

PATIENT

Stella Hansen

SPECIES

Canine

BREED

Husky mix

SEX

Spayed Female

AGE

13 years

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Greenwood Lakes AH

REFERRING VET

Dr. Louer

INVOICE

96457

DATE

3/1/22

PRESENTING CLINICAL SIGNS

Weight loss. Hypoalbuminemia, diarrhea.

Albumin 1.6, globulin 5.6, ALP 155, glucose 61

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 was noted. Ureteral papillae were normal.

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 6.62 cm. The right kidney measured 6.46 cm with a cortical infarct and irregular nodule at the caudal aspect of the right kidney.

Adrenal Glands

The left **adrenal gland** revealed a hyperechoic nodule that is consistent with adenoma at the cranial pole that measured 1.22 cm, the caudal pole measured 1.76 cm and 2.83 cm in length.

Spleen

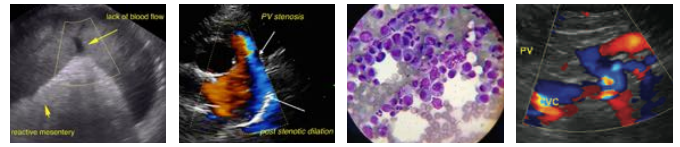
The **spleen** in this patient revealed a 6.5 cm expansive parenchymal mass with enhanced surrounding mesentery.

Liver

The majority of the **liver** was unremarkable. However, the caudate process revealed an expansive mixed hypoechoic mass. The right liver mass measured 6.15 cm with similar echotexture to that of the spleen. An anechoic cyst was noted in the left cranial liver and measured 1.0 cm. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

The **gastrointestinal tract** revealed diffuse, hyperechoic fogging or overlay throughout the small intestine as well as areas of mucosal striations and speckling. This striation + fogging effect appeared to exclusively affect the mucosal layer with the submucosa, muscularis and serosa left in-act. Reactive mesentery was present associated with the serosa indicative of active inflammation. This is most consistent with protein losing enteropathy/lymphangectasia. Full thickness biopsies or endoscopic-guided biopsies would be ideal to confirm. No obstructive disease or obvious suspicion of neoplasia.



PATIENT

Pancreas

Stella Hansen

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

Splenohepatic neoplasia.

Husky mix

Otherwise, geriatric abdomen.

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Spayed Female

FNA of the spleen and liver is warranted for further definition and adjunctive chemotherapeutic intervention. Three view thoracic radiographs are warranted.

