERPRETED BY

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Sonya Myers DVM

HOSPITAL NAME

VCA Clermont AH

REFERRING VET

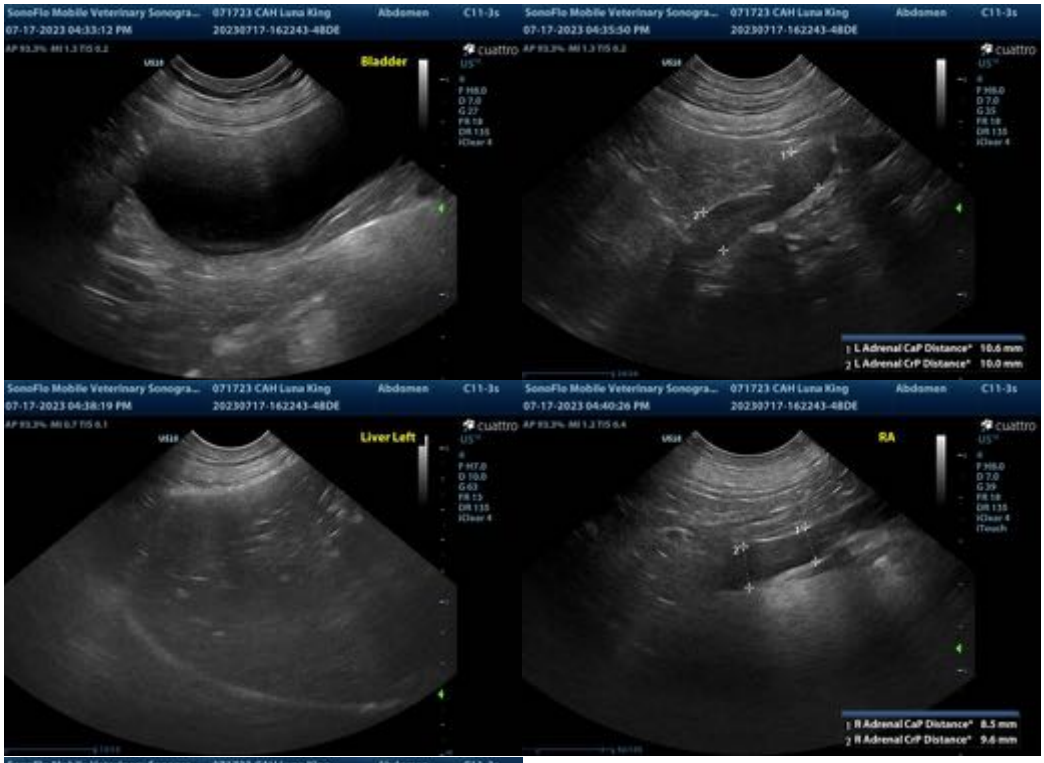
Calzada

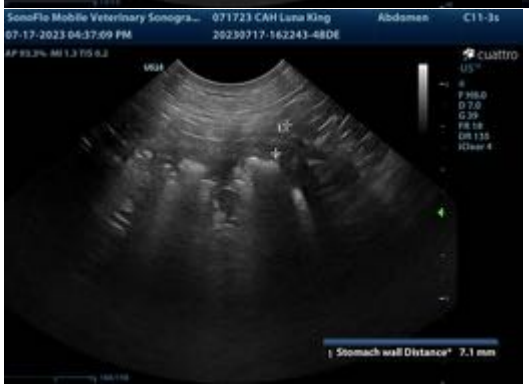
INVOICE

13720

DATE

7.17.23





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.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)
info@sonopath.com