



**PATIENT**

Shadow Vandyke

**SPECIES**

Canine

**BREED**

German Shepherd X

**SEX**

Neutered Male

**AGE**

12 Years

**WEIGHT**

28 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Harold Mike Beard

**HOSPITAL NAME**

West Prince AH

**REFERRING VET**

Dr. Greg Hartman

**INVOICE**

35532

**DATE**

2/9/22

**PRESENTING CLINICAL SIGNS**

Hasn't eaten in one week, lethargic. RDVM thought that radiographically there was minimal detail. Has had some loose stool with mucous. Has a perianal tumor about the size of a thumb.

Abnormal PE/Chem/CBC/UA Results: Thin. Mild abdominal pain, esp cranial abdomen. Periodontal disease. CBC = 42,050 WBC, neutrophils 34,490, monocytosis 4,830. Chemistry = inc glucose, creatinine, BUN, Phos, globulin, ALKP.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** was empty.

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 5.0 cm. The right kidney measured 5.0 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 0.50 cm. The right adrenal gland measured 0.5 cm.

**Spleen**

The **spleen** was mildly heterogeneous yet volume contracted.

**Liver**

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some 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** was mildly over distended with suspended and dependent debris, yet not to the level of emerging mucocele, yet sludge appears to be mildly excessive. No adjunctive inflammation was noted.

**Gastrointestinal**

The **stomach** itself was unremarkable. Areas of spastic duodenum noted.

**Pancreas**

Nodular omental changes were noted around the **pancreas**.

**Free Abdomen**

A moderate amount of mildly echogenic ascites noted in the abdomen.

**ULTRASONOGRAPHIC FINDINGS**

- Free fluid with nodular omental changes in and around the pancreas
- Heterogeneous spleen
- Moderate degenerative renal changes



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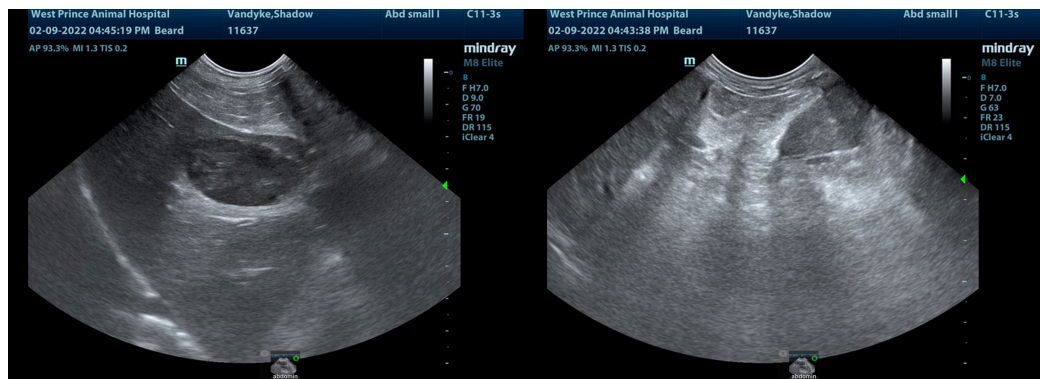
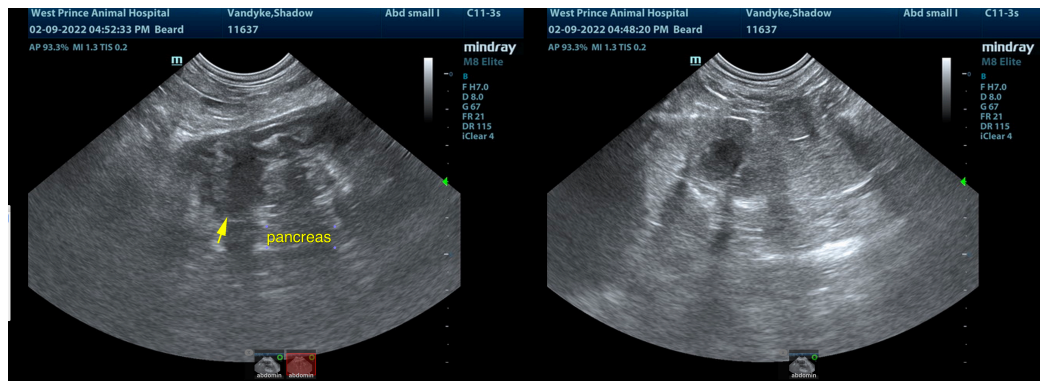
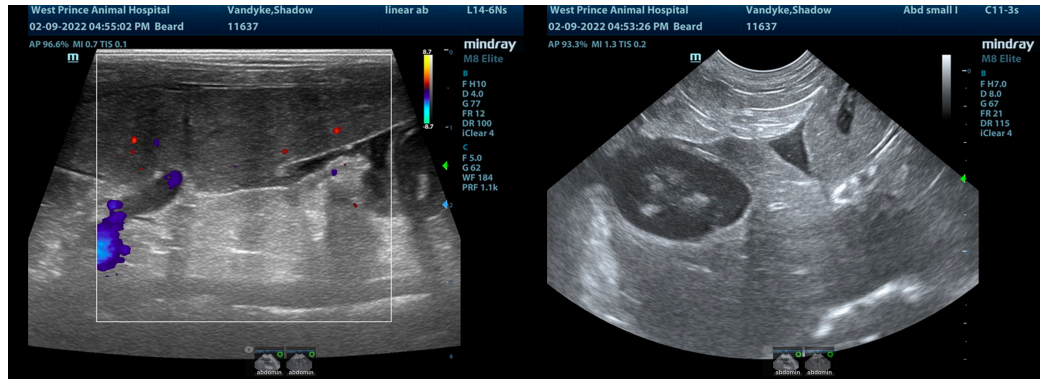
West Prince AH

**REFERRING VET**

Dr. Greg Hartman

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Concern for carcinomatosis or similar neoplasia. Ultrasound guided abdominocentesis and cytospin recommended to assess for any neoplastic cells such as carcinoma cells or lymphomatosis, mastocytosis or similar. FNA of the spleen would also be appropriate.



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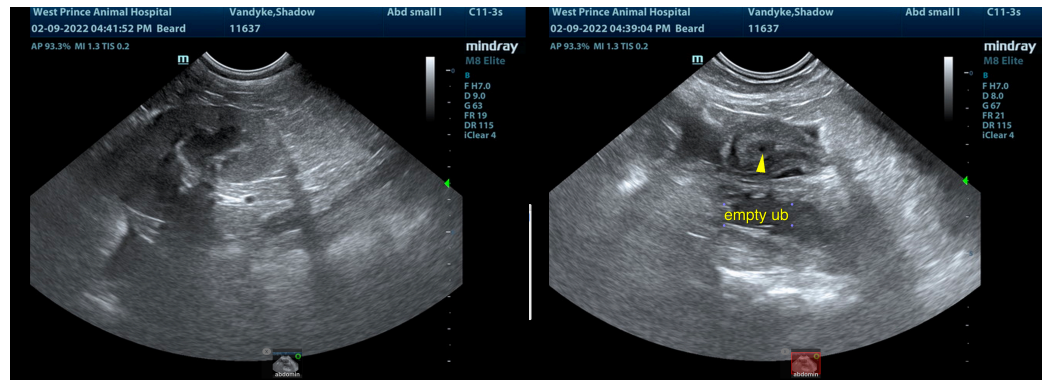
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com

[info@SonoPath.com](mailto:info@SonoPath.com)