



**PATIENT**

Hank Madara

**SPECIES**

Canine

**BREED**

Labrador Retriever x

**SEX**

Neutered Male

**AGE**

12 Years

**WEIGHT**

58.4 lbs

**INTERPRETED BY**

Eric Lindquist, DMV,  
DABVP (CFM), Cert.  
IVUSS

**IMAGING PERFORMED BY**

Meghan Morse, LVT,  
CVT

**HOSPITAL NAME**

All Animal Veterinary  
Services

**REFERRING VET**

Dr. Acworth

**INVOICE**

72667

**DATE**

12/17/25

**PRESENTING CLINICAL SIGNS**

Recheck abdomen specifically liver, spleen, and adrenals. See prior report. Current meds: Denamarin, Trazodone PRN

Abnormal PE/Chem/CBC/UA Results: July 15th 2025: BUN 30.3, Chol 336, ALT 171, ALP 272, AMylase 1864, Lipase 231, Trig 201

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **bladder** in this patient was mildly thickened with slight echogenic mural changes. No calculi or masses were 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 pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

The residual prostate measured 1.0 cm.

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. Right kidney measured 7.32 cm. Right kidney measured 6.04 cm.

**Adrenal Glands**

The **left adrenal gland** is persistently enlarged and slightly heterogeneous. No significant growth from the prior sonogram, measuring 2.77 cm x 1.0 cm at the caudal pole and 0.81 cm at the cranial pole.

The **right adrenal gland** presented slight heterogeneous parenchymal changes. No significance change from the prior sonogram, measuring 2.5 cm x 1.2 cm at the cranial pole and 0.78 cm at the caudal pole.

**Spleen**

The **spleen** was largely normal with occasional hyperechoic lipid plaque, not pathological.

**Liver**

The **liver** revealed heterogeneous parenchymal changes. Increased portal markings noted. The caudal liver mass has grown, measuring up to 7.2 cm in width, with heterogeneous mixed echogenic changes. The mass appeared to be deriving from the caudate process. The gallbladder and common bile duct were unremarkable.

**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.



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**Pancreas**

The pancreas revealed a newly developed cavitated lesion measuring 4.1 cm. This was not present on the prior sonogram. Mild reactive mesentery noted.

**ULTRASONOGRAPHIC FINDINGS**

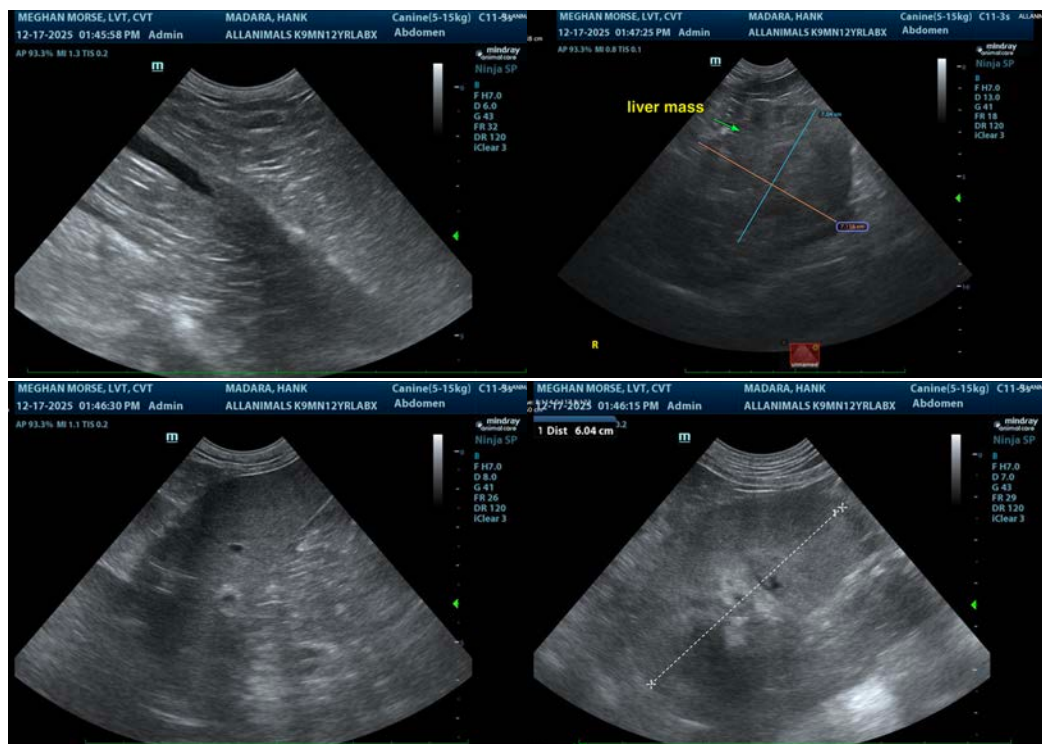
- Pancreatic lesion – necrosis, abscessation, carcinoma all possible.
- Liver mass – carcinoma or pronounced nodular hyperplasia or adenoma.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The liver mass is potentially resectable. CT evaluation of the pancreatic lesion and liver mass indicated along with ultrasound guided FNA of the liver mass and pancreatic lesion performed at that time under sedation.

