



PATIENT

Getzy Portables

SPECIES

Canine

BREED

Goldendoodle

SEX

Neutered male

AGE

11 years

WEIGHT

56 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Reser

HOSPITAL NAME

Harvest Hills VH

REFERRING VET

Dr. Reser

INVOICE

42752

DATE

11/29/22

PRESENTING CLINICAL SIGNS

History: Dog has been losing weight past few months. had episode last week were he suddenly collapsed and has not been able to walk without assistance since. Seen at ER and had rads and BW
Abnormal PE/Chem/CBC/UA Results: Rads showed abdominal mass. BW showed anemia (HCT 27), no or low retics, low albumin (1.7). Dog is very weak, non ambulatory, BCS 2/9

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left and right kidney measured 6.0 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 0.5 cm.

Spleen

The **spleen** presented multiple, expansive, parenchymal masses with localized free fluid. The spleen revealed significantly disruptive architecture with coalescing target nodules.

Liver

The **liver** revealed multi-centric similar target nodules to that noted in the spleen. The architecture was also disrupted. The gallbladder was deviated ventrally owing to regional mass effects.

Gastrointestinal

The **stomach** was thickened with early loss of mural detail. Wall thickness measured up to 1.3 cm. The lumen was empty. The small intestines and colon were unremarkable.

Pancreas



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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.

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ULTRASONOGRAPHIC FINDINGS

Splenohepatic round cell type neoplasia. paraneoplastic protein losing disease is likely.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen and liver along with immediate chemotherapeutic intervention is recommended. Chest radiographs are warranted to assess for comorbidities.

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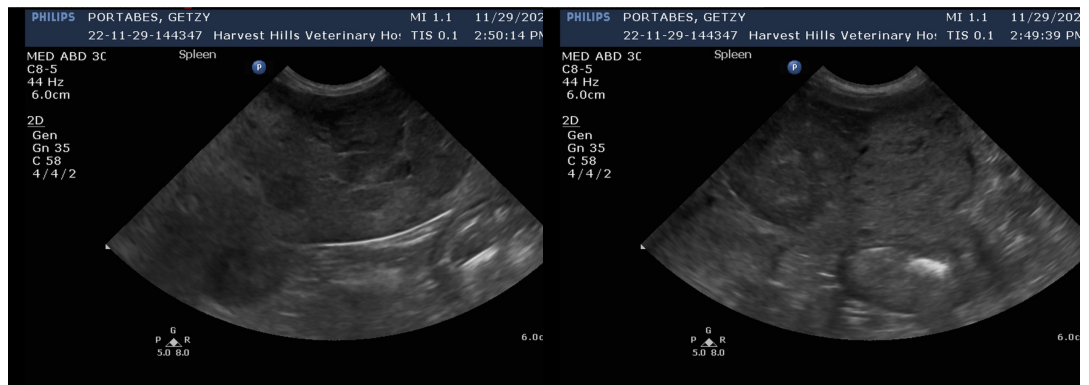
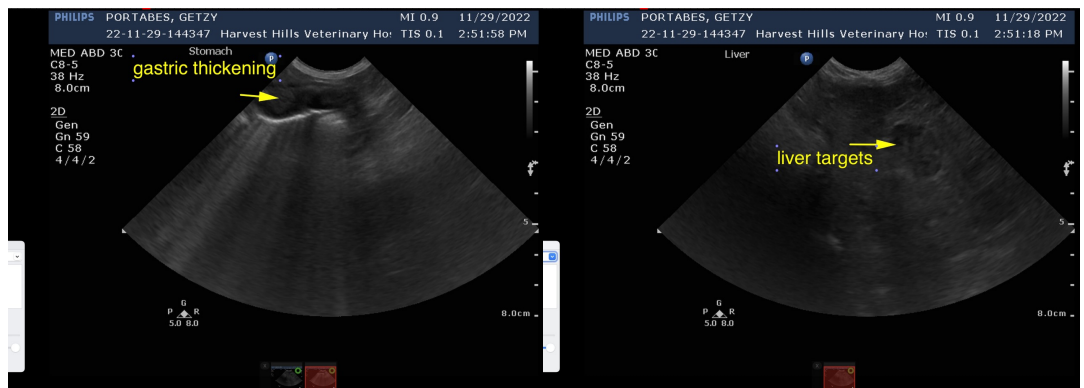
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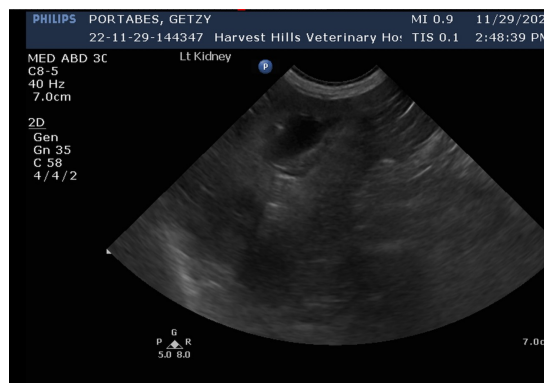
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com

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