



PATIENT

Jesse Klupal

PRESENTING CLINICAL SIGNS

History: Caudal abd mass, looking to see if its resectable?

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Golden Retriever

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

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 left kidney measured 6.56 cm. The right kidney measured 7.07 cm.

AGE

8 years

WEIGHT

77 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. The left adrenal gland measured 2.23 x 0.87 cm at the caudal pole and 0.66 cm at the cranial pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Spleen

The **spleen** was slightly heterogenous in appearance.

IMAGING PERFORMED BY

Jenn

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. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

HOSPITAL NAME

Rockaway AH

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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.

DATE

12/17/22



PATIENT

Pancreas

Jesse Klapal

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

Free Abdomen

BREED

Golden Retriever

A midabdominal mass was noted and measured 12.8 x 7.7 cm. Regional inflammation was noted. The mass appeared to be deriving from sublumbar space, it does not appear resectable. The mass deviates the urinary bladder ventrally. Other lymph nodes were also enlarged. Regional inflammation was present. There was a slight amount of free fluid noted.

SEX

Neutered male

ULTRASONOGRAPHIC FINDINGS

Caudal abdominal lymph node mass and multi-focal lymphadenopathy. Possible splenic involvement.

AGE

8 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

77 lbs

FNA of the mass is indicated. The prognosis is poor depending upon responsiveness to chemotherapy. This patient is not surgical.

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IMAGING PERFORMED BY

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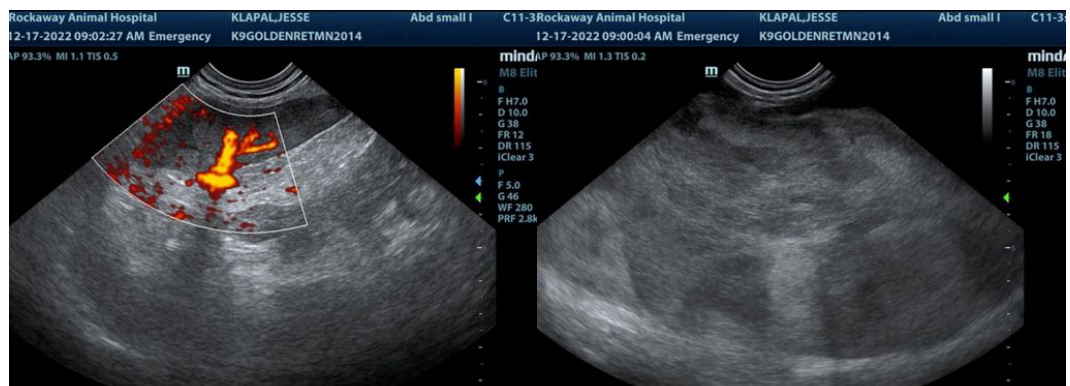
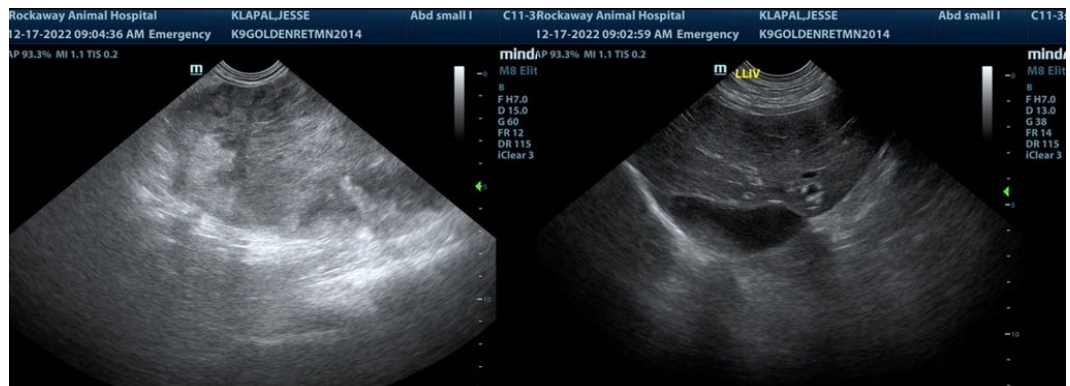
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PATIENT

Jesse Klapal

SPECIES

Canine

BREED

Golden Retriever

SEX

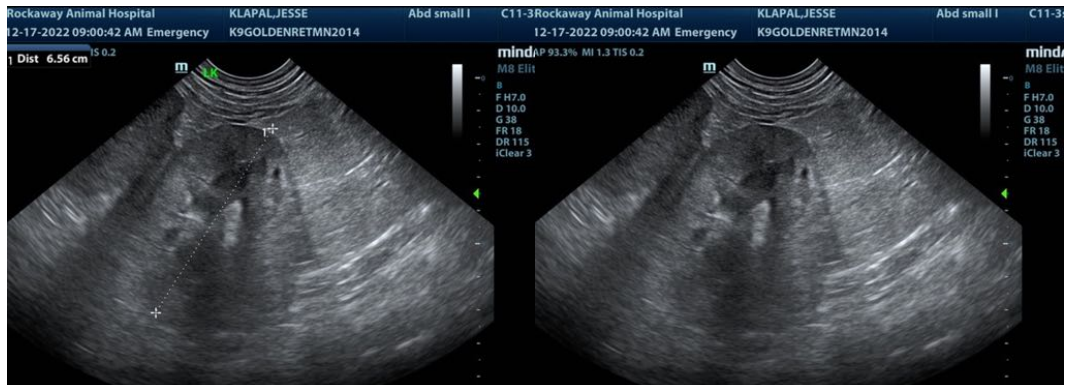
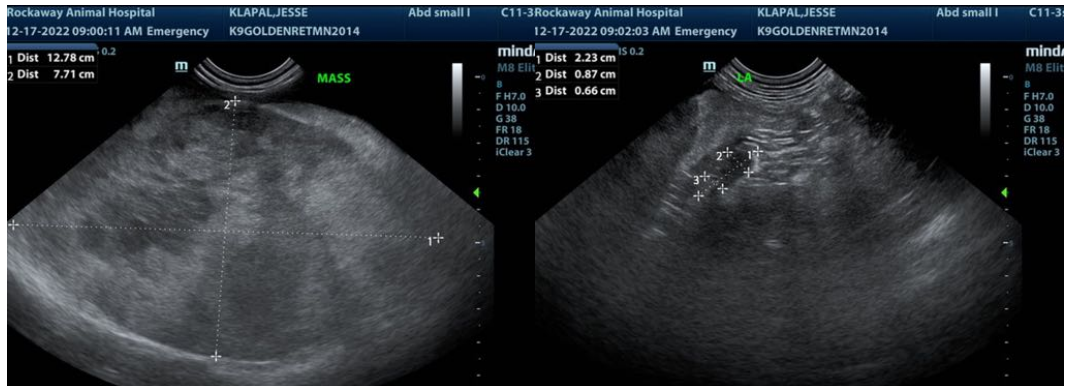
Neutered male

AGE

8 years

WEIGHT

77 lbs



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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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