



PATIENT **PRESENTING CLINICAL SIGNS**

Katie Myers History: History of progressive RTL lameness with recent onset protruding nictitans. Cranial mediastinal mass noted on thoracic radiographs. Ultrasound guided FNA consistent with a matrix producing sarcoma, AUS performed to evaluate for additional metastatic disease
SPECIES Abnormal PE/Chem/CBC/UA Results: slightly elevated SDMA, NAF otherwise

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

Bloodhound The **bladder** in this patient was mildly thickened with slight echogenic mural changes. No calculi or masses were noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra were normal.

SEX

Spayed female

AGE

10 years

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. The left kidney revealed minor pyelectasia. An anechoic cyst was noted in the caudal pole of the left kidney measured 4.15 cm with minor, echogenic debris. The left kidney with the cyst measured 6.8 cm. The right kidney measured 7.4 cm.

WEIGHT

77.4 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

The right **adrenal gland** was visualized obliquely and measured approximately 0.8 cm.

IMAGING PERFORMED BY

Dr. Green

Spleen

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself. This is a positional variant and is not pathological. Hyperechoic, lipogranulomatous nodules were noted. There was no evidence of significant disease.

HOSPITAL NAME

Healing Spirit

Liver

The **liver** revealed coarse architecture with heterogenous parenchymal changes with a right medial liver mass. The mass measured 3.7 cm. The mass was microcystic and parenchymal. Mildly increased portal markings were noted elsewhere in the liver. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal.

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Gastrointestinal

DATE

3/11/23

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



PATIENT

demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Katie Myers

SPECIES

Pancreas

Canine

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.

BREED

Bloodhound

ULTRASONOGRAPHIC FINDINGS

SEX

Right medial liver nodule/mass.

Spayed female

Age related renal changes with left renal cyst.

Spleen folded upon itself with lipogranulomas.

AGE

10 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

77.4 lbs

FNA of the liver nodule/mass is indicated. The only lesion of concern is the right medial liver nodule in this patient. SDEP 12 and 13 should prove effective on sampling.

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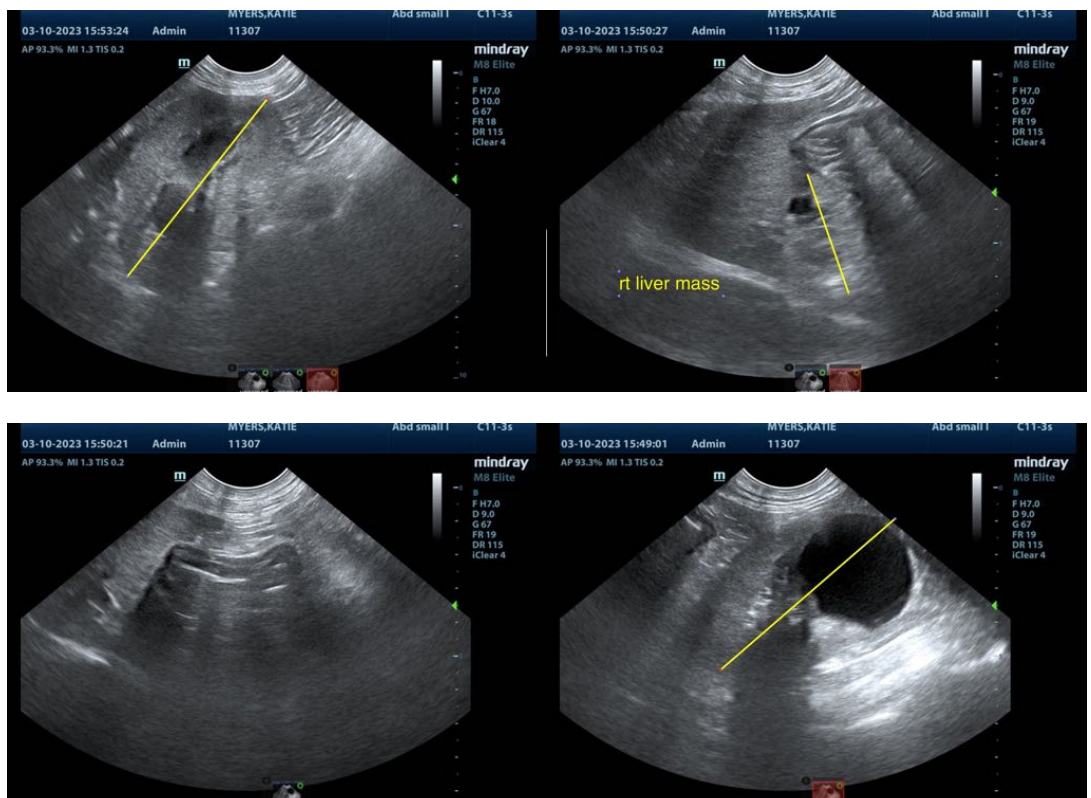
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PATIENT

Katie Myers

SPECIES

Canine

BREED

Bloodhound



SEX

Spayed female

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.

AGE

10 years

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.

WEIGHT

77.4 lbs

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