



PATIENT

Lucy McHugh

SPECIES

Canine

BREED

Labrador Mix

SEX

Spayed female

AGE

11 years

WEIGHT

53 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. James Hornbuckle

HOSPITAL NAME

Golden Isles AH

REFERRING VET

Dr. Hornbuckle

INVOICE

69958

DATE

1/9/26

PRESENTING CLINICAL SIGNS

History: Lucy presented for a metastasis hunt after she had been diagnosed with mast cell tumor from an RDVM. She had a splenectomy that resulted from a splenic hematoma. No neoplasia was found on histopath. She is currently free of symptoms.

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. A cortical infarct was noted at the caudal pole of the left kidney. This was stable with no evidence of active inflammation. The left kidney measured 6.4 cm. The right kidney measured 5.8 cm.

Adrenal Glands

The left **adrenal gland** revealed a hyperechoic nodule at the cranial pole. The caudal pole measured 0.79 cm and the cranial pole measured 1.26 cm with a hyperechoic nodule at the cranial pole measuring 0.78 cm. The right adrenal gland was uniform and measured 1.2 cm at the cranial pole and 0.77 cm at the caudal pole.

Spleen

The **spleen** was not visualized as it was previously removed. The region of the splenic fossa was unremarkable.

Liver

The **liver** revealed multi-focal, hypoechoic nodular changes. Nodules measured up to 1.0 cm and 2.2 cm. Ultrasound-guided FNA is indicated. The gallbladder and common bile duct were unremarkable.

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

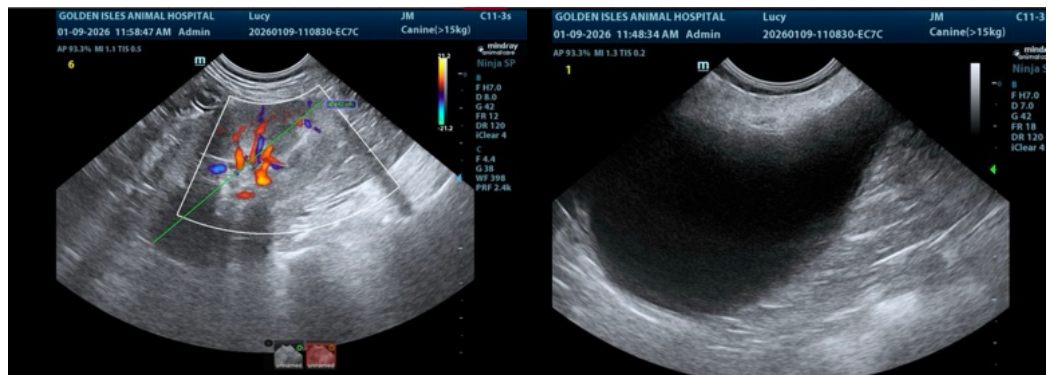
Moderate hepatic remodeling with nodular changes, likely nodular hyperplasia. However, I cannot rule out a metastatic event.

Age related renal changes with stable left renal infarct.

Nodular left adrenal gland, likely benign.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A moderate amount of hepatic remodeling was present with increased portal markings. Bile acid profile is warranted as well as ultrasound-guided FNA of the nodular hepatic changes. The splenic fossa is unremarkable.





