

PATIENT

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Raini Ganter

Urinary System

SPECIES

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.

Canine

BREED

N/a

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. Left kidney measures and the right kidney measures 6.12cm.

SEX

Spayed Female

AGE

Adrenal Glands

11 years 10 months

The **right adrenal gland** was heterogenous, irregular, nodular measuring 3.5 cm x 1.75 cm.

WEIGHT

The **left adrenal gland** presented a mass measuring 3.0 cm x 2.0 cm deviating the left kidney.

30.40 kg

Spleen

INTERPRETED BY

The **spleen** was volume contracted, mildly heterogenous, and displaced dorsally with hypoechoic nodular changes without overt mass formation.

Eric Lindquist, DMV,
DABVP(CFM), Cert.
IVUSS

Liver

The cranial **liver** was nodular, irregular, and retracted. The mid caudal liver revealed a 10.0+ cm multi cavitated mass with areas of reactive mesentery and hematomatous type changes extending into the cranial abdomen, obscuring the pancreas. The gallbladder and common bile duct were unremarkable. No evidence of hepatic vein dilation.

IMAGING PERFORMED BY

Eric Lindquist, DMV,
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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

VCA Palmetto

Pancreas

REFERRING VET

The **pancreas** presented nodular changes.

Dr. Amber Leaves

Free Abdomen

INVOICE

Large amount of ascites noted. Serosanguinous in nature.

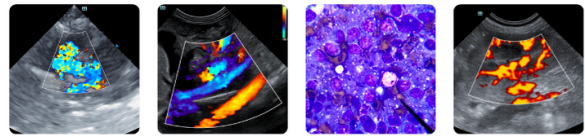
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ULTRASONOGRAPHIC FINDINGS

DATE

- Hepatic cirrhosis pattern with concurrent large, cavitated hepatic mass.
- Left adrenal mass.
- Nodular right adrenal.

11/7/2026



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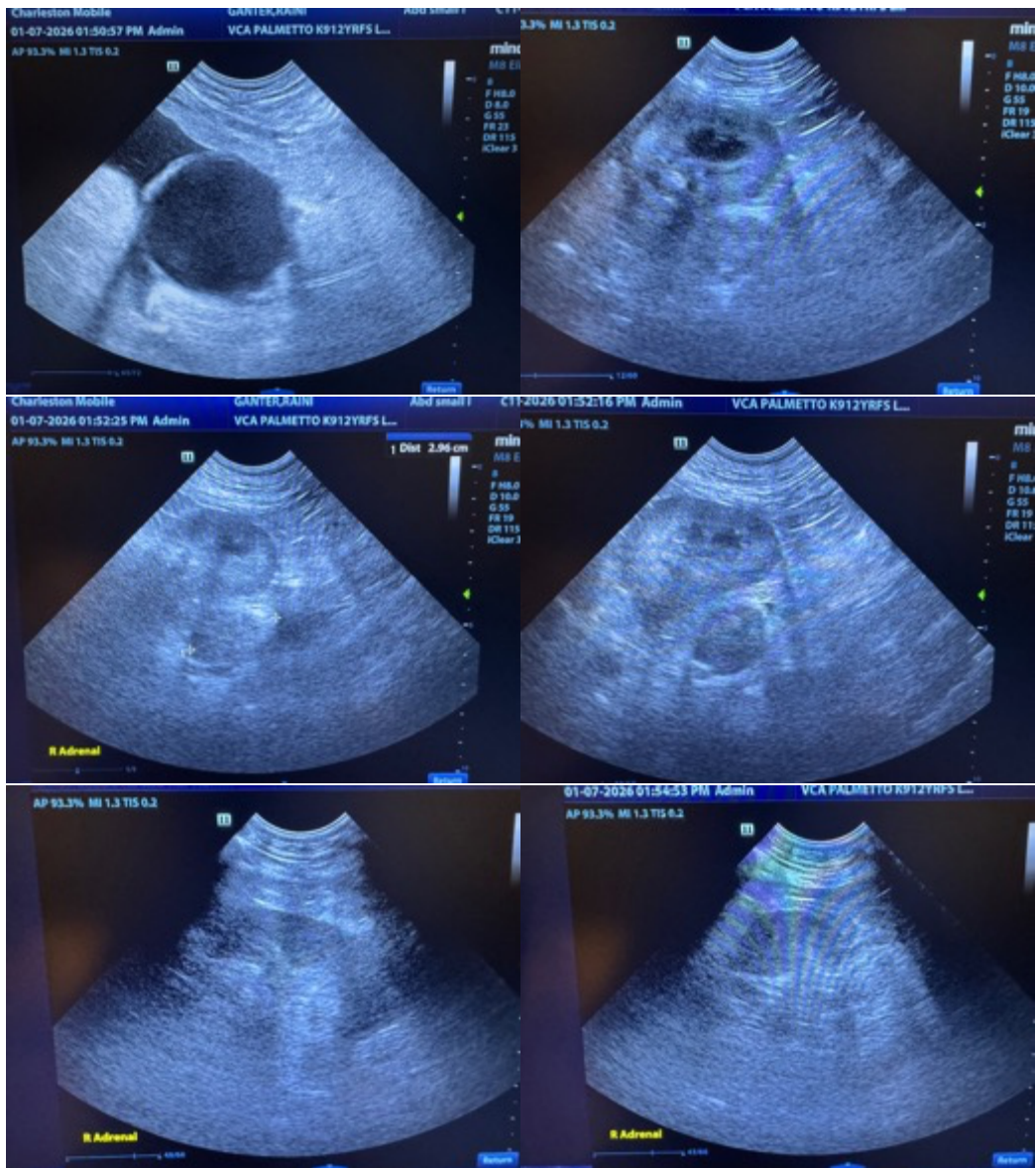
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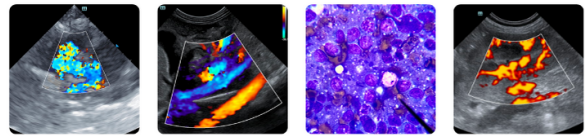
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- Ascites secondary to portal hypertension and poor oncotic pressure, as well as likely hemorrhaged deriving from the hepatic pathology.
- Nodular spleen.
- Mild age-related renal changes.
- Nodular pancreatic changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Prognosis is poor. Neoplastic spread from the primary hepatic mass into the omentum is likely.