**SonoPath CT Services** are offered at the SonoPath Imaging and Veterinary Education Center, 141 Main St (rt 206), Andover, New Jersey, a 20-minute drive west on route 80/206 North from the route 80/287 interchange/Parsippany, New Jersey. More information can be found at

<https://sonopath.com/services/vetimaging/>





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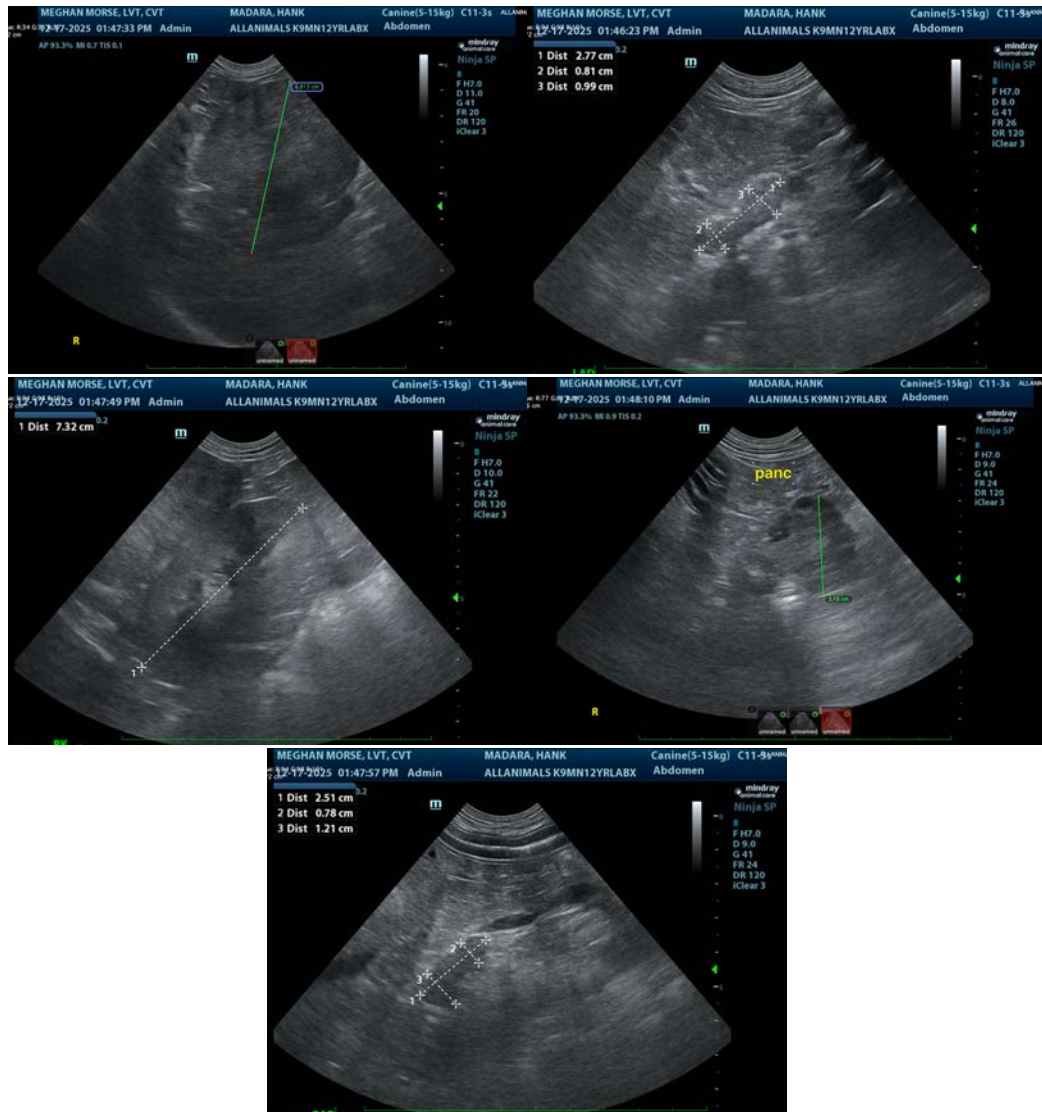
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Owner, Founder -- SonoPath.com  
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