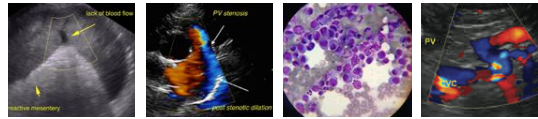


<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Charlie Dimaggio	Increased liver elevations/possible Cushing's ACTH post - borderline LDDST pending Abnormal PE/Chem/CBC/UA Results: labs + previous AUS attached
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	The <b>urinary bladder</b> , 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.
Beagle Mix	
<b>SEX</b>	The residual prostate measured 0.99 cm. The pre and post prostatic urethra was unremarkable.
Neutered Male	The <b>kidneys</b> 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. Slight pinpoint mineralization was noted. The right kidney measured 5.96 cm. The left kidney measured 5.63 cm.
<b>AGE</b>	
14 years	
<b>WEIGHT</b>	<b>Adrenal Glands</b>
40.6 lbs	The right <b>adrenal gland</b> was at the upper limits of normal to mildly enlarged and measured 2.54 x 0.9 cm at the cranial pole and 0.7 cm at the caudal pole. The left adrenal gland was expansive and progressed from the prior sonogram and measures 2.47 x 1.4 cm at the cranial pole and 0.91 cm at the caudal pole.
<b>INTERPRETED BY</b>	<b>Spleen</b>
Eric Lindquist, DMV DABVP, Cert. IVUSS	The <b>spleen</b> revealed multi-focal, hyperechoic lipogranulomatous changes with mild, generalized enlargement.
<b>IMAGING PERFORMED BY</b>	<b>Liver</b>
Denise Bruno, LVT, RDMS	The <b>liver</b> was mildly swollen. The gallbladder and common bile duct were unremarkable with increased portal markings. An expansive, left sided, 5.4 cm pedunculated mass was noted. The mass appears resectable and deviates the stomach. Minor gallbladder polyps were noted.
<b>HOSPITAL NAME</b>	<b>Gastrointestinal</b>
Brooklyn Heights VH	Examination of the <b>gastrointestinal tract</b> 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.
<b>REFERRING VET</b>	
Dr. Thomson	
<b>INVOICE</b>	
96515	
<b>DATE</b>	
3/1/22	



**PATIENT**

**Pancreas**

Charlie Dimaggio

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.

**SPECIES**

Canine

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

Beagle Mix

Left-sided pedunculated liver mass, carcinoma versus hepatoma.

Progressed left adrenal gland.

Stable right adrenal gland.

**SEX**

Neutered Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

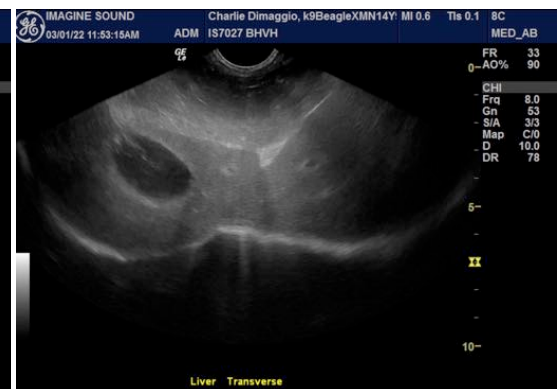
**AGE**

14 years

Left adreanlectomy is recommended +/- splenectomy, which would be a judgment call at the time of surgery. The spleen appears somewhat precarious, yet likely benign.

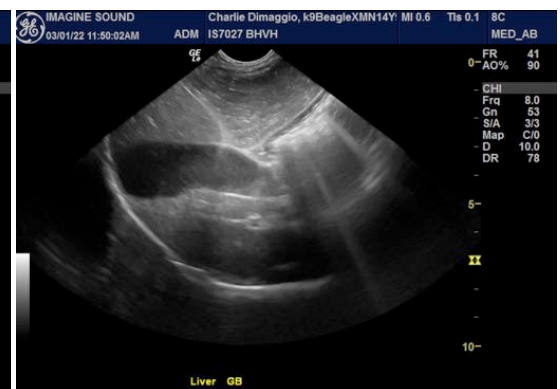
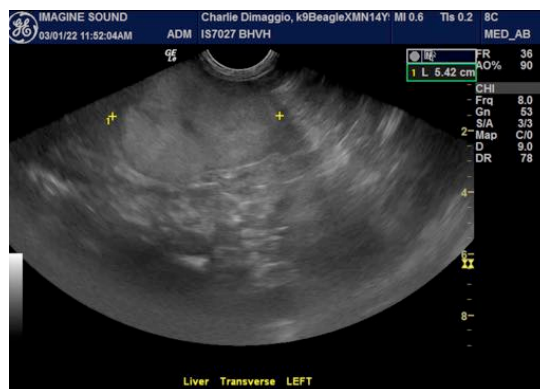
**WEIGHT**

