



PATIENT PRESENTING CLINICAL SIGNS

Bella Rowley
History: Patient presented not eating, no vomiting but having diarrhea. Weight loss of 5 lbs over last month
SPECIES
Distended abdomen, muscle loss. Increased respiratory rate. X-rays showed displacement of GI tract cranially. Lungs were clear on auscultation and x-ray. Anemic, Hypoproteinemia, WBC 26.9, ALT and ALK PHOS elevation, UTI
Canine

BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Coonhound
Urinary System

SEX
Spayed Female
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.

AGE
11 years
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 right kidney measured 7.38 cm. The left kidney measured 5.0 cm.

WEIGHT
57 lbs

INTERPRETED BY

Adrenal Glands

Eric Lindquist, DMV
DABVP, Cert. IVUSS

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 1.66 x 0.61 cm. The right adrenal gland measured 1.37 x 0.68 cm. The right adrenal gland measured 0.6 cm at the caudal pole.

IMAGING PERFORMED BY

Dr. Caughman

HOSPITAL NAME

Spleen

Dogwood AH

An undifferentiated mixed, hypoechoic 16+ cm parenchymal mass was noted. The mass appears to be deriving from the caudal aspect of the **spleen** and appears to enter into the regional omentum with nodular changes. This is consistent with seeding. Regional lymph nodes are enlarged.

REFERRING VET

Dr. Caughman

Liver

INVOICE

The **liver** was riddled with multiple, mixed echogenic masses and surrounding free fluid. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.

94733

DATE

12/20/21



PATIENT

Gastrointestinal

Bella Rowley

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.

SPECIES

Canine

BREED

Coonhound

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.

SEX

Spayed Female

Free Abdomen

Free fluid was noted in the abdomen.

AGE

11 years

ULTRASONOGRAPHIC FINDINGS

WEIGHT

57 lbs

Extensive, splenohepatic neoplasia, non-surgical.

Secondary free fluid.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sarcoma is suspected. The prognosis is poor.

IMAGING PERFORMED BY

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REFERRING VET

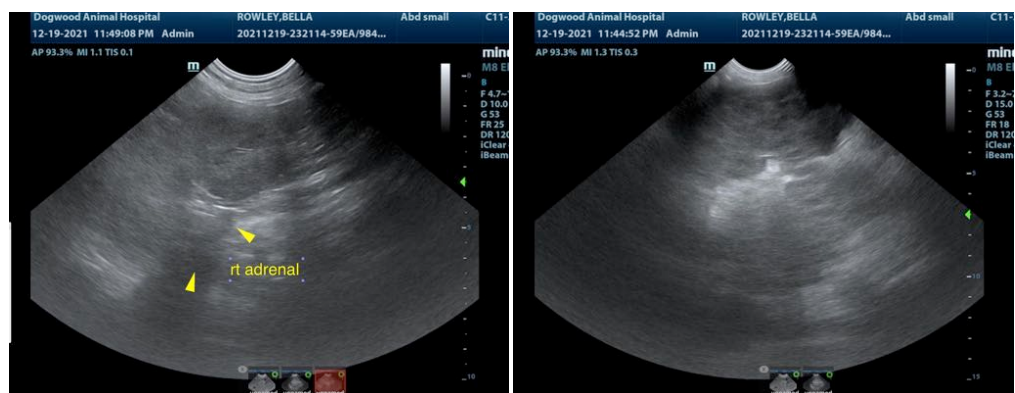
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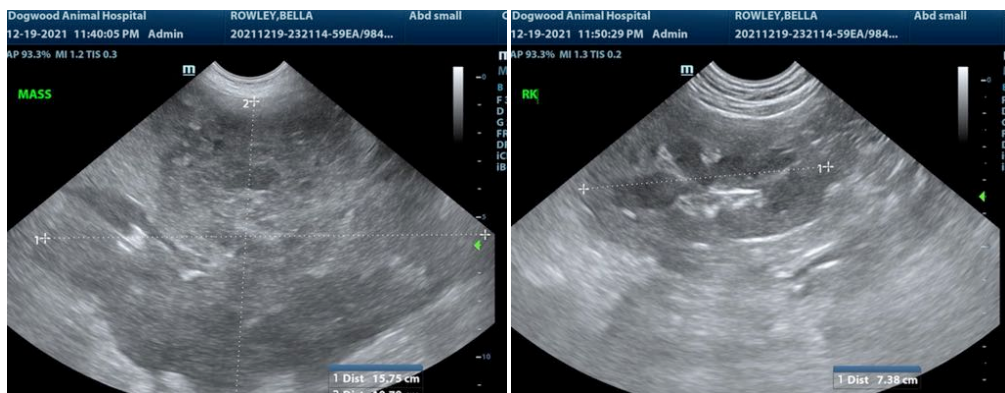
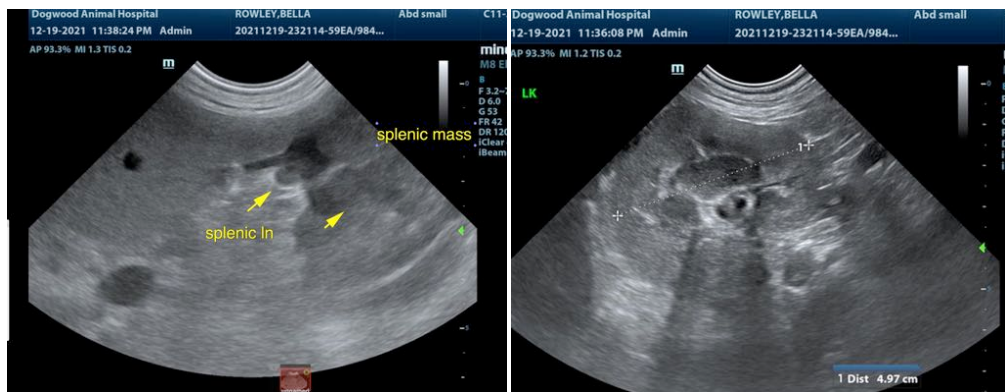
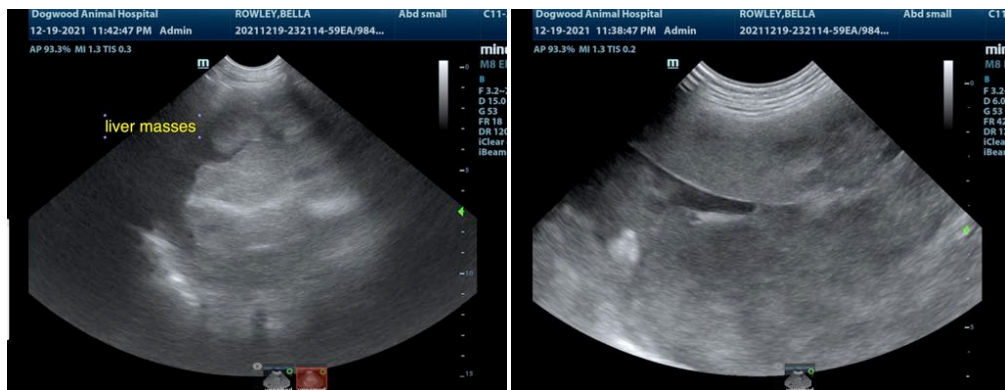
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



PATIENT

Bella Rowley

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
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Coonhound

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Spayed Female

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