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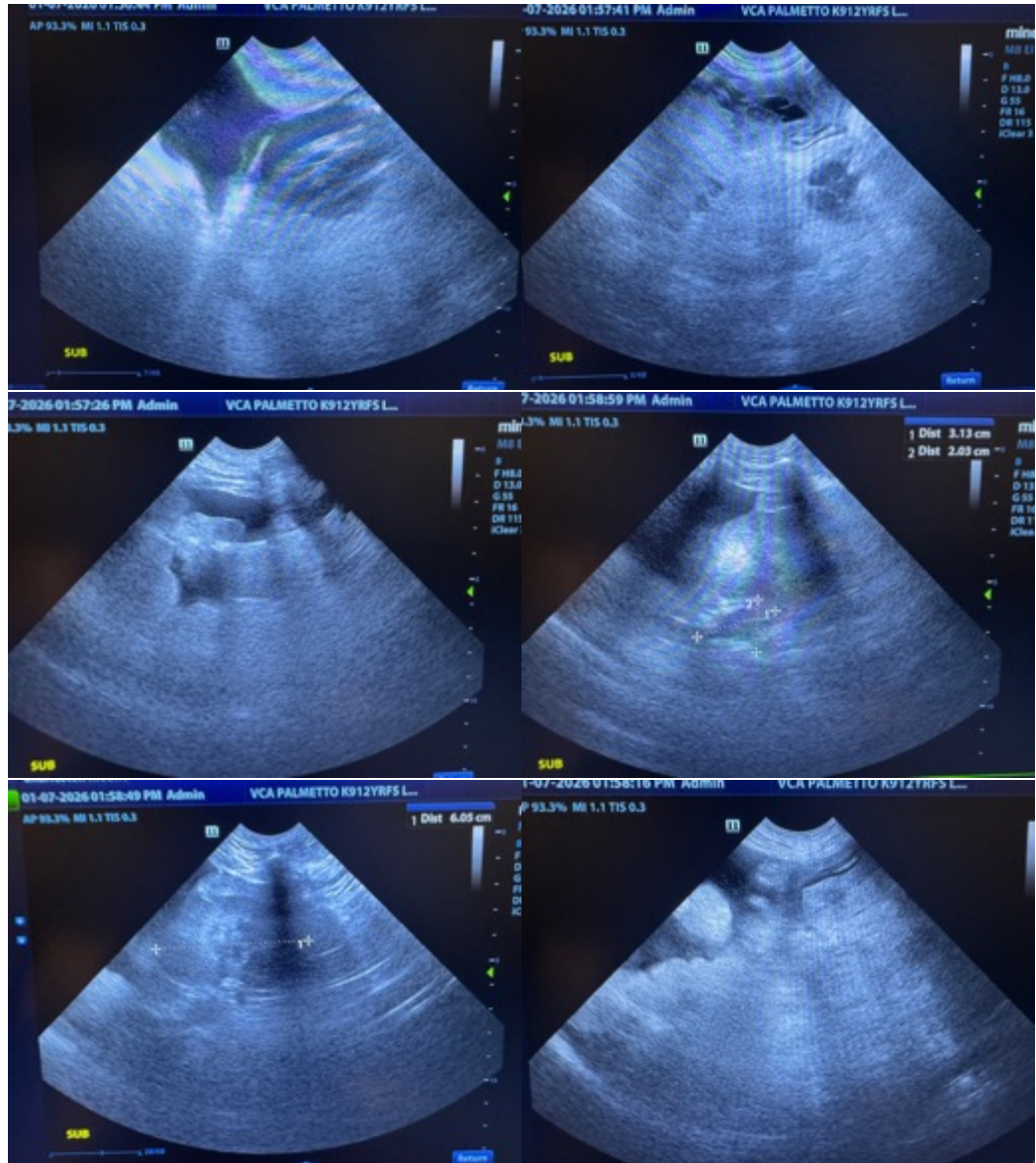
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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