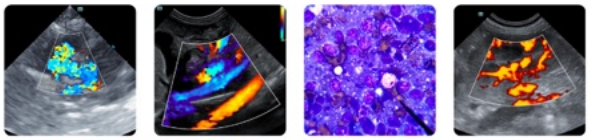


PATIENT

Hazel Corwin

SPECIES

Canine

BREED

Golden Doodle

SEX

Spayed female

AGE

10 years

WEIGHT

49 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Amanda Hartman DVM

HOSPITAL NAME

White Hall AC

REFERRING VET

Dr. Hartman

INVOICE

70269

DATE

1/19/26

PRESENTING CLINICAL SIGNS

History: Recently noticed mass under tongue
Large ulcerated irregular mass of the tongue growing under and up through the tongue; bleeding a lot now; LN aspirates were normal, chest rads normal, AUS has some fun findings, so I wanted extra eyes on this; suspect SCC vs amelanotic Melanoma; one surgery is a cure, the other sucks regardless; so trying to determine risks/benefits of surgery and rule out other disease/mets before doing a major surgery with partial/rostral glossectomy

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is normally distended. The urinary bladder wall appears thin, smooth, and regular. The urine is anechoic. The bladder neck and proximal urethra are unremarkable. There is no sonographic evidence of urolithiasis, inflammatory change, or neoplasia.

The left kidney is normal in shape and size, measuring 6.35×3.33 cm, with a cortical thickness of 0.48 cm in the sagittal plane. The right kidney is normal in shape and size, measuring 5.94×2.99 cm, with a cortical thickness of 0.50 cm in the sagittal plane. In both kidneys, the renal cortex is isoechoic relative to the liver parenchyma. The corticomedullary ratio and corticomedullary definition are preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis.

Adrenal Glands

Both adrenal glands demonstrate normal shape and echogenicity.

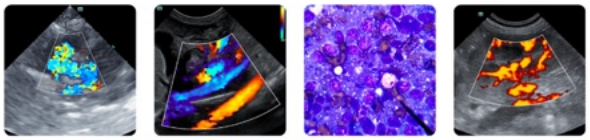
- Left adrenal gland: 0.44 cm (cranial pole), 0.43 cm (caudal pole).
- Right adrenal gland: 0.49 cm (cranial pole), 0.47 cm (caudal pole).

Spleen

The spleen measures approximately 1.98 cm in thickness, with mildly pointed margins. The splenic parenchyma is of normal echogenicity and fine homogeneous echotexture. A small, focal hypoechoic lesion measuring approximately 3.13×4.40 mm is identified at the caudal splenic margin. The splenic capsule is smooth and regular. Splenic vasculature appears normal.

Liver

The liver is subjectively normal in size, with sharp margins and a smooth contour. The hepatic parenchyma is uniform and isoechoic relative to the falciform fat, with normal echotexture. No hepatic lymphadenopathy is identified.



PATIENT

Hazel Corwin

SPECIES

Canine

BREED

Golden Doodle

SEX

Spayed female

AGE

10 years

WEIGHT

49 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Amanda Hartman DVM

HOSPITAL NAME

White Hall AC

REFERRING VET

Dr. Hartman

INVOICE

70269

DATE

1/19/26

The gallbladder is moderately distended. The gallbladder wall contains multiple hyperechoic foci intimately associated with the wall, consistent with marked mural mineralization, producing an appearance compatible with severe gallbladder wall mineralization ("porcelain gallbladder"–like appearance). The gallbladder lumen contains a mild to moderate amount of biliary sludge. No dilation of the cystic duct or common bile duct is observed.

Gastrointestinal

The stomach is empty and folded, with a mural thickness of approximately 2.33 mm and preserved wall layering. The pylorus measures approximately 4.31 mm, with a small amount of luminal fluid present.

The duodenum measures approximately 3.52 mm. The jejunum measures approximately 3.50 mm. The ileum measures approximately 2.91 mm. Wall layering is preserved throughout the examined small intestinal segments. No sonographic evidence of inflammation, obstruction, ileus, or foreign material is identified.

The colon measures approximately 1.35–1.46 mm, appears largely empty, and contains gas.

