



PATIENT

Sparky Cervino
Woodull

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered male

AGE

15 years

WEIGHT

21 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Kelly Vazquez, CVT

HOSPITAL NAME

Westwood Regional
VH

REFERRING VET

Dr. McConnell

INVOICE

95041

DATE

12/17/21

PRESENTING CLINICAL SIGNS

Suspected abdominal mass approx. 5.4 x 5 cm seen on AFAST scan. Current meds: Unasyn, Baytril, Zofram, Pepcid, and Buprenex, on IVF.
Abnormal PE/Chem/CBC/UA Results: WBC 24 x 10, neut. 10 x10, otherwise WNL.

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 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 left kidney measured 4.46 cm with trace pyelectasia.

Adrenal Glands

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins was noted. No overt suspicion of neoplasia was noted. This is considered likely a hyperplastic change associated with stress or adrenal endocrinopathy (PDH). If isosthenuria is persistently present and the patient morphologically suggests Cushing's disease then ACTH testing would be indicated. The left adrenal gland measured 2.77 x 1.22 cm at the caudal pole and 1.21 cm at the cranial pole. The right adrenal gland measured 2.3 x 1.1 cm at the caudal pole and 1.03 cm at the caudal pole.

Spleen

The spleen was normal and folded upon itself cranially.

Liver

The **liver** revealed a moderately complex, mixed hypoechoic 5.7 cm mass that was deriving from the caudal aspect of the left liver. The gallbladder presented some dependent debris with essentially normal contour. The gallbladder presented multiple polyps and minor excessive debris. This should be expressed t the time of surgery. The cystic and common bile ducts were normal. The hepatic lymph nodes were unremarkable.



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Gastrointestinal

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The **gastric** wall presented concentric hypertrophy and empty lumen. There was no loss of mural detail. The small intestines and colon were unremarkable.

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Pancreas

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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.

SEX

Neutered male

ULTRASONOGRAPHIC FINDINGS

Left caudal liver mass, suspect carcinoma. Potential for sarcoma. Appears resectable. The mass is pedunculated and at risk for torsion.

AGE

15 years

Bilateral adrenal hypertrophy moderate to severe, I suspect PDH/Cushing's.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

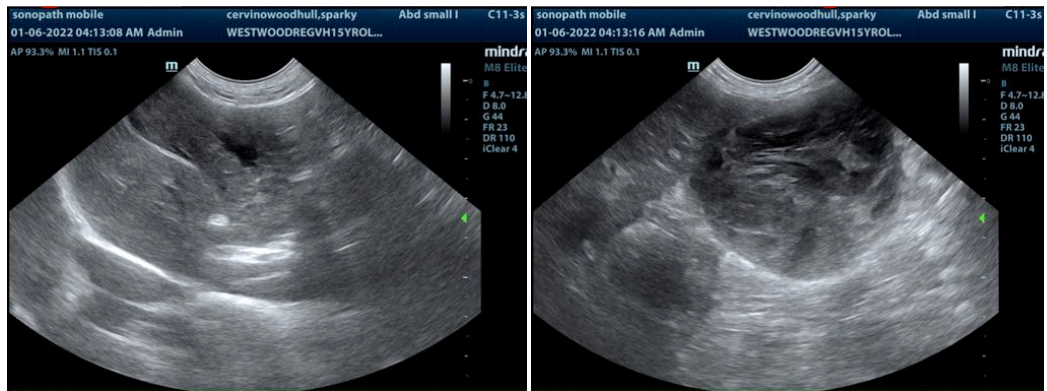
WEIGHT

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Left liver lobectomy is warranted with gallbladder expression or proactive removal.

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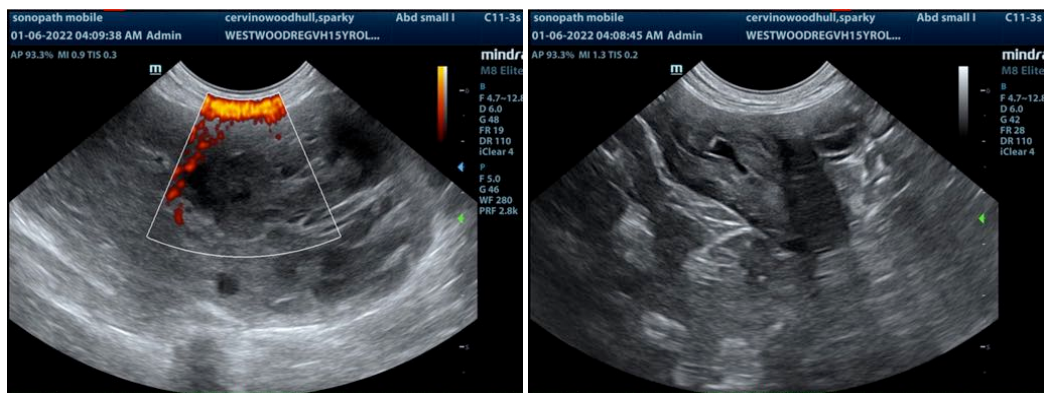
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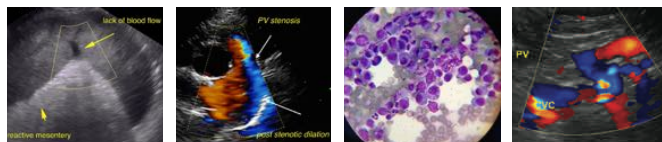


