



PATIENT

Kismet Bustien

SPECIES

Canine

BREED

Pit Bull x

SEX

Spayed Female

AGE

13 Years

WEIGHT

100 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

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

HOSPITAL NAME

Animal Hospital of
Sussex County

REFERRING VET

Dr. Spinks

INVOICE

72230

DATE

1/15/26

PRESENTING CLINICAL SIGNS

UTI. On Amox/Clav BID 3 weeks.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** 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 4.0 cm beyond the cystourethral junction. The pelvis urethra was dilated, suggestive for poor tone.

The iliac trifurcation was unremarkable.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Left kidney measured 6.44 cm. Right kidney measures 6.84 cm.

Adrenal Glands

The left adrenal gland measured at the upper limits of normal to slightly enlarged at 2.97 cm x 0.96 cm.

The right adrenal gland was enlarged, heterogeneous and nodular, measuring 3.24 cm x 1.53 cm at the cranial pole and 1.21 cm at the caudal pole.

Spleen

The **spleen** revealed a 13.0+ cm parenchymal mass with areas of cavitation. Nodular changes, enhanced mesentery, and slight free fluid noted. The mass extended into the regional omentum. Omental mass extension measured 3.0 cm x 2.0 cm.

Liver

The **liver** was heterogeneous with mixed hypoechoic nodular changes with irregular capsular expansion, strongly suggestive for metastatic disease. The gallbladder and common bile duct were unremarkable.

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.



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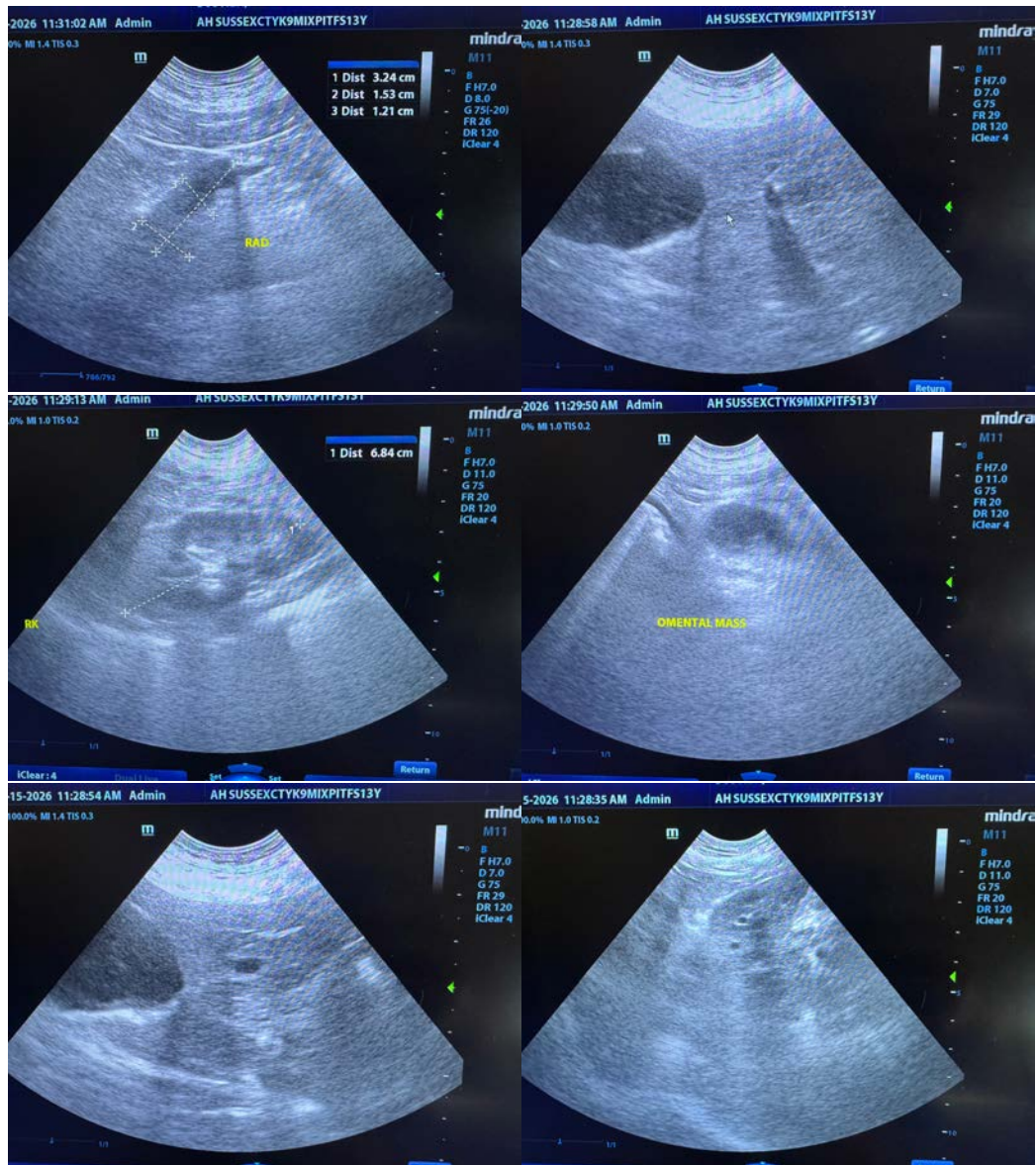
1/15/26

