



## PATIENT

Teddy Vega

## SPECIES

Canine

## BREED

Mixed

## SEX

Neutered Male

## AGE

9 Years

## WEIGHT

40.6 lbs

## INTERPRETED BY

Eric Lindquist, DMV,  
DABVP (CFM), Cert.  
IVUSS

## IMAGING PERFORMED BY

Dr. Rivera

## HOSPITAL NAME

DPC Veterinary  
Hospital

## REFERRING VET

Dr. Weeks

## INVOICE

72185

## DATE

1/13/26

## PRESENTING CLINICAL SIGNS

Anorexia, lethargy, pale mucous membranes.

Abnormal PE/Chem/CBC/UA Results: Cardiovascular/Respiratory: Pale mucous membranes. Gastrointestinal / Abdominal: moderately to severely painful on palpation (splinting/grunts/cries): mass? Severe anemia (decreased RBC/HCT/HGB Leukocytosis neutrophilia w/suspected left shift Thrombocytopenia severe Chem wnl: \*\*Spec cPLI: normal - Radiology (abdominal) - Moderate reduction of peritoneal serosal detail, most consistent with effusion; hemorrhagic cause considered; possible splenic mass. - Recent Hematocrit - 19. - Recent - Hookworms detected.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

The residual prostate measured 7.0 mm.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. Left kidney measured 5.0 cm. Right kidney measured 5.0 cm.

### Adrenal Glands

The **left adrenal gland** was visualized and recognized as having 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 0.50 cm.

The region of the **right adrenal gland** was imaged, no evident pathology.

### Spleen

The **spleen** revealed multiple expansive, mixed hypoechoic masses measuring up to 4.0 cm each with reactive surrounding mesentery and some cavitation. No free fluid noted in the abdomen at the time of the sonogram.

### Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations



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regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable. No obvious evidence of metastatic disease.

## Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

## Pancreas

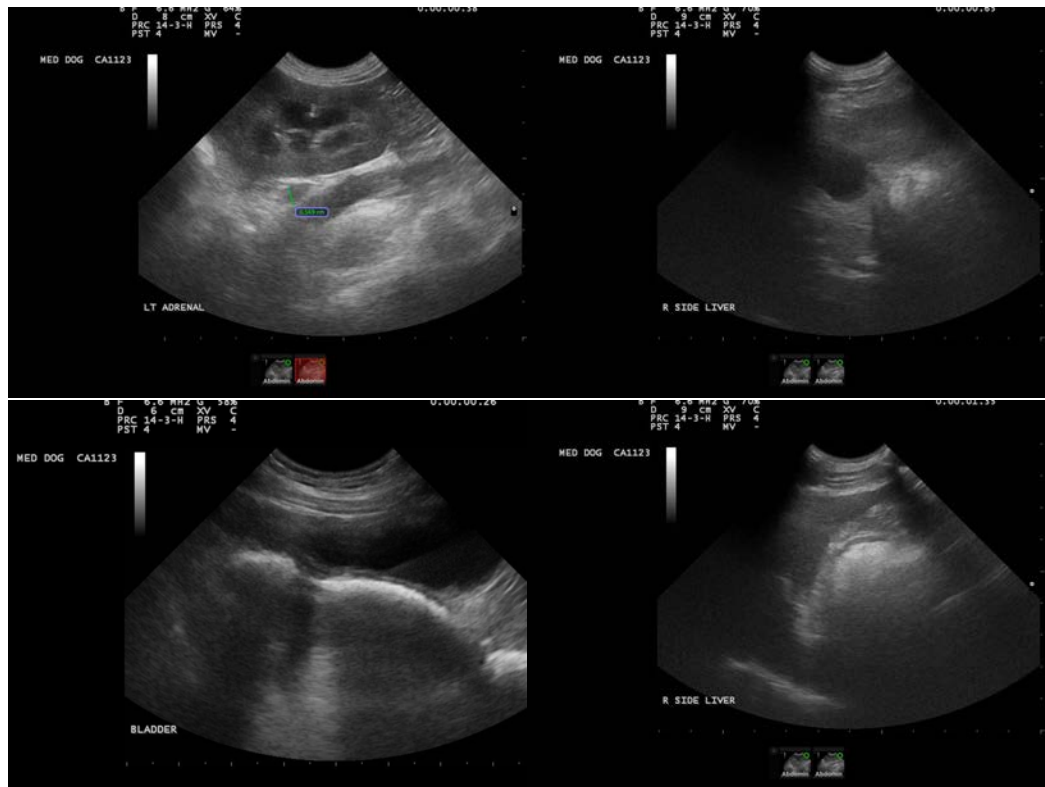
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

## ULTRASONOGRAPHIC FINDINGS

- Multiple splenic masses.
- Age related hepatic changes.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No obvious organ metastasis. Chest radiographs and rapid echocardiogram recommended followed by exploratory surgery/splenectomy.





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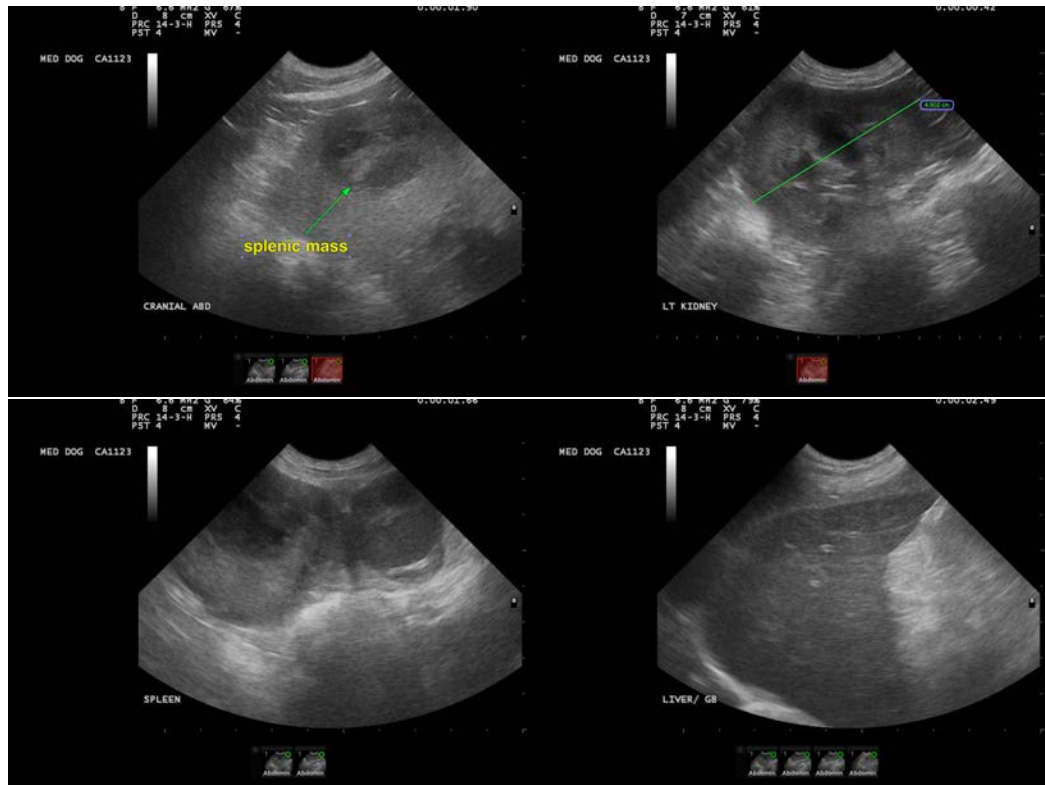
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS,  
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