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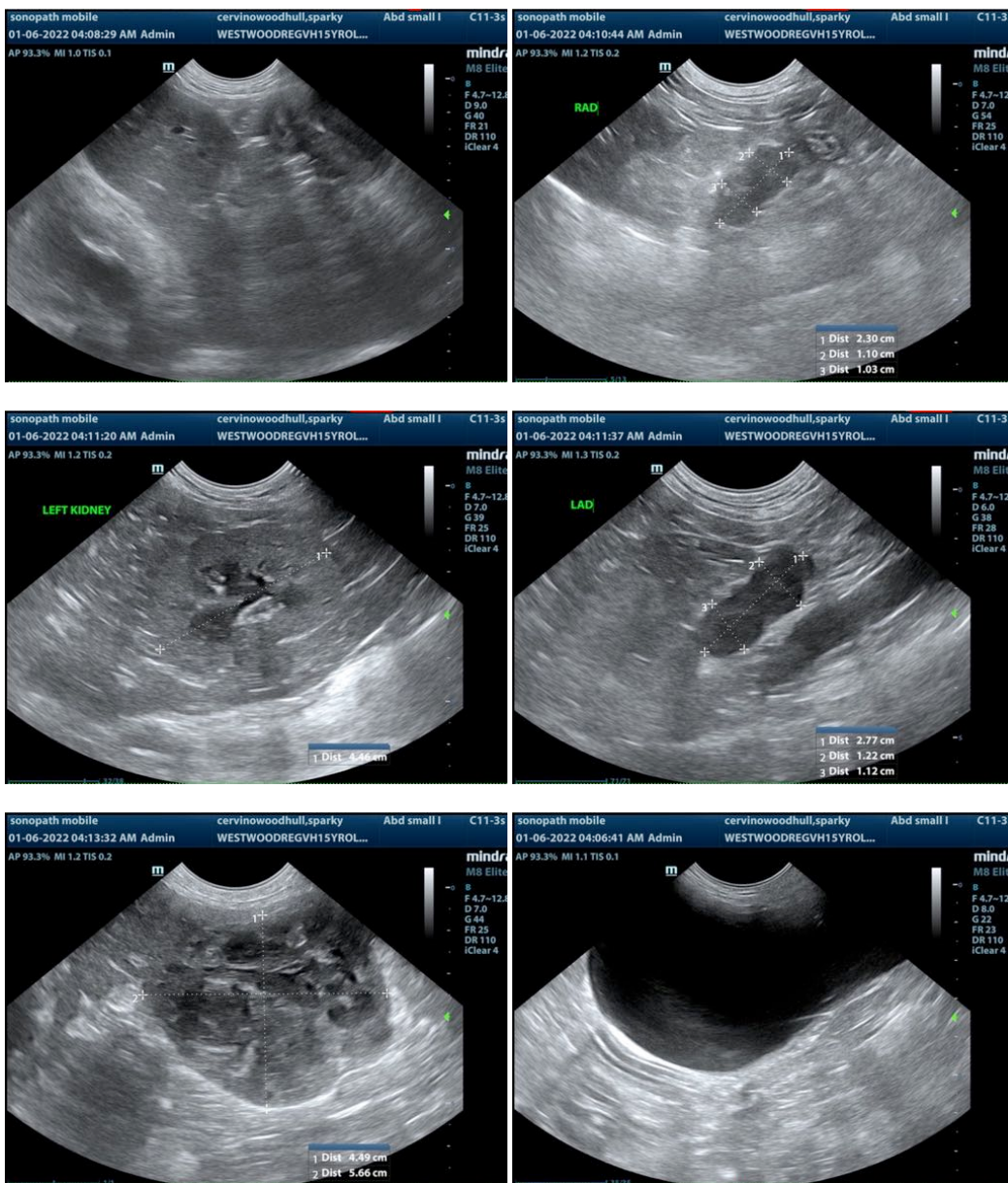
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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