



PATIENT

Tinkerbelle Davis

SPECIES

Canine

BREED

Westie Mix

SEX

Spayed Female

AGE

12

WEIGHT

18

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Adrienne Waffle

HOSPITAL NAME

Torch Lake VC

REFERRING VET

Dr. Dale Ackler

INVOICE

21003

DATE

2/6/23

PRESENTING CLINICAL SIGNS

History: Referral US. Hx of anorexia and vomiting.

Abnormal PE/Chem/CBC/UA Results: Noticed hematuria while shaving for US

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** presented apical ventral and concentric thickening with loss of mural detail with areas of mural mineralization, as well as regional hyperechoic inflammatory pattern and free fluid. The urethra and cystourethral junction revealed a mineralizing mass, strongly consistent with carcinoma.

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 4.62 cm. The right kidney measured 4.45 cm.

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 0.5 cm.

Spleen

The **spleen** was mildly enlarged with uniform, but subtly micronodular parenchyma, and undulating capsular contour. This is consistent with reactive spleen owing to immune stimulus or early infiltrative disease such as mast cell disease or lymphoma. 25-gauge FNA would be ideal if weight loss is an issue to differentiate early round cell neoplasia versus splenitis or reactive spleen all of which can present in this manner. This is a mild change.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed an unremarkable stomach and small intestine regarding structure. There were minor areas of luminal fluid noted. There was no evidence of obstructive pattern. Curvilinear patterns were retained throughout the gastrointestinal tract. Areas of hyperperistalsis were noted. This is consistent with response to irritation. The colon was unremarkable.



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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

Reactive **mesentery** was noted throughout the mid abdomen, associated with the GI tract. The sublumbar lymph nodes were enlarged, strongly suggestive for metastatic disease.

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Westie Mix

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

- Urethral and bladder neoplasia with sublumbar lymphadenopathy
- Concurrent gastroenteritis
- Reactive mesentery associated with the urinary and GI pathology
- Localized free fluid, likely owing from inflammation deriving from the urinary pathology
- Scalloping contour to the spleen
- Age-related hepatic changes

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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Traumatic catheterization of the lower urinary tract should prove definitive regarding suspected carcinoma.