40.6 lbs



**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS



**IMAGING PERFORMED BY**

Denise Bruno, LVT,  
RDMS

**HOSPITAL NAME**

Brooklyn Heights VH

**REFERRING VET**

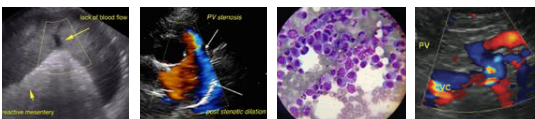
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**DATE**

3/1/22



## PATIENT

Charlie Dimaggio

## SPECIES

Canine

## BREED

Beagle Mix

## SEX

Neutered Male

## AGE

14 years

## WEIGHT

40.6 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Denise Bruno, LVT,  
RDMS

## HOSPITAL NAME

Brooklyn Heights VH

## REFERRING VET

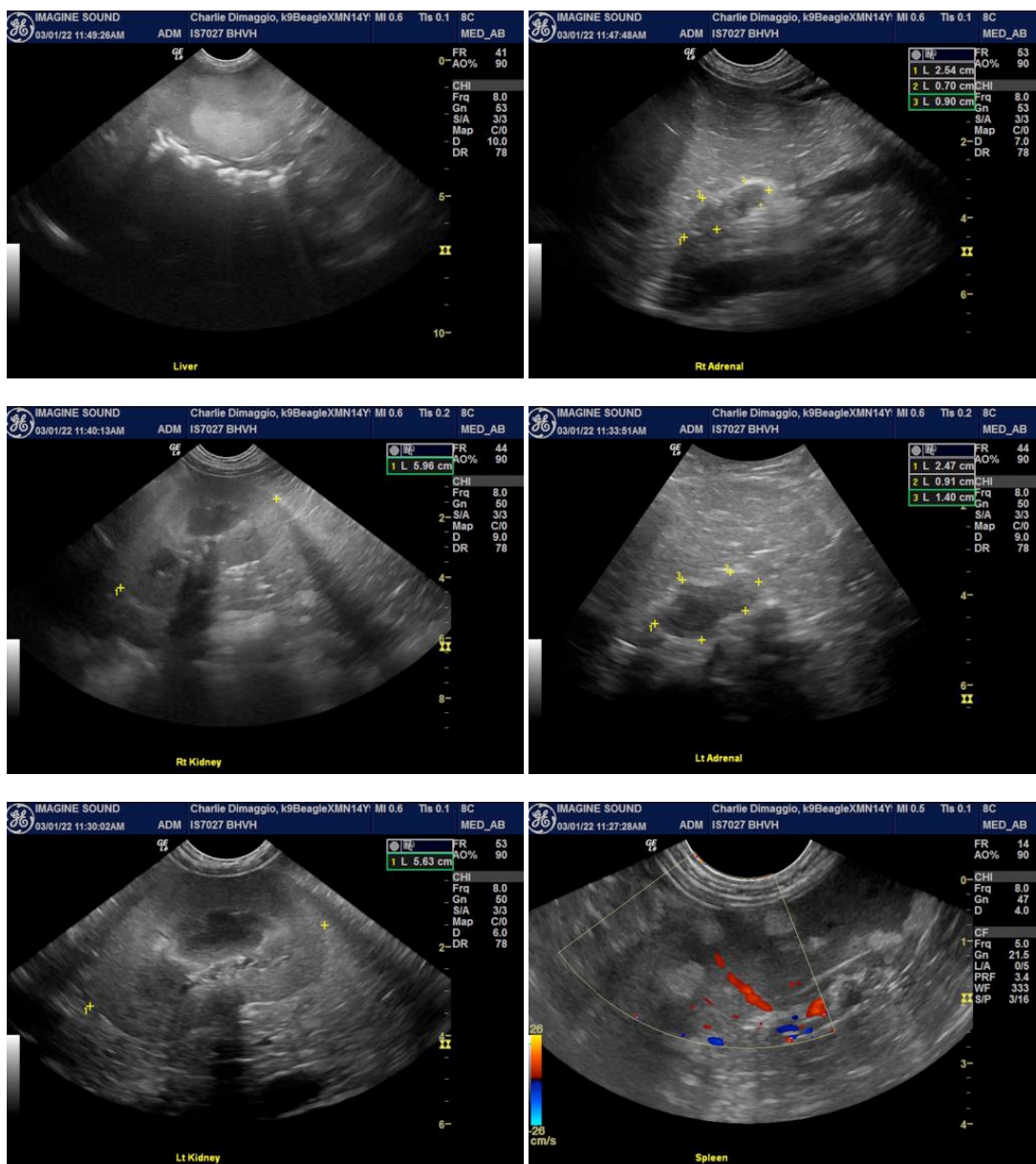
Dr. Thomson

## INVOICE

96515

## DATE

3/1/22



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.

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