



PATIENT

Mini Young

SPECIES

Canine

BREED

Labrador Retriever

SEX

Female

AGE

10 Years

WEIGHT

70 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Adrienne Ligenza

HOSPITAL NAME

Rush VUC

REFERRING VET

Dr. Taylor Urban

INVOICE

12515

DATE

11/14/21

PRESENTING CLINICAL SIGNS

History: decreased eating over last month, not eating at all this week, bloody diarrhea

Abnormal PE/Chem/CBC/UA Results: slightly elevated liver values, rads show enlarged spleen and liver

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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

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 right kidney measured 6.04 cm. The left kidney measured 6.01 cm.

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. The left adrenal gland measured 1.78 cm x 0.63 cm at the caudal pole and 0.56 cm at the cranial pole. The right adrenal gland measured 1.65 cm x 0.77 cm at the caudal pole and 0.68 cm at the cranial pole.

Spleen

Caudal folding of the **spleen** was noted with minor heterogeneous parenchymal changes. The spleen may be involved in early neoplastic process.

Liver

The **liver** revealed irregular contour, increased portal markings and areas of mineralization with a multifocal mixed hypoechoic mass. Coalescing target lesions noted. Enhanced pericapsular mesentery was noted. The entire liver was affected by an infiltrative pattern. Trace free fluid was noted between the liver lobes.

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.

Pancreas

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Some minor parenchymal remodeling, however, with mild deviation from curvilinear normalcy was observed. Pancreatic duct and capsular irregularities were present consistent with age related



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changes. If pain upon imaging (+ Murphy sign) was present or if the patient is focally painful in subxyphoid palpation then low-grade smoldering chronic pancreatitis should be suspected.

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ULTRASONOGRAPHIC FINDINGS

- Diffuse hepatic neoplasia, suspect round cell neoplasia, multiple masses
- Heterogeneous spleen
- Age-related pancreatic changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

FNA of the liver with likely immediate chemotherapeutic intervention recommended. Prognosis is poor long term.

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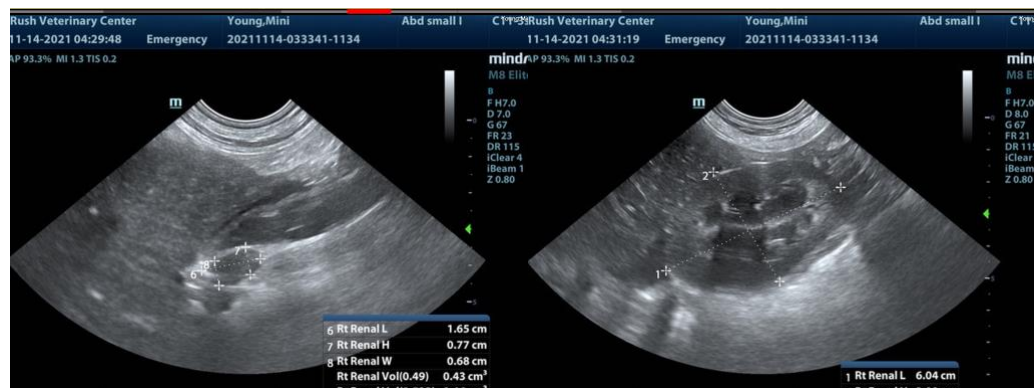
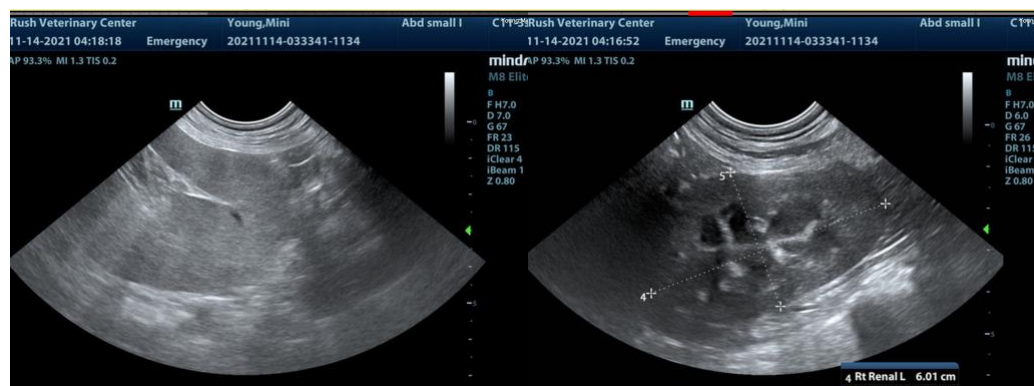
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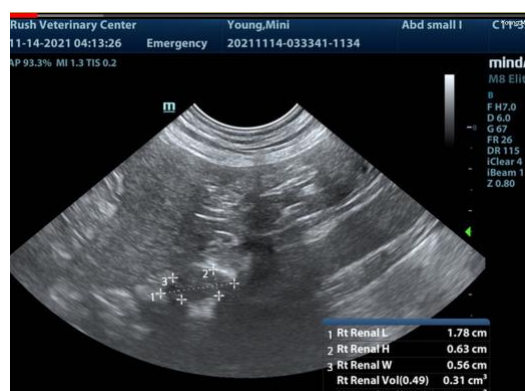
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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