



PATIENT

Bucky Anderson
18975B

SPECIES

Canine

BREED

American Eskimo X

SEX

Spayed Female

AGE

8 Years

WEIGHT

25 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

Madison Veterinary
Specialists

INVOICE

35038

DATE

1/25/22

PRESENTING CLINICAL SIGNS

Progressive lethargy over the past 4 days and did not want to rise today. Owners have noticed that she has had an increased thirst and she will vomit up water when she drinks too much. Did get into garbage a few days ago and thought she may have eaten something. Radiographs performed at pDVM today were concerning for abdominal effusion. When walked outside patient collapsed. Presented to MVS laterally recumbent with labored breathing, tense abdomen, febrile (104F), and hypoglycemia. Abnormal PE/Chem/CBC/UA Results: Leukocytosis characterized by neutrophilia, monocytosis, and eosinopenia, elevated MPV, hyperglycemia, azotemia, hyperphosphatemia, elevated SDMA, hyperproteinemia, hyperglobulinemia, hypercalcemia, elevated ALP, hyperbilirubinemia, hypercholesterolemia, hypochloremia.

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 **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. The right kidney measured 6.05 cm. The left kidney measured 5.55 cm.

Adrenal Glands

Both **adrenal glands** were 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 0.55 cm at the cranial pole and 0.67 cm at the caudal pole.

Spleen

The **spleen** was folded upon itself and mildly heterogeneous. Hypoechoic nodular changes noted with lipid plaques.

Liver

The **liver** presented heterogeneous parenchymal changes with slightly hypoechoic nodules, non-disruptive, the largest of which measured 1.26 cm in the left liver. Coarse architecture noted with increased portal markings. The gallbladder was unremarkable.

Gastrointestinal

The **stomach** was empty. An undifferentiated 2.26 cm x 1.76 cm mineralized, mural jejunal mass noted. The distal small intestine revealed areas of stasis with reactive mesentery and undefined minor mural thickening. Only one region revealed neoplastic criteria. However, complicated inflammatory bowel is entirely possible. A portion of approximately 6-8 cm of variably thickened intestine was noted with reactive surrounding mesentery and a focal mass lesion. A reactive mesenteric lymph node measured 0.69 cm.



PATIENT

Pancreas

Bucky Anderson
18975B

The **pancreas** was largely uniform.

SPECIES

Free Abdomen

Canine

Slight free fluid noted in the abdomen.

BREED

American Eskimo X

ULTRASONOGRAPHIC FINDINGS

- Heterogeneous, nodular spleen
- Heterogeneous, nodular liver
- Jejunal mass and other variably thickened intestine

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

Spayed Female

The entire pathology may be resectable, optimally guided by intraoperative ultrasound to delineate fresh intact bowel and remove the pathological bowel. However, biopsy should be submitted from various portion of the affected jejunum, as a focal mass was present. It will feel like a marble or similar texture upon surgical approach. However, a tapering intestinal infiltrative pattern was present for approximately 8.0 cm. Reactive mesentery is noted around this region of intestine. A transitional state between chronic inflammatory disease and neoplasia is a strong potential in this case. Surgical approach is recommended. However, screening FNA of the spleen and liver could be considered to ensure the nodular changes are benign and unrelated.

