



PATIENT PRESENTING CLINICAL SIGNS

Buddy Lion History: P presented for lethargy, depression, weight loss, not eating well. Owner is elderly and in a rehab center. Children are taking care of pet
SPECIES HCT 21.5, Retic 404, WBC 36, Neu 29, Mono 1.7, PLt 70 Glu 67, ALKP 531

Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Beagle Mix **Urinary System**

SEX The urinary bladder, trigone, and pelvic urethra are unremarkable with normal wall thicknesses and normal tone. The ureters were not visualized, which is a normal finding. There are no uroliths or sediment noted, and anechoic urine is present. The ureteral papillae appear normal. There is no evidence of inflammatory, infiltrative, or neoplastic disease.

Neutered male

AGE The kidneys are normal in size and structure. The cortices are hyperechoic with a loss of corticomedullary definition. The cortex to medulla ratio is appropriate with no significant pyelectasia or pelvic dilation. There are mild, bilateral cortical cystic changes with mild dystrophic mineralization and no evidence of obstructive disease. The capsules are mildly irregular bilaterally. The left kidney measured 6.65 cm. The right kidney measured 7.24 cm.

11 years

WEIGHT

39.4 lbs

INTERPRETED BY Adrenal Glands

Bradley Harris, DVM, DACVECC, DACVIM (cardiology) Both adrenal glands are visualized and have normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.84 x 2.7 cm and the right adrenal gland measured 0.86 x 2.53 cm.

IMAGING PERFORMED BY

Kathleen Byrnes

Spleen

HOSPITAL NAME

AH of Boone

The spleen measured 1.96 cm at the hilus. There are multiple, hyperechoic and heterogenous mass effects that distort the smooth splenic contour. The unaffected parenchyma is homogenous and smooth with normal vasculature and no evidence of congestion, spontaneous echo contrast or thrombosis.

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Liver

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The liver is diffusely affected with multiple, heterogenous and hypoechoic mass effects. The largest of which appears to extend from the left lateral liver into the mid abdomen with moderate to severe regions of cavitation. Vasculature is within normal limits with no evidence of congestion. There is minimal, normal hepatic parenchyma identified. The gallbladder has thin walls with contains anechoic bile. There is no evidence of intra- or extra-hepatic biliary dilation. The cystic and common bile ducts were normal. No hepatic lymphadenopathy is documented. There is no overt structural evidence of inflammatory, infiltrative or regenerative pathology evident.

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Gastrointestinal

The stomach and intestines are free of stasis and peristaltic activity, with no significant dilation noted. There is normal wall thickness and acceptable curvilinear mural detail. The pyloric-duodenal junction and ileocecolic junction are patent, and the colon contains normal shadowing feces. There is no evidence of shadowing obstructive material or overt infiltrative disease noted. No associated abnormal lymphatic activity is documented.

Pancreas

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Mild to moderate iliac lymphadenopathy with irregular contour. There are multiple nodular changes throughout the mesentery that are mildly hypoechoic to the surrounding mesentery. There is no overt free peritoneal effusion noted.

ULTRASONOGRAPHIC FINDINGS

- There is increased renal cortical echogenicity and thickening with a mildly irregular capsular contour. Multifocal cystic cortical changes are noted. This is secondary cystic formation consistent with degenerative changes and remodeling. There is no evidence of abscessation or suspicion of neoplasia. Dystrophic mineralization was noted and is non-obstructive at this time, with no evidence of pylectasis.
- Multiple splenic masses that are non-cavitated, but distort the splenic capsule. Concerning for potential infiltrative metastatic neoplastic disease.
- Multiple, large hepatic masses with cavitation. Concern for likely neoplastic disease such as hemangiosarcoma.
- Iliac lymphadenopathy is likely secondary to metastatic neoplasia; however, reactive lymphadenitis cannot be definitively excluded.
- Nodular changes throughout the mesentery are concerning for metastatic neoplastic disease. Hemangiosarcoma is considered most likely differential.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If further therapy is desired a CT scan with angiography is recommended for surgical planning prior to exploratory laparotomy with partial hepatectomy and splenectomy. However, given the severity and the diffuse nature of changes, prognosis would be considered poor regardless of therapeutic option elected.



