



PATIENT

Peps Vila

PRESENTING CLINICAL SIGNS

History: Came in for vomiting/not eating for 3 days, on exam painful on abdomen and suspect mass in cranial abdomen on x-rays.

Abnormal PE/Chem/CBC/UA Results: Alk phos 274 IU/L, phosphorus 2.3 mg/dL

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Scottish Terrier

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.

SEX

Neutered male

AGE

11 years

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. The left kidney measured 3.8 cm. The right kidney measured 4.37 cm.

WEIGHT

24 lbs

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.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Whitesell

Spleen

The **spleen** was uniformly enlarged with scalloping contour and enhanced surrounding mesentery. The spleen was folded upon itself cranially. The spleen reveals a mass effect.

HOSPITAL NAME

Rockaway AH

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. The hepatic lymph nodes are mildly enlarged and measured up to 1.0 cm.

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INVOICE

40193

Gastrointestinal

The pylorus revealed minor, subjective hypertrophy with echogenic mucosal remodeling. The small intestines and colon were unremarkable.

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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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Scottish Terrier

Splenomegaly with parenchymal mass effects.

Minor hepatic lymphadenopathy.

Minor gastritis pattern.

SEX

Neutered male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Screening FNA of the spleen and liver could be considered to assess for round cell neoplasia. However, the spleen is likely the primary cause of clinical signs with concurrent gastritis. Splenectomy, liver biopsy, hepatic lymph node biopsy and gastric biopsy would all be indicated after chest radiographs to assess for comorbidity. Hypersplenism, round cell neoplasia, reactive spleen/splenitis with gastritis is all possible.

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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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