



**PATIENT**

Brady Messinger

**PRESENTING CLINICAL SIGNS**

Bloated distended abdomen.  
Abnormal PE/Chem/CBC/UA Results: PCV 32%

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Lab X

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.

**SEX**

Neutered Male

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. A cortical infarct was noted in the dorsal cortex of the left kidney. The left kidney measured 6.72 cm. Microinfarcts noted throughout both renal cortices. The right kidney measured 6.72 cm. Moderate degenerative changes in both kidneys.

**AGE**

9 Years

**Adrenal Glands**

**WEIGHT**

74 Pounds

The **adrenal glands** were not visualized.

**Spleen**

The visible **spleen** was unremarkable and fairly uniform with slight irregular contour.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**Liver**

The **liver** was riddled with multiple cavitated, complex masses, the largest of which measured 8.0 cm. The primary mass was in the cranial liver and not resectable. The cavitations are likely the cause of hemorrhage. Nodular omental changes also noted. The gallbladder was unremarkable.

**IMAGING PERFORMED BY**

JK

**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.

**HOSPITAL NAME**

Hamburg Vet Clinic

**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.

**REFERRING VET**

Dr. Shaw

**INVOICE**

33960

**Free Abdomen**

A large amount of free fluid was noted in the abdomen.

**ULTRASONOGRAPHIC FINDINGS**

**DATE**

1/5/22

- Multiple hepatic masses
- Geriatric abdomen otherwise with ascites



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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Prognosis is poor. Hepatic hemangiosarcoma or carcinoma suspected. The lesions are not resectable.

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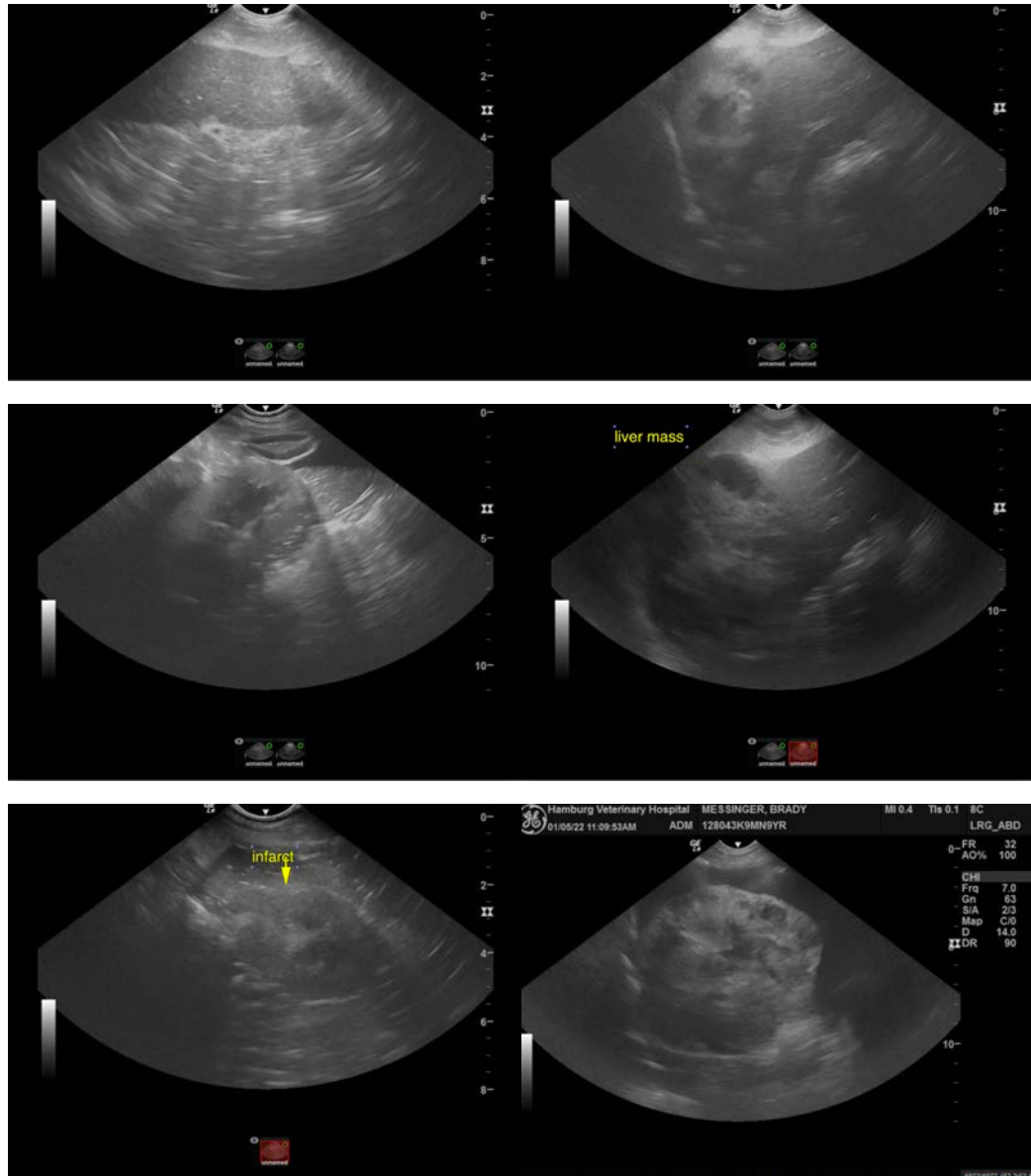
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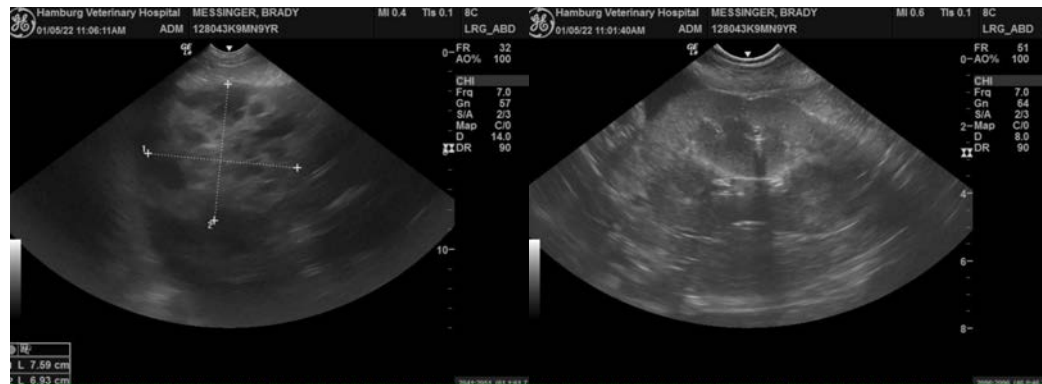
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@SonoPath.com)