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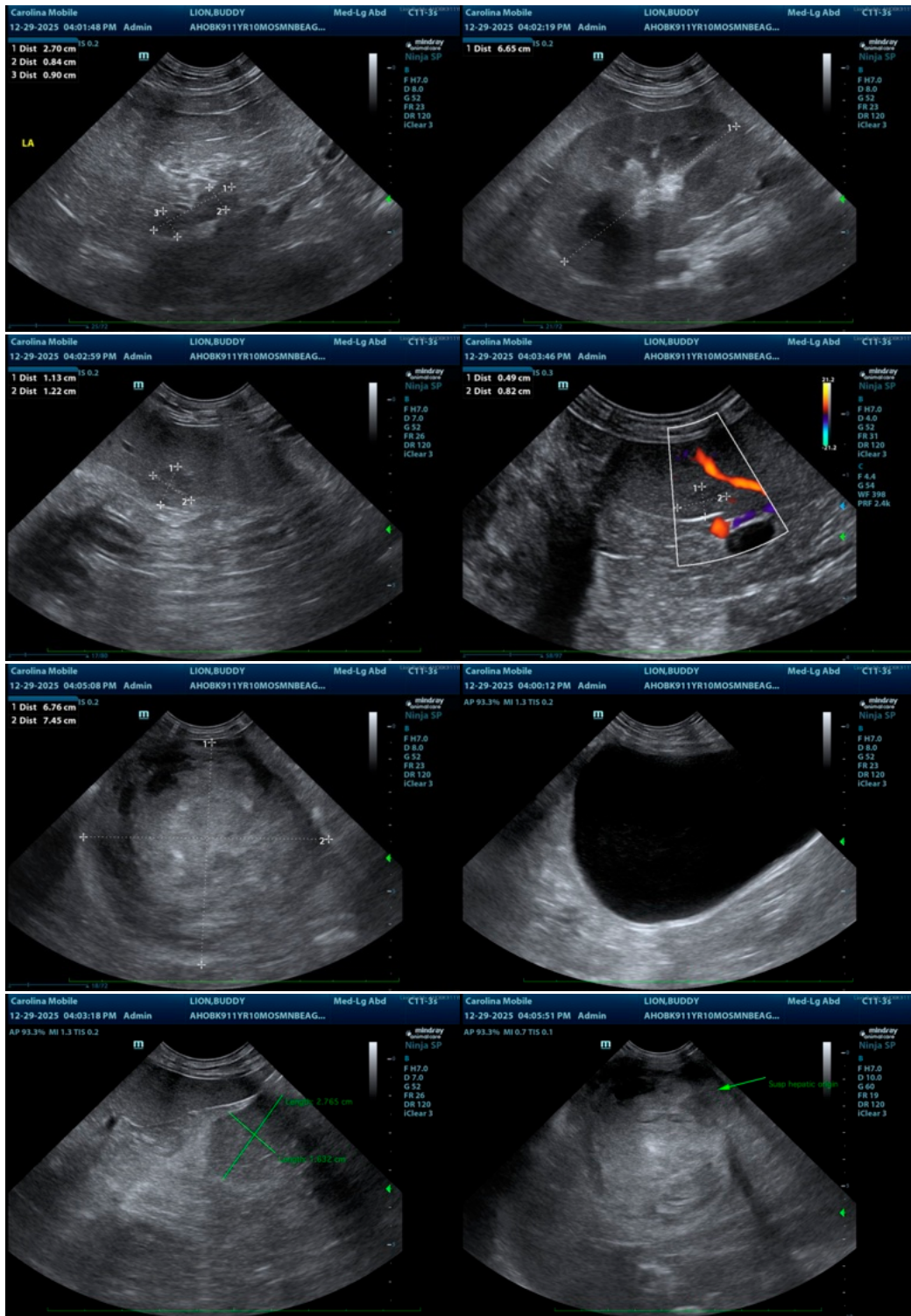
Dr. Watson

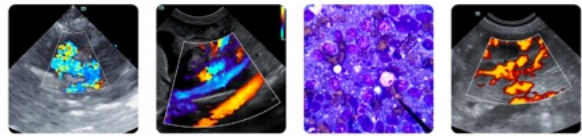
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

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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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info@SonoPath.com

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