Pancreas

The pancreas is not clearly visualized on the provided images; however, the examined pancreatic regions do not demonstrate sonographic evidence of active inflammation.

Peritoneal Cavity

No abdominal effusion or sonographic evidence of peritonitis is observed.

A hypoechoic, mildly heterogeneous soft tissue mass measuring approximately 2.42×3.39 cm is identified immediately caudal and dorsal to the aortic trifurcation, adjacent to the iliac arteries and ventral to the descending colon. The mass contains small internal foci suggestive of mineralization.

Other abdominal lymph nodes are not visualized; the surrounding regions appear unremarkable. The iliac trifurcation is otherwise normal.

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS

- Hypoechoic, mildly heterogeneous mass (≈2.4 × 3.4 cm) in the iliac lymph node region, with focal mineralization.
- Severe gallbladder wall mineralization.

SECONDARY FINDINGS

- Small focal hypoechoic splenic lesion (subcentimeter).

PATIENT

Hazel Corwin

SPECIES

Canine

BREED

Golden Doodle

SEX

Spayed female

AGE

10 years

WEIGHT

49 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Amanda Hartman DVM

HOSPITAL NAME

White Hall AC

REFERRING VET

Dr. Hartman

INVOICE

70269

DATE

1/19/26

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

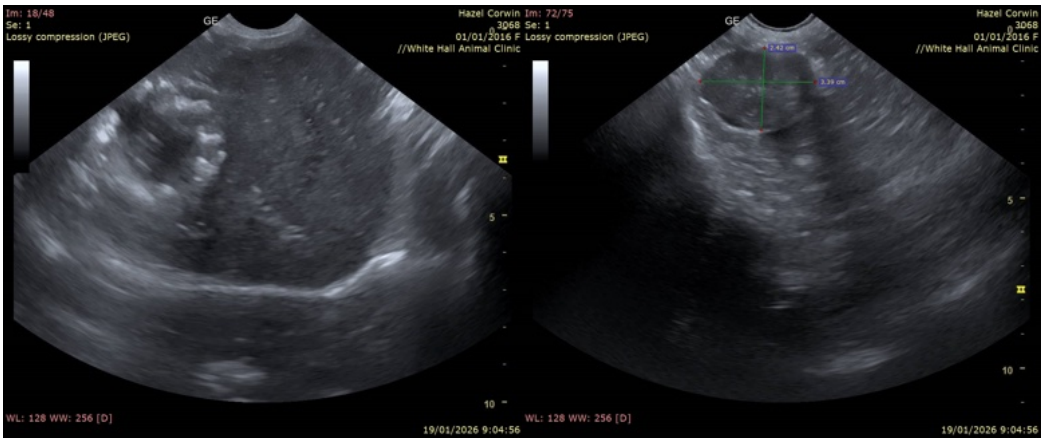
This abdominal ultrasound, identifies a soft tissue mass in the region of the iliac lymph nodes is identified, characterized by hypoechoic echogenicity, mild heterogeneity, and focal mineralization. Given its location at the aortic trifurcation and adjacent to the iliac vessels, this finding is most consistent with an enlarged iliac lymph node, with features that are suspicious for metastatic involvement, particularly in the context of an aggressive oral neoplasm. Although the location is atypical for first-line metastatic spread from a lingual tumor, the size and appearance of this iliac-region mass warrant further characterization, as it may represent either metastatic disease or an unrelated retroperitoneal process.

The gallbladder demonstrates severe mural mineralization, producing a porcelain gallbladder–like appearance. This finding is most consistent with dystrophic mineralization secondary to a chronic degenerative or inflammatory process. In the absence of biliary obstruction or clinical signs of hepatobiliary disease, this finding is considered incidental at this time.

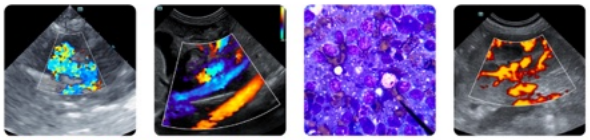
The small focal hypoechoic splenic lesion is subcentimeter in size and nonspecific. In isolation, it may represent a benign incidental finding (nodular hyperplasia); however, in the context of known malignancy, metastatic disease cannot be definitively excluded, although this lesion is considered of lower concern than the iliac nodal mass.

