



PATIENT

Simba Hernandez

SPECIES

Canine

BREED

Labrador Retriever

SEX

Male

AGE

14 years

WEIGHT

78 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Kimberly Carrion
Rivas

HOSPITAL NAME

Consultorio
Veterinario Las Brisas

REFERRING VET

Dr. Trautmann

INVOICE

68291

DATE

11/4/25

PRESENTING CLINICAL SIGNS

History: The patient presented to our clinic with loss of appetite, difficulty urinating, diarrhea, vomiting, and abdominal distension. An X-ray was taken, which showed a mass in the abdominal area, near the bladder. The patient had previously experienced problems with a perianal hernia and urinary issues, but these were well-controlled. In his x-rays, his intestines were filled with air.

Abnormal PE/Chem/CBC/UA Results: The only elevated value in the blood chemistry panel was amylase at 1434 and BUN at 30. However, his hemoglobin level is decreasing and is currently at 8.6.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. A moderate amount of debris is noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra 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. The kidneys each measured 6.0 cm.

Adrenal Glands

The **adrenal glands** were not visualized.

Spleen

A mixed, hypoechoic cystic and parenchymal mass was noted in the mid cranial abdomen and appears to be deriving from the **spleen** and measured 8.0+ cm with reactive surrounding mesentery. A separate splenic mass was noted and measured 5.0 + cm from cranial pole.

Liver

Minimal **liver** tissue was visualized. The visualized liver presented nodular changes. There is a strong concern for metastatic disease.

Gastrointestinal

The visible **gastrointestinal tract** was 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.

Free Abdomen

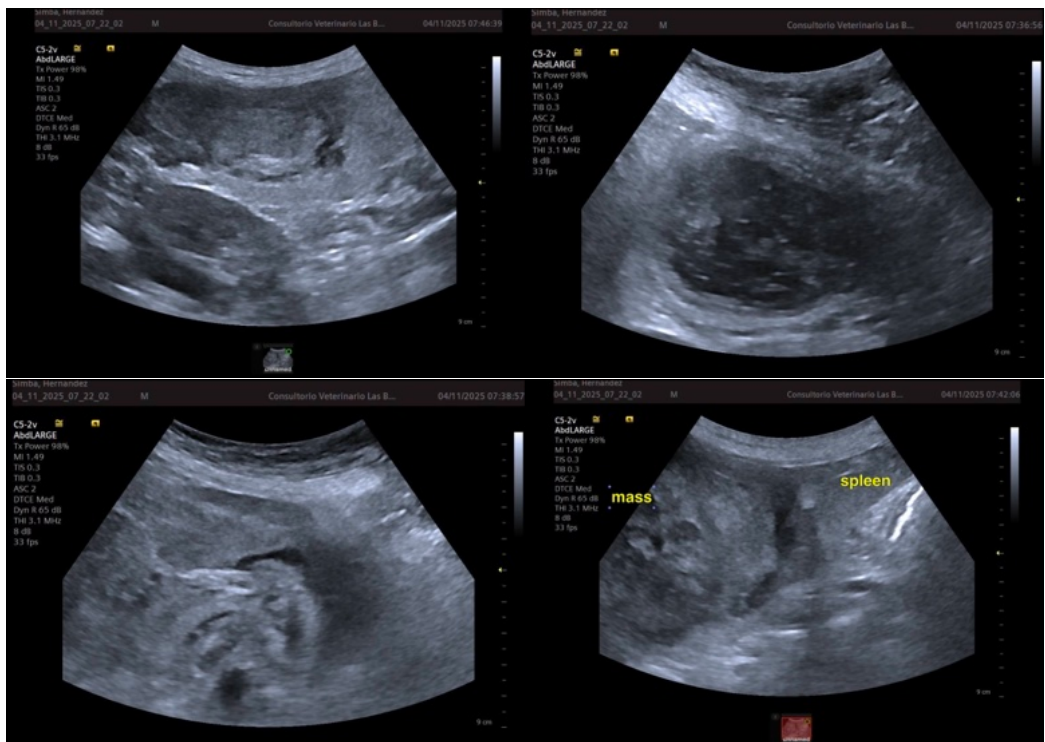
Reactive mesentery was noted.

ULTRASONOGRAPHIC FINDINGS

- Multiple splenic masses with potential hepatic metastatic disease. Likely hemangiosarcoma or similar pathology.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory surgery is indicated.





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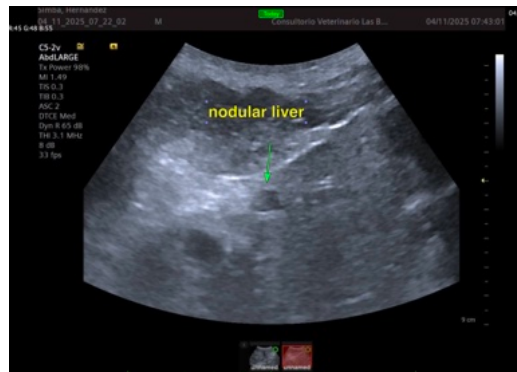
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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