AGE

8 Years

WEIGHT

25 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

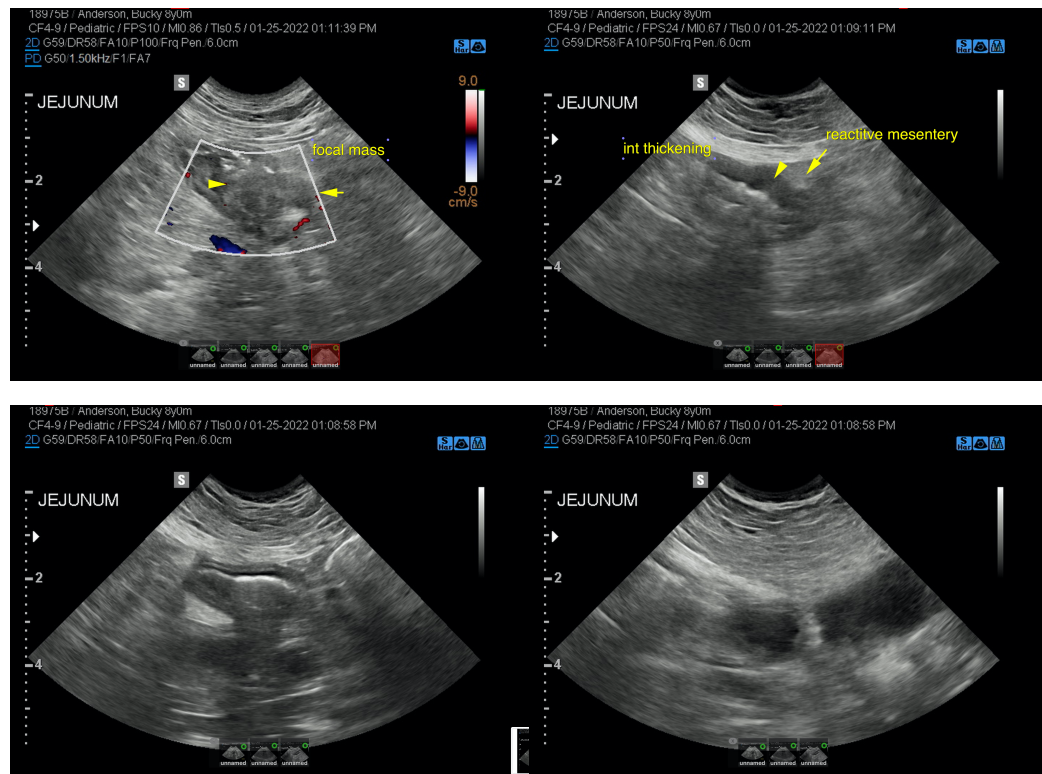
Madison Veterinary
Specialists

INVOICE

35038

DATE

1/25/22





PATIENT

Bucky Anderson
18975B

SPECIES

Canine

BREED

American Eskimo X

SEX

Spayed Female

AGE

8 Years

WEIGHT

25 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

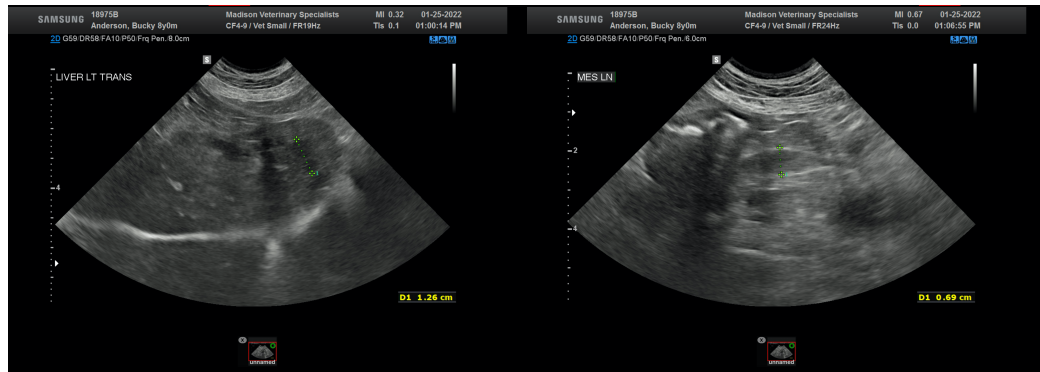
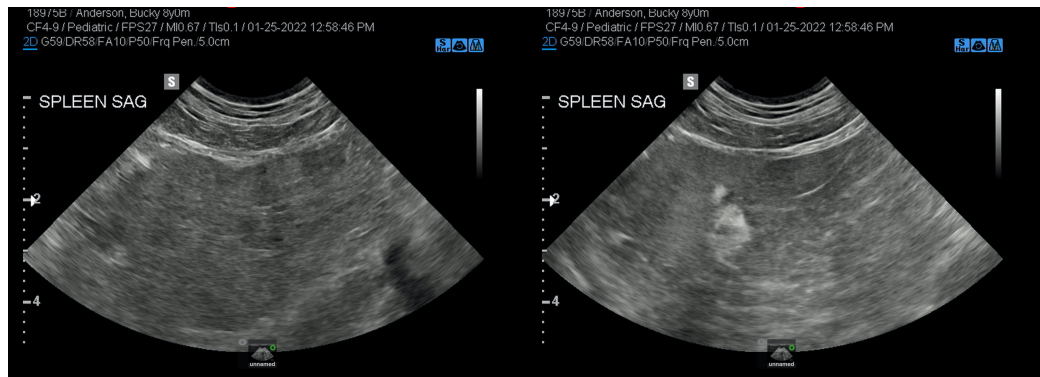
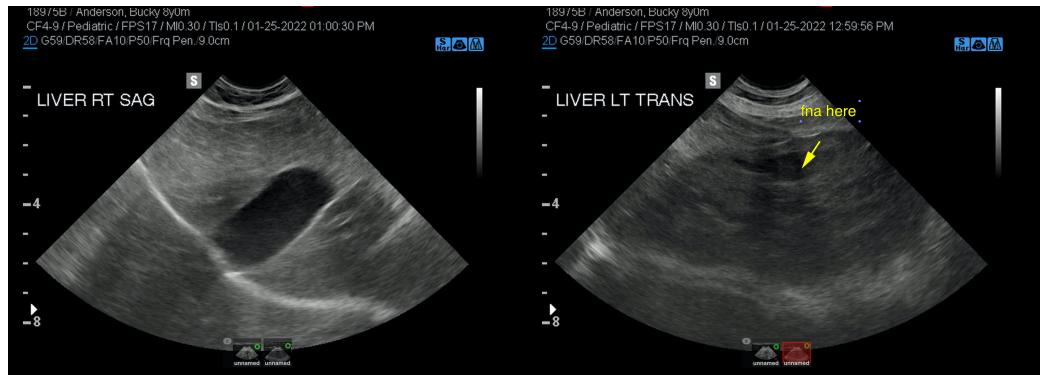
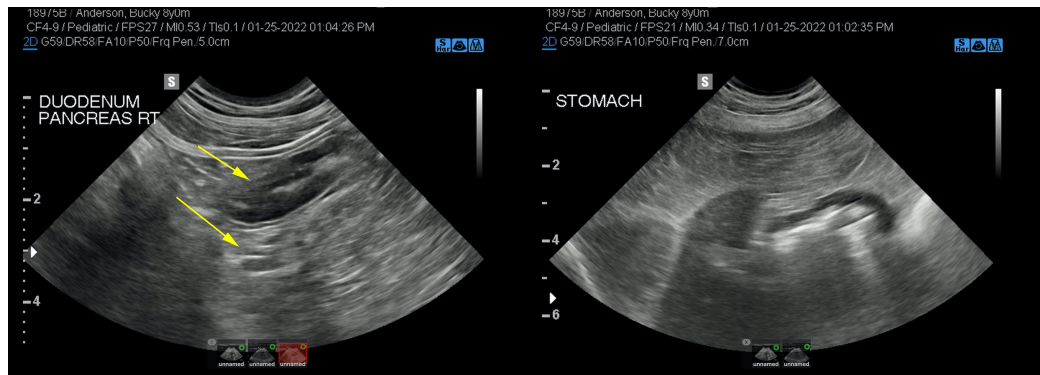
Madison Veterinary Specialists

