



PATIENT

Layla Zanin

SPECIES

Canine

BREED

German Shepherd Mix

SEX

Spayed Female

AGE

9 ½ years

WEIGHT

98.5 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Beard

HOSPITAL NAME

West Prince AH

REFERRING VET

Dr. Beard

INVOICE

96291

DATE

2/23/22

PRESENTING CLINICAL SIGNS

Straining, owner thought to poop. And owner believes just one day duration. Bladder was over-filled, urine can only dribble out. Problem: dysuria.
Abnormal PE/Chem/CBC/UA Results: Radiographs revealed enlarged, full bladder. Unable to pass urinary catheter; therefore, drained percutaneously. Rectal exam reveals pelvic mass.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** was severely over distended. A large amount of hyperechoic inflamed fat was noted around the distal urethra. A hypoechoic mass was noted with undifferentiated tissue proliferation. The mass measured 10.0 cm and appears to be impinging upon the urethra delaying urethral outflow. A cystic component of the mass was noted in the deep pelvis. Ultrasound-guided FNA of the mass would be indicated for further definition. However, it may represent carcinoma and trailing may be an issue.

The **kidneys** were relatively normal in size and contour with slight pyelectasia. The kidneys both measured approximately 8.0 cm each.

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.

Spleen

The **spleen** was folded upon itself, but was normal.

Liver

The visible **liver** was 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.



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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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Free Abdomen

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Free fluid was noted in the abdomen. This may be owing to secondary passage of urine through the over distended bladder. However, there was no overall bladder rent noted. Enhanced mesentery was noted in the midabdomen.

German Shepherd Mix

SEX

ULTRASONOGRAPHIC FINDINGS

Spayed Female

Undifferentiated pelvic mass obstructing the urinary outflow. Likely lymph node or urethral origin.

AGE

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

9 ½ years

Ultrasound-guided FNA is warranted to assess if chemoresponsiveness is a potential. This is not a surgical presentation. Significant secondary inflammation was noted. CT evaluation would be ideal for further definition. However, this does not appear resectable. The hope is that this would be chemoresponsive. Chest radiographs are warranted. Abdominocentesis of the free fluid with cytospin is also indicated.

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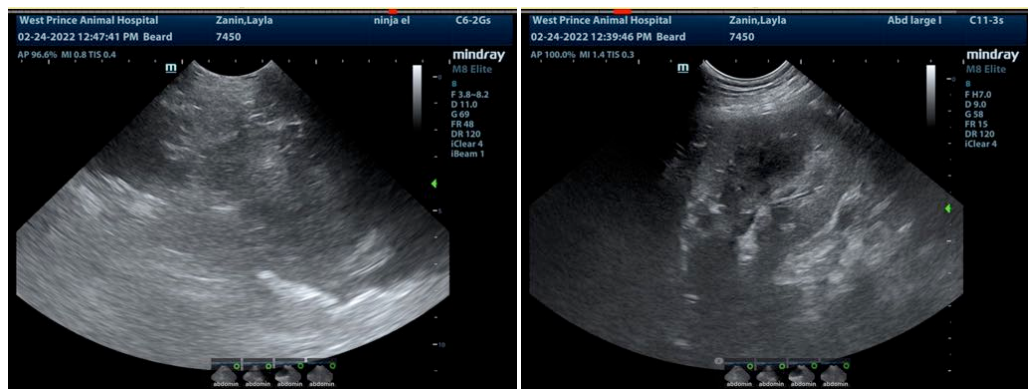
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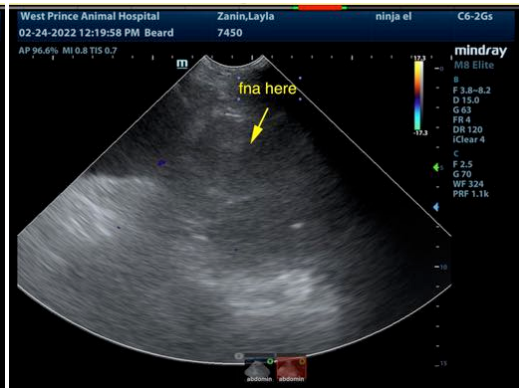
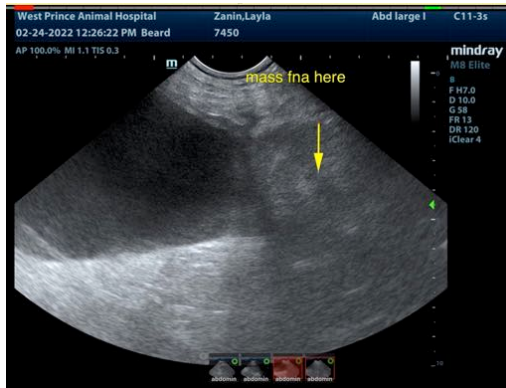
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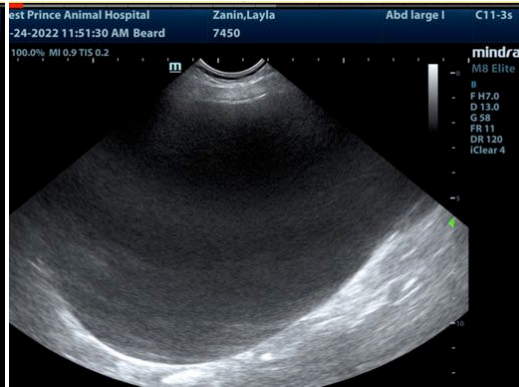
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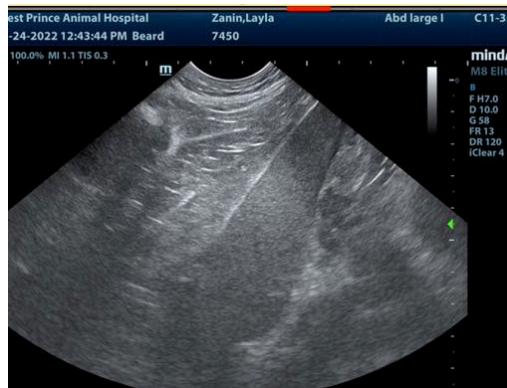
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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info@SonoPath.com

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