



**PATIENT PRESENTING CLINICAL SIGNS**

Bella Jordan  
Loss of appetite, panting, low grade fever  
Abnormal Laboratory Findings  
AST = 70, Alk Phos = 169, T. Bili = 0.5 otherwise the chem and CBC were normal

**SPECIES Current Medications**

Canine  
Cerenia, sucralfate

**BREED Radiographic Findings**

Australian Shepherd  
panting, getting blurred images. no obvious abnorms

**SEX**

Spayed Female

**AGE**

9 Years

**WEIGHT**

67 Pounds

**INTERPRETED BY**

Kathleen Sennello DVM,  
MS, Diplomate ACVIM  
(Small Animal Internal  
Medicine)

**IMAGING PERFORMED BY**

Sara Hansen

**HOSPITAL NAME**

Q Street AH

**REFERRING VET**

Dr.

**INVOICE**

44292

**DATE**

1/18/23

**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 **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. The left kidney measured 6.06 cm. The right kidney measured 6.0 cm.

**Adrenal Glands**

The **adrenal glands** were not imaged owing to the precarious nature of the mass.

**Spleen**

A mixed hypoechoic complex **splenic** mass was noted measuring 7.3 cm with surrounding free fluid. Enhanced mesentery and adhesions noted. The mass extends into regional omentum, which renders clean resection difficult.

**Liver**

The **liver** was swollen and irregular with isoechoic nodular changes. 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.



**PATIENT** *Free Abdomen*

Bella Jordan Rapid view of the heart revealed tachycardia, yet no evidence of right auricular mass or pericardial effusion.

**SPECIES** **ULTRASONOGRAPHIC FINDINGS**

- Canine
- Ruptured splenic mass with omental adhesions and potential hepatic involvement
  - Age related renal changes
  - Tachycardia

**BREED**

Australian Shepherd

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**SEX**

Spayed Female

FNA of the spleen and liver could be considered to assess for round cell involvement in both organs, or direct exploratory surgery with splenectomy and liver biopsy. Hemangiosarcoma versus round cell neoplasia. Prognosis is extremely guarded.

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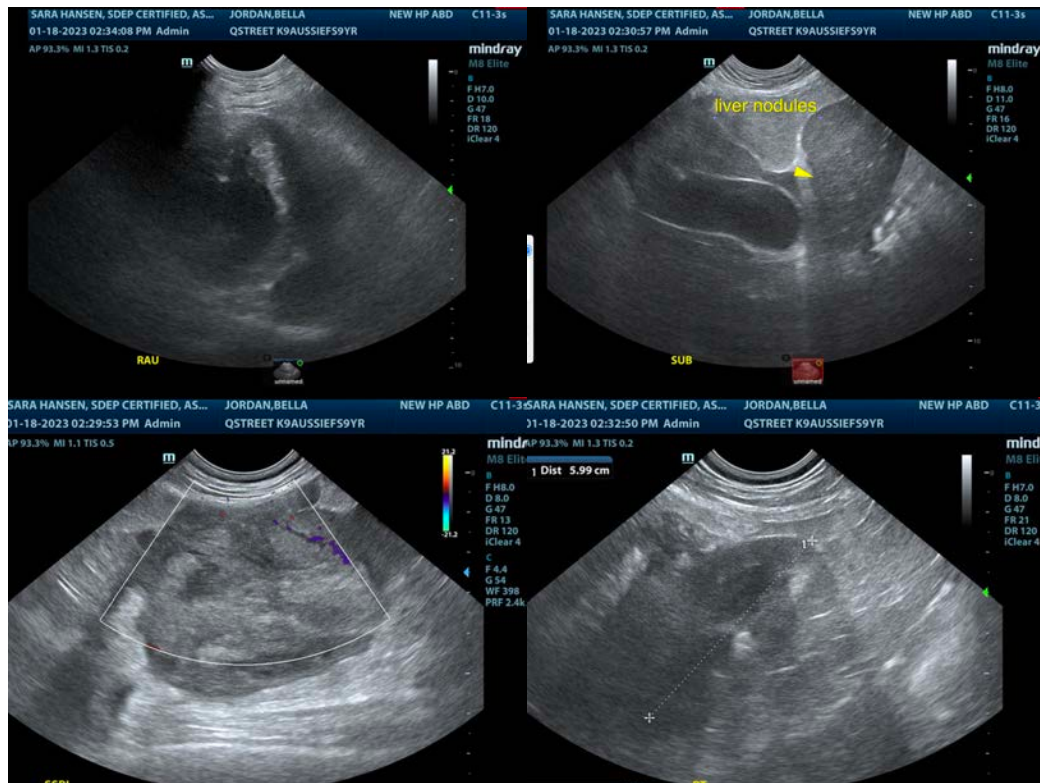
Dr.

