



## PATIENT

Lemon Russett

## SPECIES

Canine

## BREED

Basset Hound

## SEX

Female

## AGE

13 years

## WEIGHT

63.1 lbs

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Dr. Levy

## HOSPITAL NAME

Court Street VH

## REFERRING VET

Dr. Levy

## INVOICE

73476

## DATE

3/12/26

## PRESENTING CLINICAL SIGNS

- Lymphoma
- Mild anemia, mild thrombocytopenia -mildly elevated ALP, mildly elevated GGP

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

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.

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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left and right kidney measured 5.0 cm.

The left iliac lymph node was enlarged, rounded and hypoechoic measuring 3.8 cm.

### Adrenal Glands

The **adrenal glands** were not visualized owing to lack of acoustic penetration.

### Spleen

The **spleen** was not visualized.

### Liver

The **liver** was enlarged with hypoechoic, subtle heterogenous parenchymal changes. An overt, hypoechoic nodule was noted in the cranial aspect of the left liver. The hepatic veins were mildly dilated. The gallbladder revealed mild polypoid changes.

### Gastrointestinal

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 demonstrated normal luminal chyme and stool consistency respectively. The epigastric lymph nodes were slightly enlarged and rounded.



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## Pancreas

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.

## Free Abdomen

The cranial abdominal lymph node was enlarged and measured up to 2.4 x 1.2 cm.

## ULTRASONOGRAPHIC FINDINGS

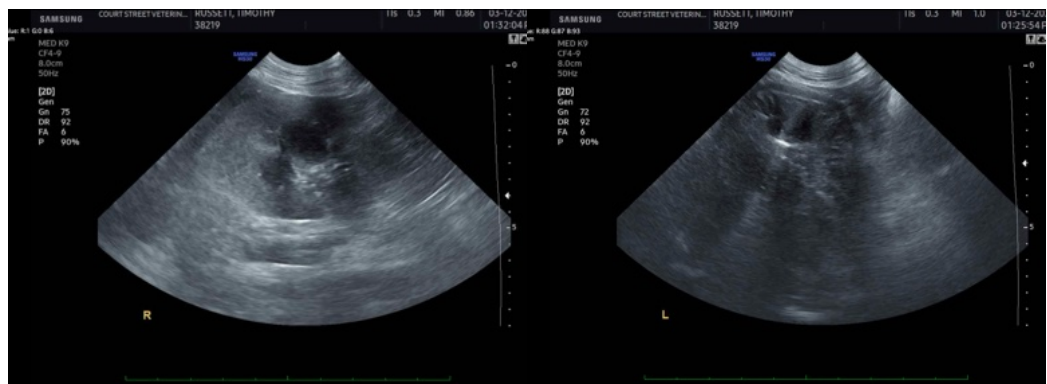
Iliac and cranial abdominal lymphadenopathy.

Slight hepatic enlargement.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

\*\*Contrast resolution was challenging in many of the images owing to lack of acoustic power.

FNA of the liver and iliac lymph nodes are indicated to confirm suspicion of round cell neoplasia/lymphoma. Urinary workup is warranted to assess for any evidence of cystitis. Assessment for history of splenectomy is recommended.





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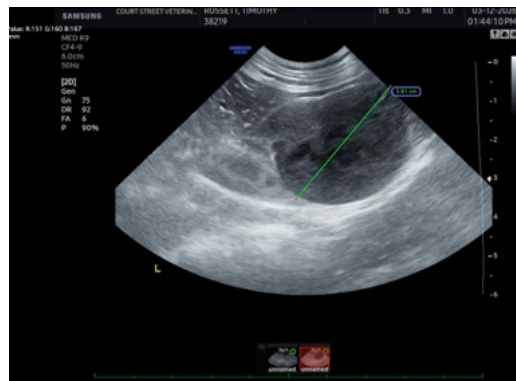
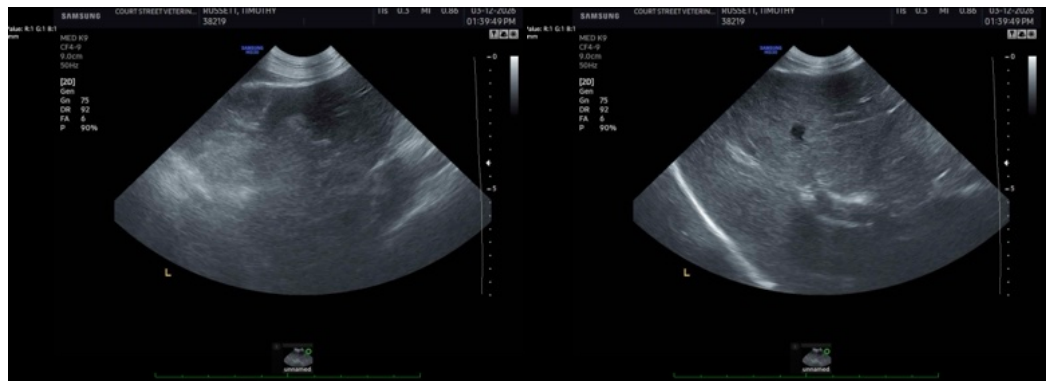
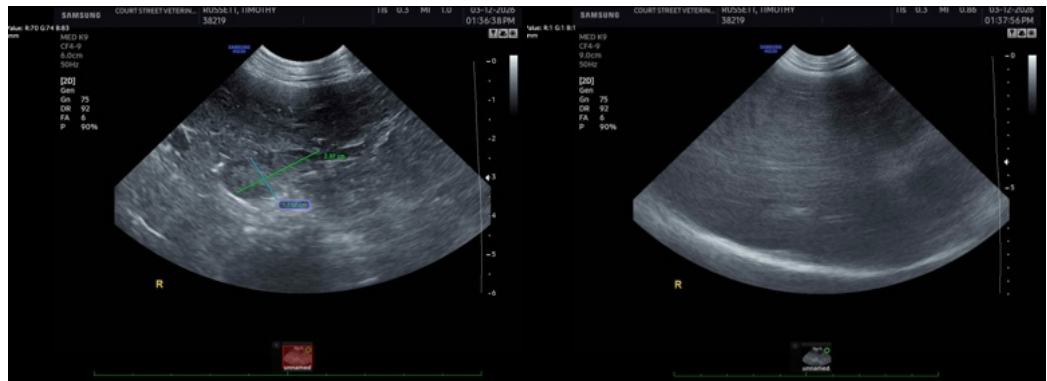
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 (CFM), Cert. IVUSS, CEO of SonoPath.com

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