



**PATIENT PRESENTING CLINICAL SIGNS**

Lulu Mele Non-reg. anemia, thrombocytopenia, splenomegaly. Torb on board for u/s no other current meds. Abnormal PE/Chem/CBC/UA Results: RBC 3.12, HCT 20.9, HGB 7.0, AKLP slightly elevated.

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

**Urinary System**

**BREED**

Hound 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. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

**SEX**

The iliac trifurcation was unremarkable.

Spayed Female

**AGE**

10 Years 8 Months

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 6.42 cm. The right kidney measured 6.85 cm.

**Adrenal Glands**

**WEIGHT**

55 Pounds

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins were 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 right adrenal gland was somewhat heterogeneous. The right adrenal gland measured 2.5 cm x 1.28 cm at the cranial pole and 1.14 cm at the caudal pole. The left adrenal gland measured 3.1 cm x 0.95 cm at the cranial pole and 1.03 cm at the caudal pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**Spleen**

**IMAGING PERFORMED BY**

Shari Reffi, CVT

The **spleen** was enlarged with scalloping contour and presented an expansive, isoechoic 6.6 cm mass. The mass appears to be a culmination of an infiltrative pattern.

**HOSPITAL NAME**

ACC Flanders

**Liver**

**REFERRING VET**

Dr. Hallihan

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

**INVOICE**

26710

**Gastrointestinal**

**DATE**

10/28/21

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.



**PATIENT**

**Pancreas**

Lulu Mele

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

**Heart**

Rapid view of the heart revealed no evident pathology.

**BREED**

Hound X

**ULTRASONOGRAPHIC FINDINGS**

- Enlarged, irregular spleen with parenchymal mass – concern for round cell neoplasia, less likely hemangiosarcoma.
- Bilateral adrenal hypertrophy – potential PDH or stress related.

**SEX**

Spayed Female

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The spleen is likely a regional manifestation of a systemic disease process in this patient. Blood pressure measurements recommended. Full coagulation panel and FNA of the spleen and liver would be recommended. However, platelet count must be greater than 70,000 to perform FNA. Given the hematocrit, CBC path review +/- bone marrow aspirate also indicated. Prognosis is guarded. No evidence of hemorrhage or free fluid. Therefore, bone marrow disease is suspected. The spleen may be a manifestation of the disease process in both bone marrow and systemically.

**AGE**

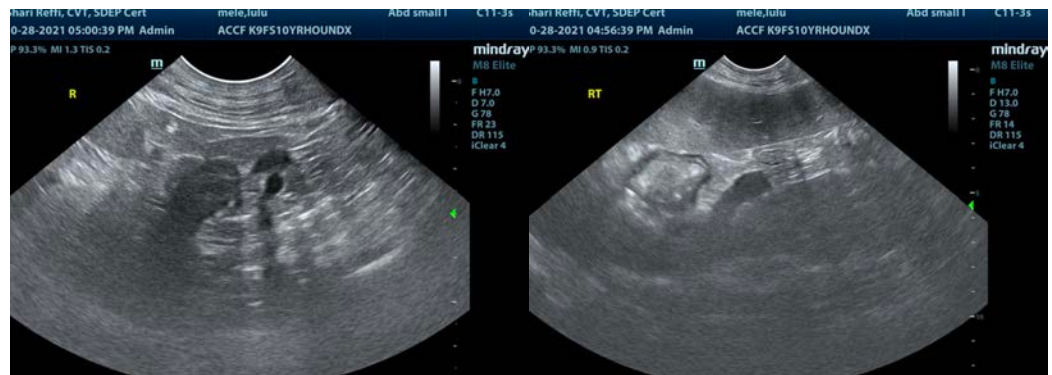
10 Years 8 Months

**WEIGHT**

55 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUS



**IMAGING PERFORMED BY**

Shari Reffi, CVT

**HOSPITAL NAME**

ACC Flanders



**REFERRING VET**

Dr. Hallihan

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**DATE**

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**PATIENT**

Lulu Mele

**SPECIES**

Canine

**BREED**

Hound X

**SEX**

Spayed Female

**AGE**

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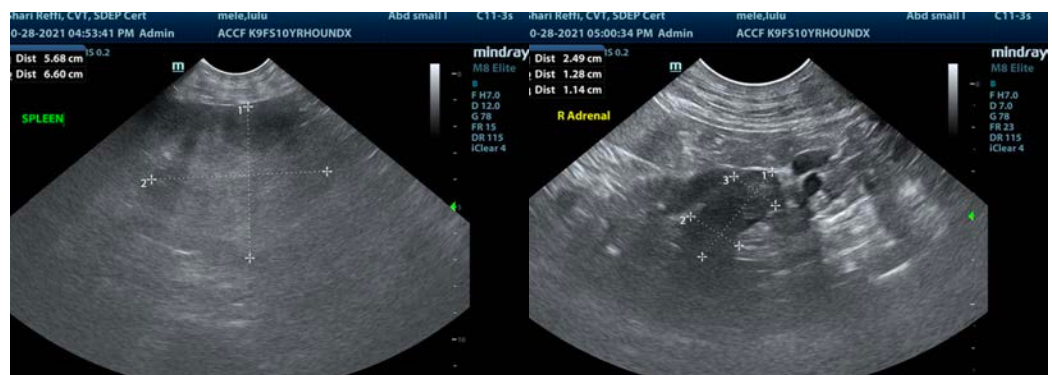
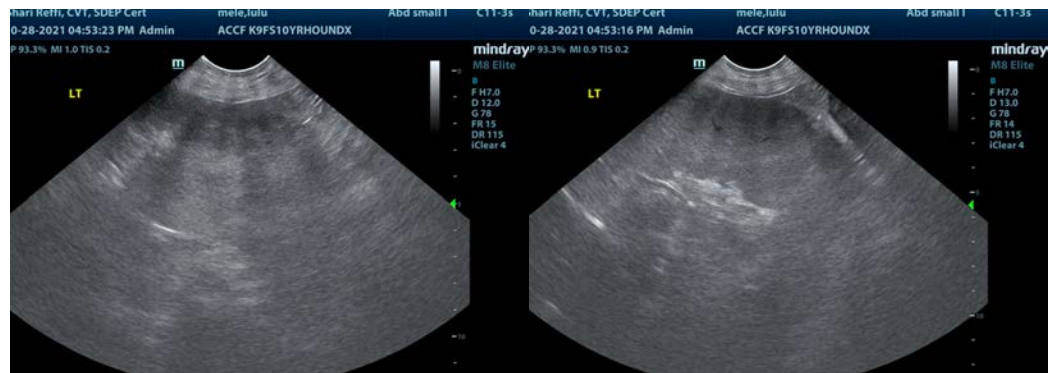
Dr. Hallihan

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**PATIENT**

Lulu Mele

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.

**SPECIES**

Canine

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.

**BREED**

Hound X

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

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**SEX**

Spayed Female

**AGE**

10 Years 8 Months

**WEIGHT**

55 Pounds

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