



PATIENT

Ruby Schubert

SPECIES

Canine

BREED

Maltese Mix

SEX

Spayed female

AGE

12 years

WEIGHT

12.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Michelle Roche

HOSPITAL NAME

Fredon AH

REFERRING VET

Dr. Grau

INVOICE

70991

DATE

1/27/26

PRESENTING CLINICAL SIGNS

- Had few episodes of stiffness/distress last night. Not eating
- Portosystemic shunt dog, constrictor ring placed in 2014
- Pale, murmur, doughy abdomen, HCT 29, retic 197, plt 99, mpv 13.4TP 5.0, Glob 2.4, ALKP 250

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 was 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 3.9 cm. The right kidney measured 4.0 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.

Spleen

The **spleen** was mildly enlarged with mixed, hypoechoic 4.0 cm mass in the cranial abdomen with enhanced surrounding mesentery. A large amount of echogenic free fluid/ascites was noted.

Liver

The **liver** was mildly subnormal in size and subjectively normal vascularity. However, isoechoic to hypoechoic nodular changes were noted in the liver. The gallbladder and common bile duct were unremarkable. There was no evidence of residual portosystemic shunt.

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



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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.

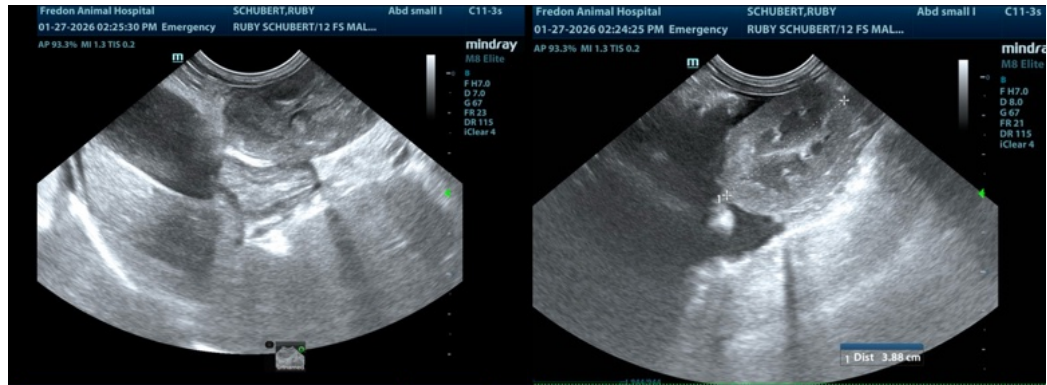
ULTRASONOGRAPHIC FINDINGS

Splenic mass with likely rupture or paraneoplastic effusion.

Liver nodules.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

An abdominocentesis is warranted. FNA of the liver and spleen is indicated or direct exploratory surgery with expectations towards splenectomy Liver injection and biopsy is recommended, yet this is likely a diffuse disease process. Chest radiographs +/- echocardiogram is warranted prior to surgery.





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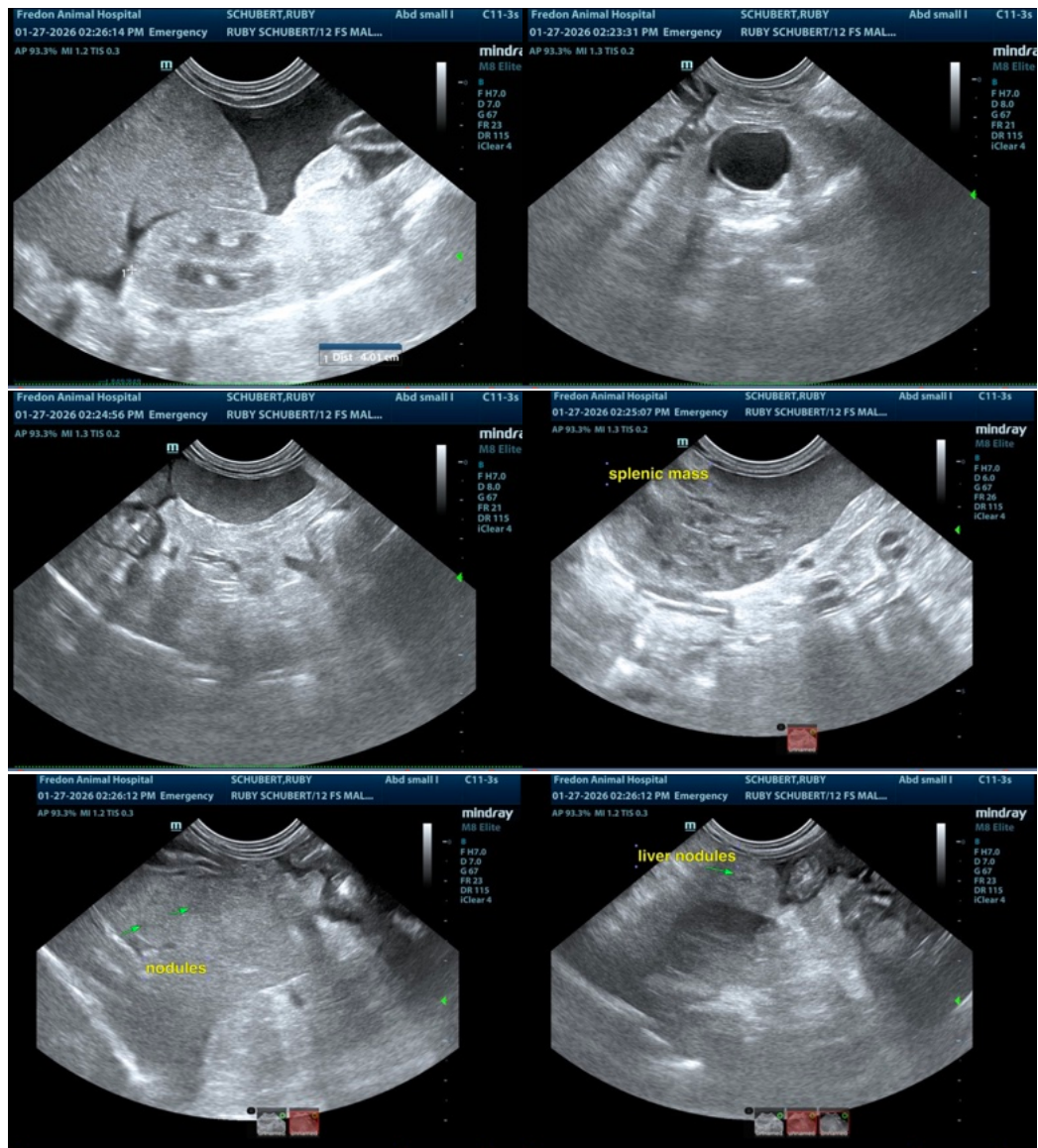
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, CEO of SonoPath.com

info@SonoPath.com