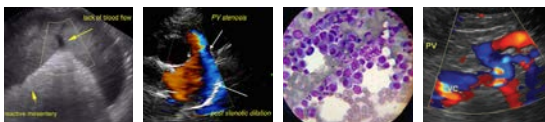
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## SPECIES

Canine

## BREED

Australian Shepherd

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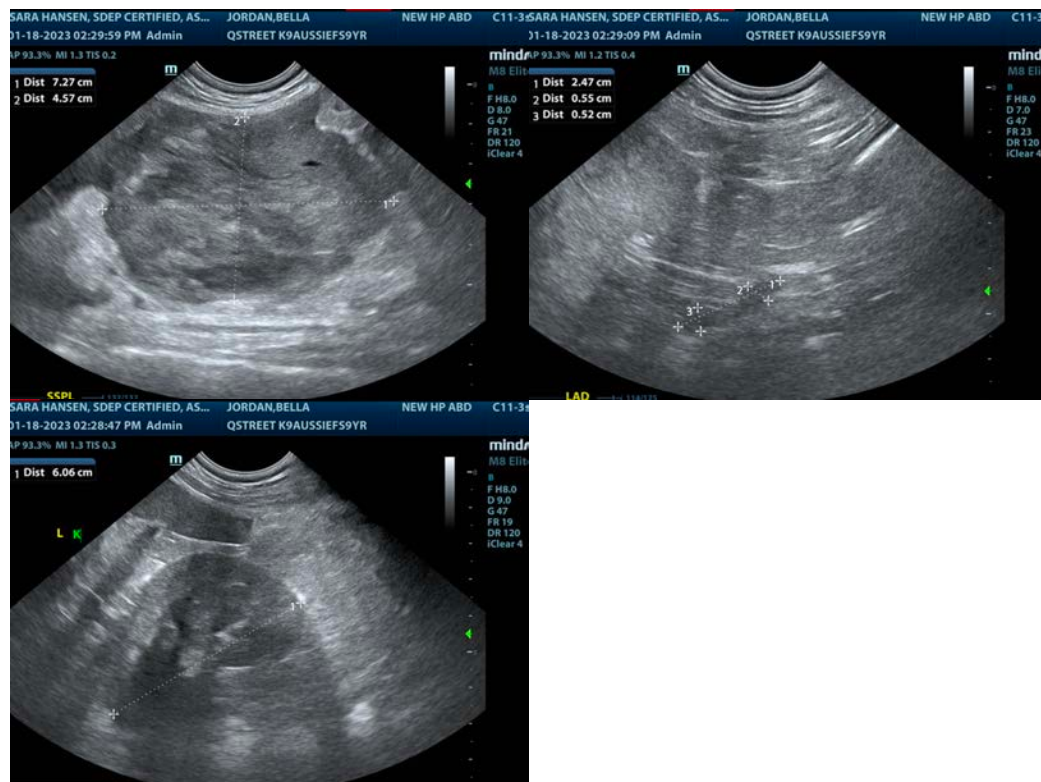
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com**

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