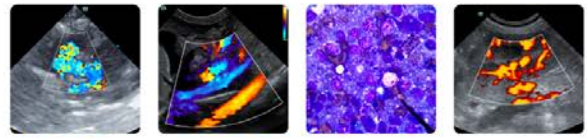
ULTRASONOGRAPHIC FINDINGS

- Splenic mass with rupture and nodular changes, omental spread.
- Nodular hepatic changes, strongly suggestive for metastatic disease.
- Bilateral adrenal hypertrophy, suggestive for potential PDH.
- Poor urethral tone, suspect primary incontinence.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If chest radiographs are free of evident pathology, exploratory surgery could be considered. However, clean resection of the pathology is unlikely. Round cell neoplasia or hemangiosarcoma are primary differentials. This presentation is fairly aggressive.





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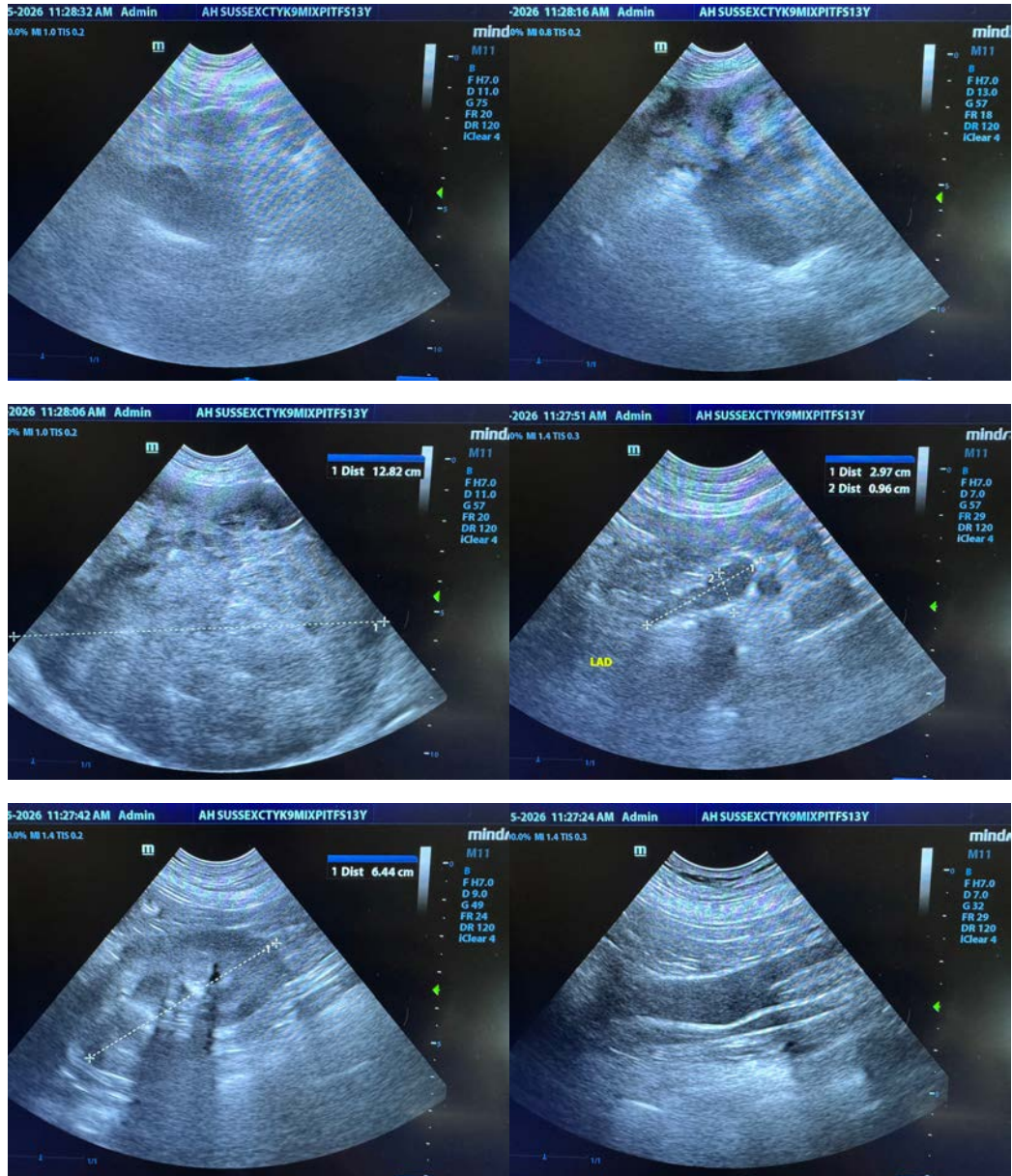
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@SonoPath.com