



**PATIENT PRESENTING CLINICAL SIGNS**

Meatball Cardoso acute onset vomiting elevated ALT

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Canine Urinary System**

**BREED**

Pit Bull

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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

**SEX**

Neutered Male

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. The left kidney measured 6.44 cm. A 2.0 cm anechoic cyst was noted in the cranial pole of the left kidney. An anechoic cyst was noted at the caudal pole of the right kidney. The right kidney measured 6.44 cm.

**AGE**

10 Years

**Adrenal Glands**

**WEIGHT**

62 Pounds

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 2.45 cm x 0.60 cm at the caudal pole and 0.58 cm at the cranial pole. The right adrenal gland measured 2.5 cm x 1.28 cm at the cranial pole and 0.63 cm at the caudal pole.

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**Spleen**

The **spleen** revealed a focal parenchymal mass measuring 3.0 cm. The remainder of the spleen was unremarkable. The mass was mineralizing.

**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

**Gastrointestinal**

**REFERRING VET**

Dr. Maniar

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.

**INVOICE**

35428

**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.

**DATE**

2/3/22



**PATIENT**

Meatball Cardoso

**ULTRASONOGRAPHIC FINDINGS**

- Geriatric abdomen with focal splenic mass – likely incidental findings.
- Structurally unremarkable abdomen otherwise

**SPECIES**

Canine

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recommend splenectomy and liver biopsy after 3-view chest radiographs and echocardiogram to assess for metastatic disease.

**BREED**

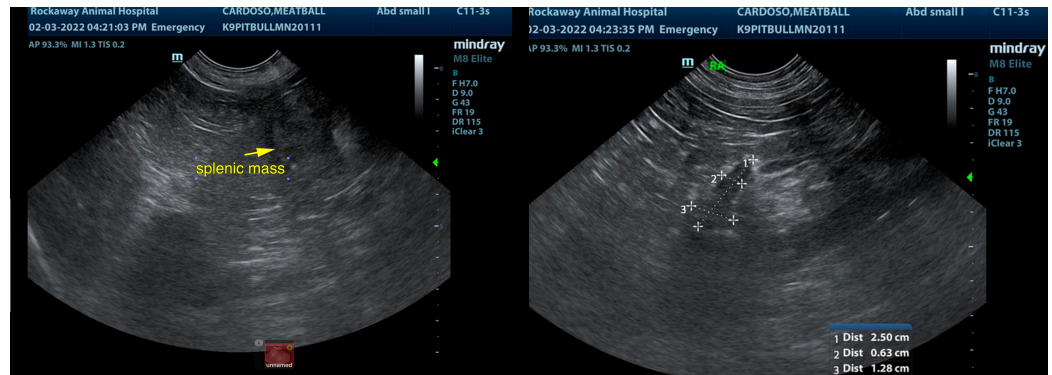
Pit Bull

**SEX**

Neutered Male

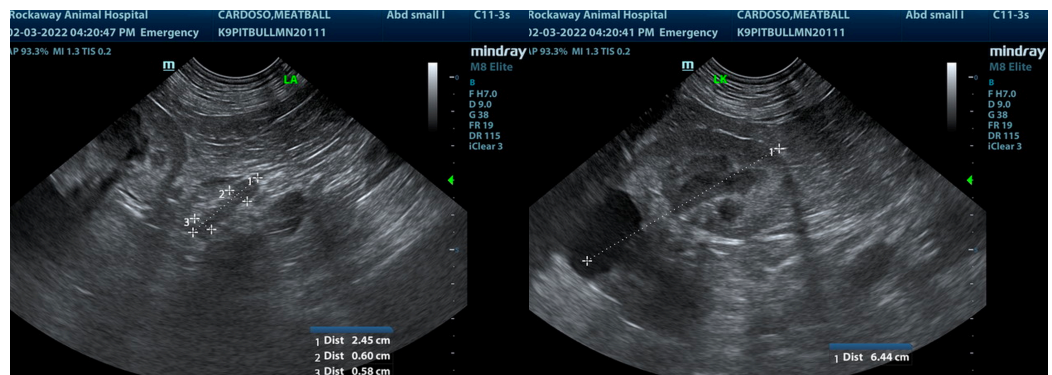
**AGE**

10 Years



**WEIGHT**

62 Pounds



**INTERPRETED BY**

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**HOSPITAL NAME**

Rockway AH

**REFERRING VET**

Dr. Maniar

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**DATE**

2/3/22

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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