



## PATIENT

Jazz Stepler

## SPECIES

Canine

## BREED

Mix

## SEX

Spayed Female

## AGE

9 Years

## WEIGHT

74 lbs

## INTERPRETED BY

Eric Lindquist, DMV,  
DABVP (CFM), Cert.  
IVUSS

## IMAGING PERFORMED BY

Dr. Mary Pearce

## HOSPITAL NAME

Chambersburg Animal  
Hospital

## REFERRING VET

Dr. Mary Pearce

## INVOICE

73710

## DATE

3/13/26

## PRESENTING CLINICAL SIGNS

Seen 2/27/26 for wellness exam and evaluation of masses. FNA performed of masses of concern. Cytology result showed concerns for spindle cell proliferation on one of the masses (right lateral thigh) concerning for spindle cell neoplasm, sx for biopsy/removal recommended. Abdominal ultrasound/staging recommended with radiographs and BW. O elected to pursue staging and presented for this today. BW found leukocytosis with neutrophilia/monocytosis and elevated ALT. Thoracic radiographs found concerns for a large, single pulmonary mass. After going over options for referral for more advanced imaging (CT chest and abdomen), o elected to continue with ultrasound here, is not sure if she is going to pursue oncology/sx specialist referral for pulmonary mass. Abdominal ultrasound performed for met check.

Abnormal PE/Chem/CBC/UA Results: 3/13/26: HCT 51.2%, WBC 20.68, neut 17.83, mono 1.29. PLt 336. Alb 4.2, ALT 196, tbili 1.1. Radiographs: There is a large, round soft tissue opaque structure associated with the left caudal, ventral aspect of the lungs. This has the appearance of a discrete pulmonary mass. The remainder of the pulmonary parenchyma appears normal. Cardiac silhouette appears normal. Abdominal detail is normal. Liver is mildly enlarged with slightly rounded edges. Otherwise unremarkable abdomen. Spondylosis present.

## 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 were noted. Ureteral papillae were normal. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

The iliac trifurcation was unremarkable.

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. Right kidney measured 7.03 cm. Left kidney measured 6.1 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. Left measured 3.0 cm x 0.57 cm at the cranial pole and 0.59 cm at the caudal pole. Right measured 0.70 cm at the cranial pole and 0.70 cm at the caudal pole.

### Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.



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## Liver

The **liver** presented coarse architecture and mild increased portal markings. Mild irregular contour noted and a mild amount of remodeling. The gallbladder and common bile duct were unremarkable.

## Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.

## Pancreas

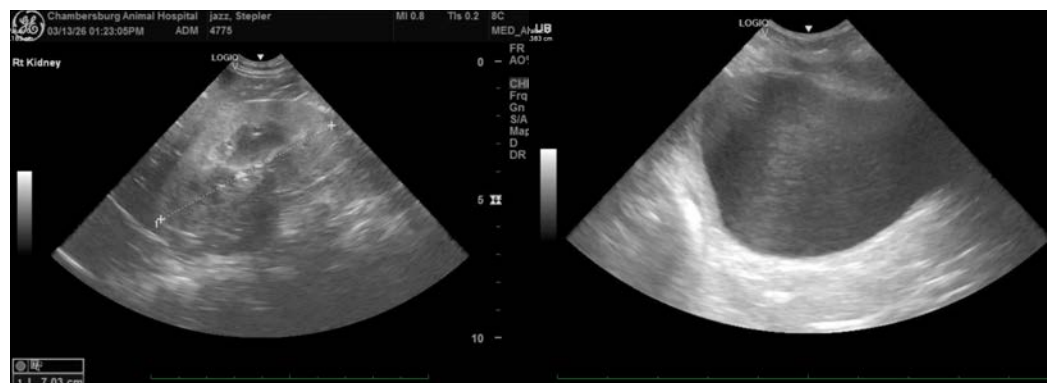
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

## ULTRASONOGRAPHIC FINDINGS

- Non-specific mild hepatic remodeling.
- Age related renal changes.
- Partially full stomach.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

If bilirubin elevation is not artifactual, then FNA of the liver indicated. No overt evidence of neoplasia, nor is it suspected.





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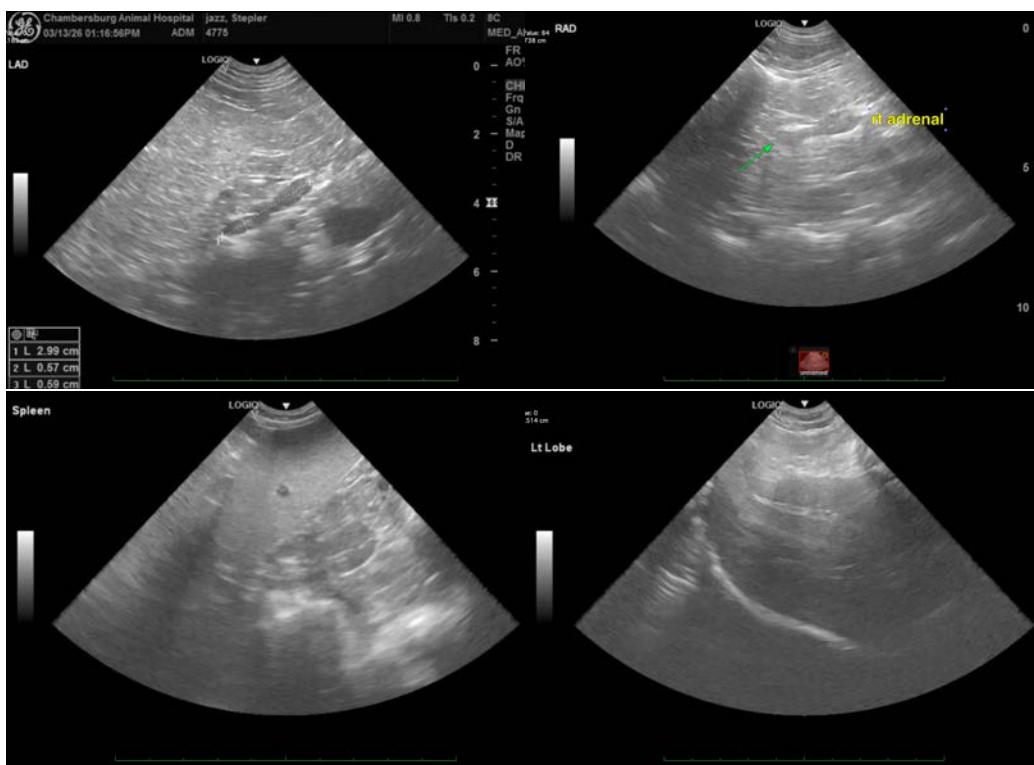
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Owner, Founder -- SonoPath.com  
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