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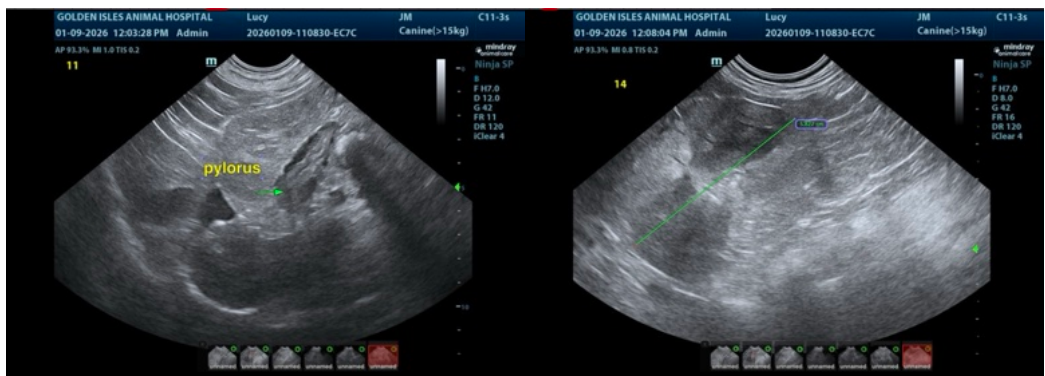
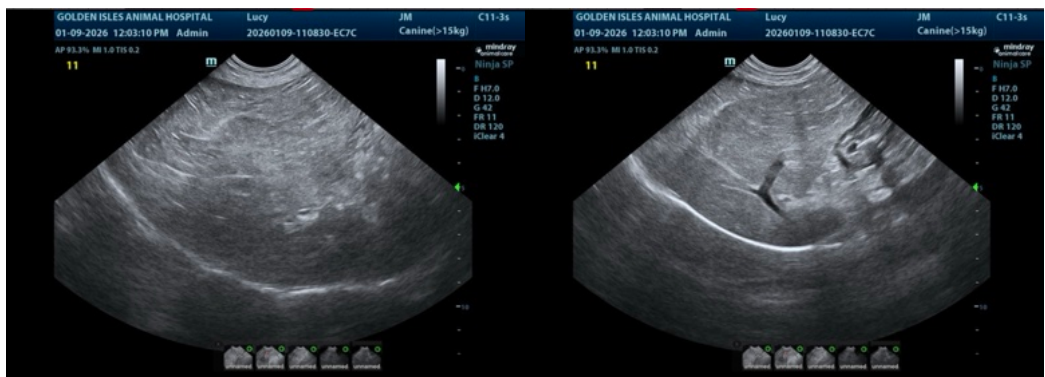
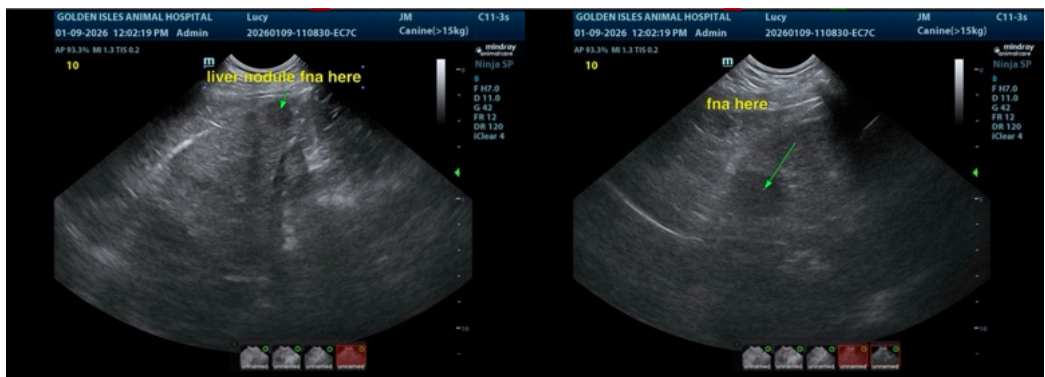
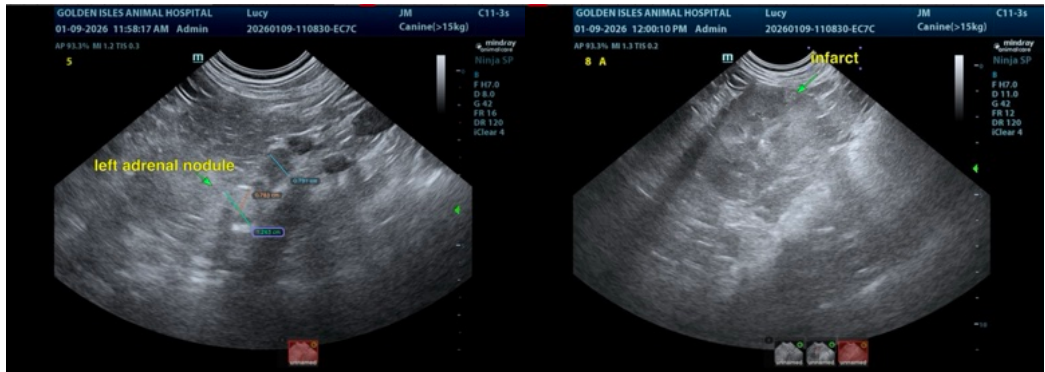
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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