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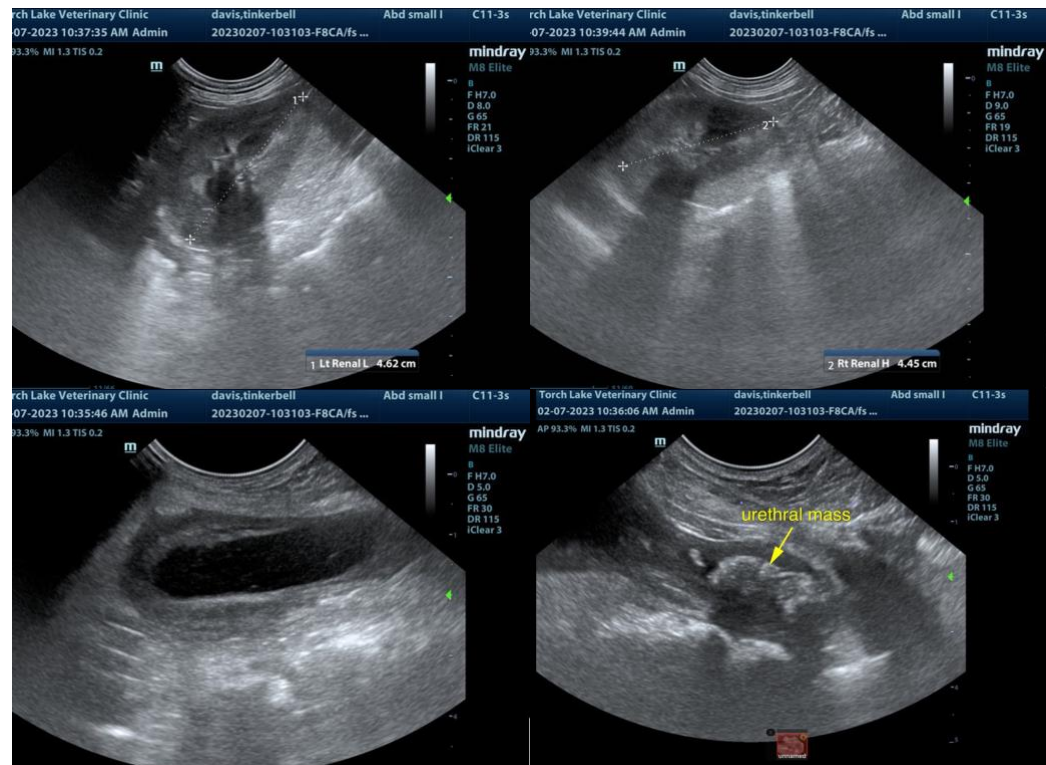
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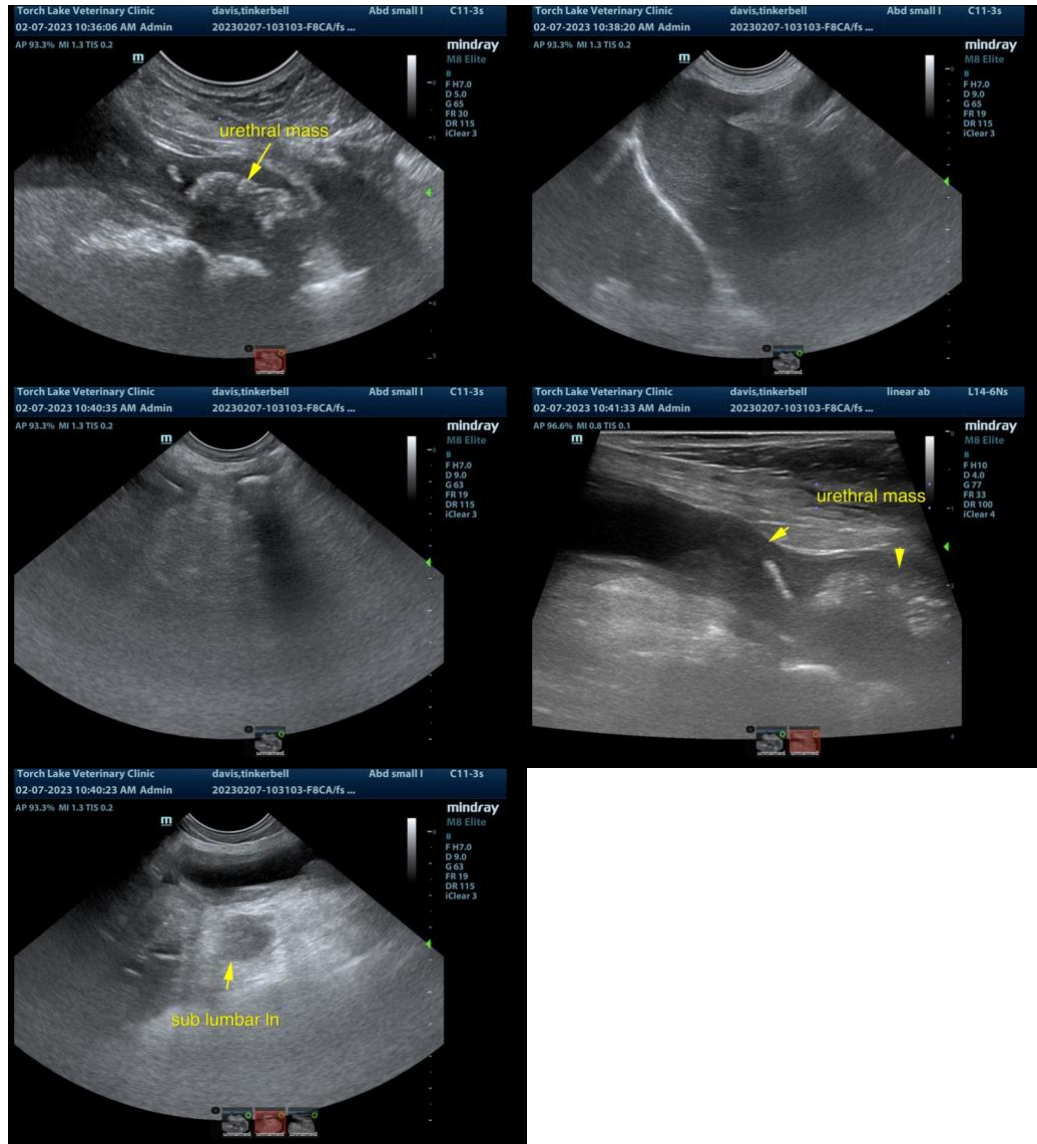
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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