INVOICE

35038

DATE

1/25/22





PATIENT

Bucky Anderson
18975B

SPECIES

Canine

BREED

American Eskimo X

SEX

Spayed Female

AGE

8 Years

WEIGHT

25 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

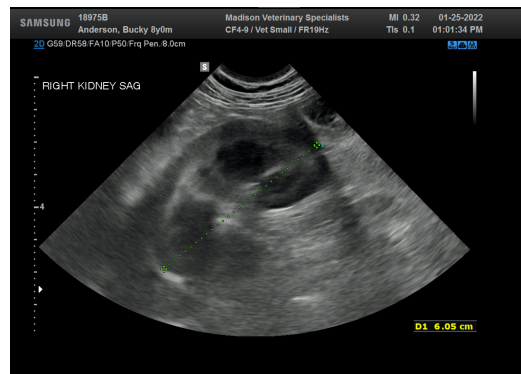
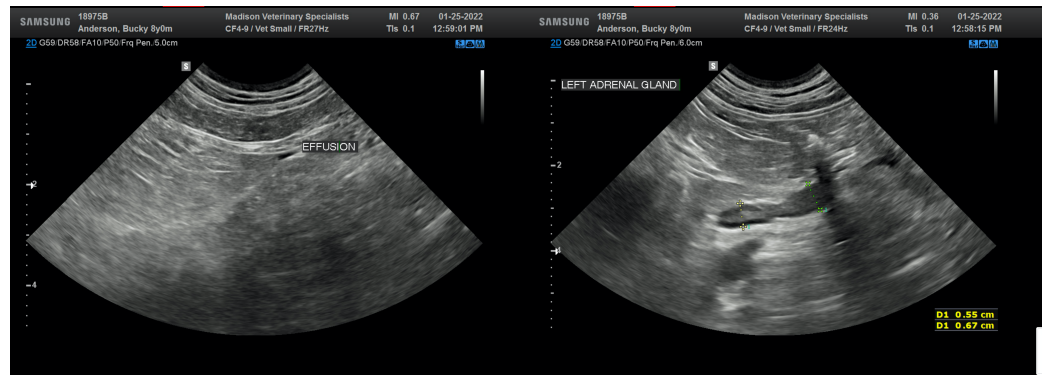
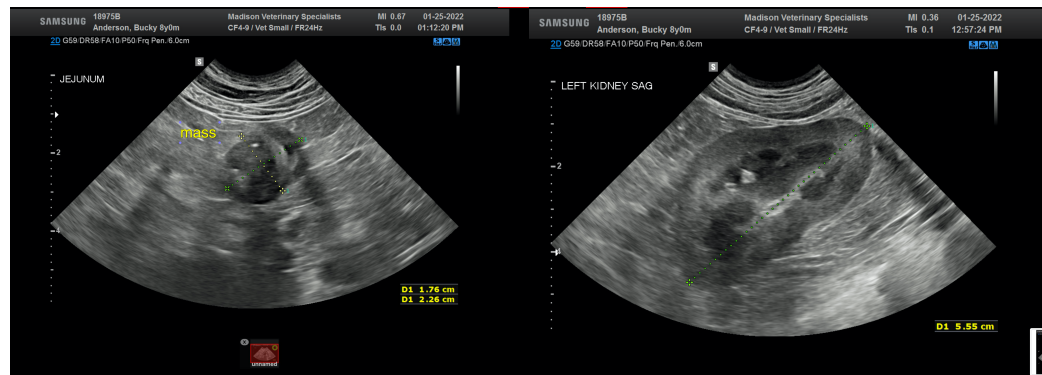
Madison Veterinary
Specialists

INVOICE

35038

DATE

1/25/22



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

info@SonoPath.com