Recommendations

- Fine-needle aspiration or biopsy of the iliac lymph node mass is recommended for cytologic or histopathologic characterization.
- Given that sampling of the iliac lymph node is recommended, and acknowledging that certain neoplastic processes may infiltrate the spleen in a diffuse manner without producing overt ultrasonographic changes, splenic fine-needle aspiration may also be considered at the same time if there is clinical concern or diagnostic uncertainty.
- Correlation with hepatobiliary laboratory is recommended to further evaluate the functional significance of the gallbladder wall mineralization.



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Hazel Corwin

SPECIES

Canine

BREED

Golden Doodle

SEX

Spayed female

AGE

10 years

WEIGHT

49 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Amanda Hartman DVM

HOSPITAL NAME

White Hall AC

REFERRING VET

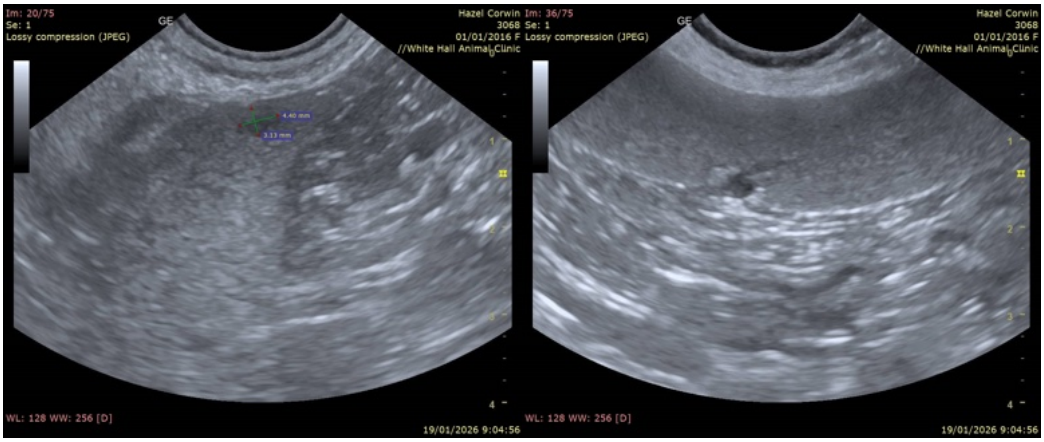
Dr. Hartman

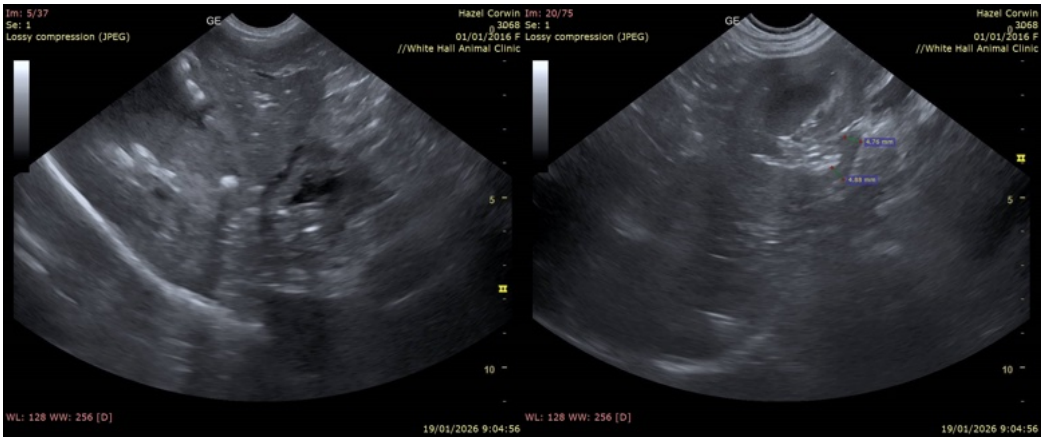
INVOICE

70269

DATE

1/19/26





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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

MV Esp Ultrasound in Domestic and Wild Animals

info@SonoPath.com