AGE

13 years

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Greenwood Lakes AH

REFERRING VET

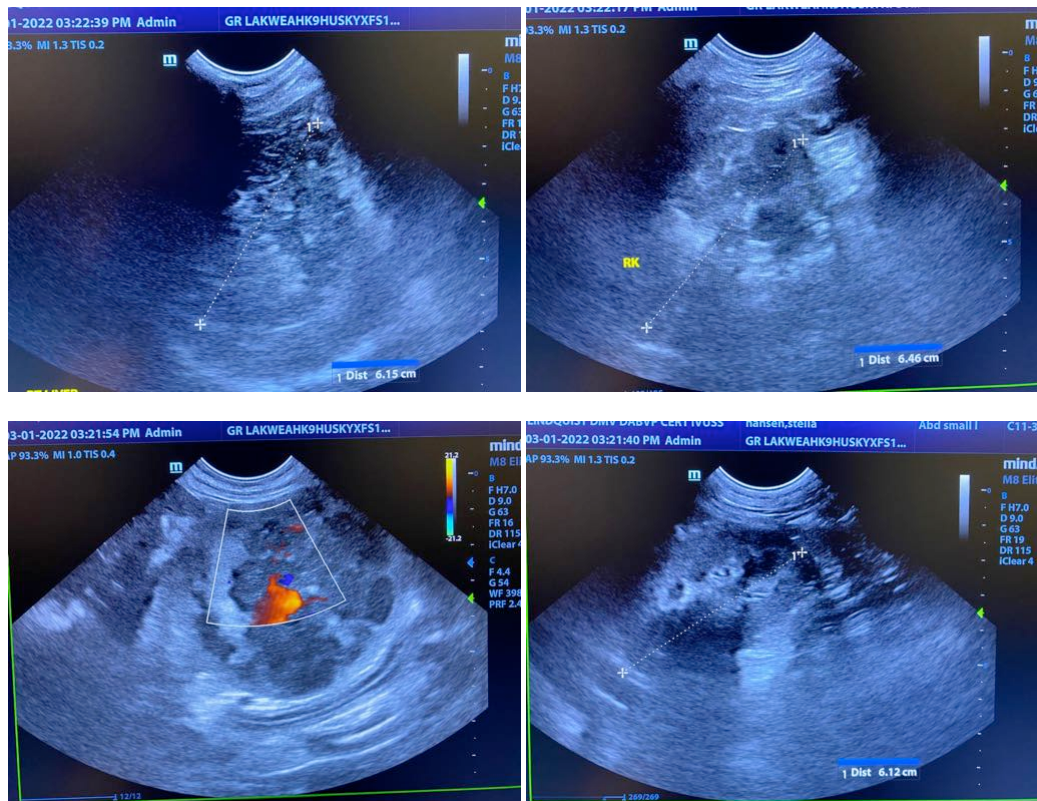
Dr. Louer

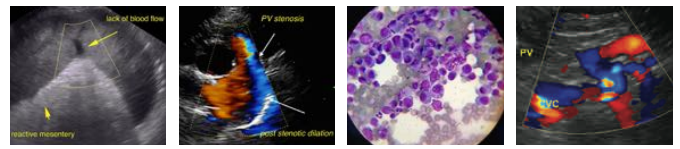
INVOICE

96457

DATE

3/1/22





PATIENT

Stella Hansen

SPECIES

Canine

BREED

Husky mix

SEX

Spayed Female

AGE

13 years

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Eric Lindquist, DMV
DABVP, Cert. IVUSS

HOSPITAL NAME

Greenwood Lakes AH

REFERRING VET

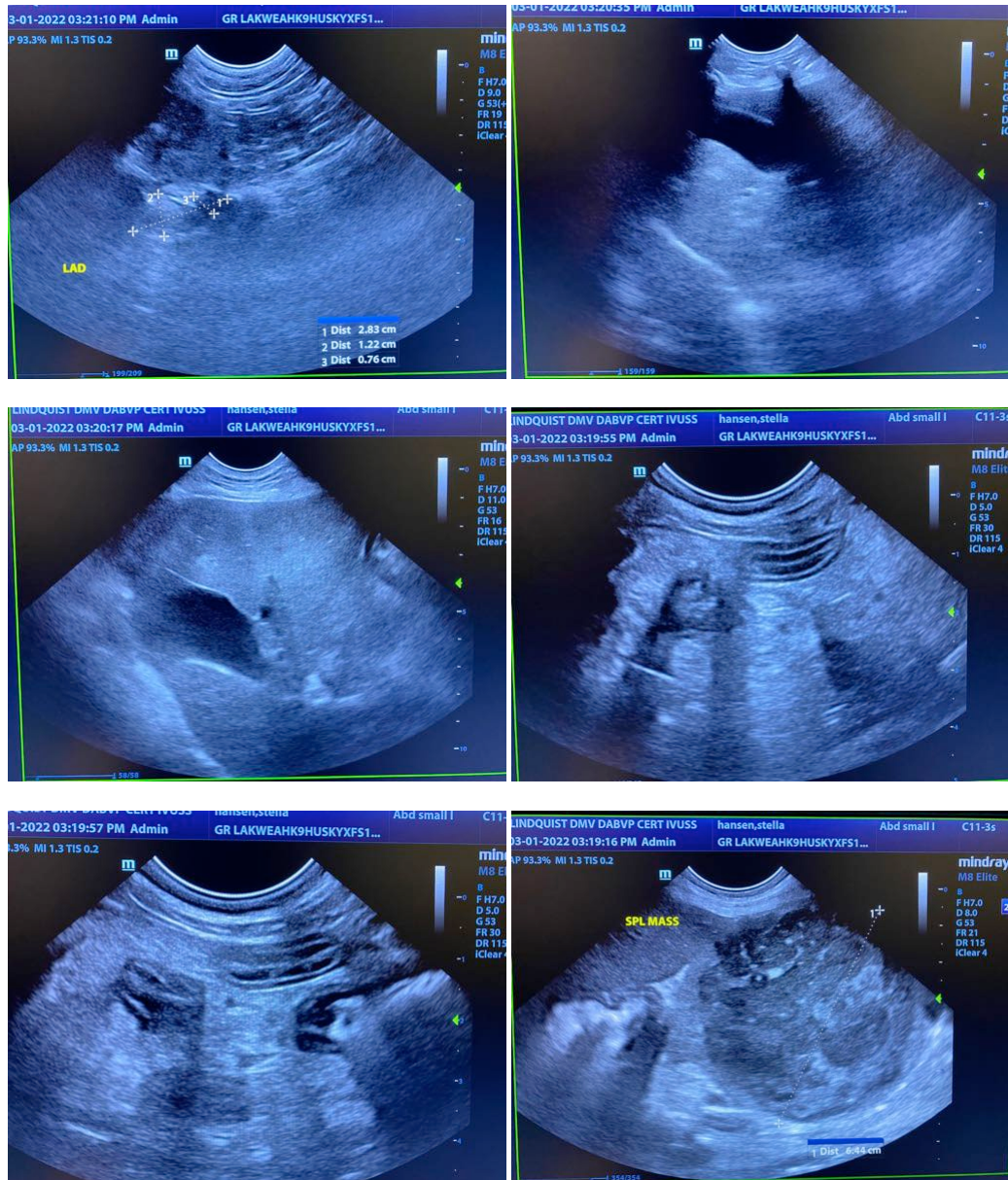
Dr. Louer

INVOICE

96457

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
Info@SonoPath.com