**PATIENT**

Emma Hirsch

SPECIES

Canine

BREED

Doodle

SEX

Spayed Female

AGE

4 Years

WEIGHT

38.6 Pounds

INTERPRETED BYEric Lindquist, DMV,
DABVP (CFM), Cert.
IVUSS**IMAGING
PERFORMED BY**Loetitia Saint-Jacques,
LVT**HOSPITAL NAME**

Donnertruckee VH

REFERRING VET

Dr. Vannini

INVOICE

36229

DATE

3/14/26

PRESENTING CLINICAL SIGNS

History: presented 2 days ago for coughing, tx with antibiotics for suspected pneumonia. abdominal mass noted on XR , follow up today for AUS. o reports anorexic and coughed small amount of blood yesterday. Petechia noted when shaving for AUS

Abnormal PE/Chem/CBC/UA Results: Petechia

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 3.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild 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 right kidney measured 7.0 cm. The left kidney measured 6.55 cm.

Adrenal Glands

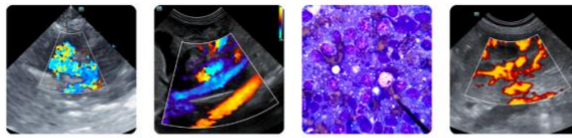
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 0.51 cm. The left adrenal gland measured 0.48 cm at the cranial pole and 0.47 cm at the caudal pole.

Spleen

The **spleen** revealed an isolated parenchymal mass, measuring 7.0 cm, deriving from the mid caudal body. Slight free fluid was noted adjacent to the spleen up to the splenic mass, which is highly precarious and at risk for rupture/torsion.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume, and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable. No overt evidence of metastatic disease.



PATIENT

Emma Hirsch

SPECIES

Canine

BREED

Doodle

SEX

Spayed Female

AGE

4 Years

WEIGHT

38.6 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Donnertruckee VH

REFERRING VET

Dr. Vannini

INVOICE

36229

DATE

3/14/26

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. 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.

Other

A rapid view of the **heart** revealed no evident pathology.

Shower curtain pattern was noted through the diaphragm.

ULTRASONOGRAPHIC FINDINGS

- Precarious splenic mass – no evidence of metastatic disease. Hemangiosarcoma versus benign hyperplastic mass are possible.
- Shower curtain pattern through the diaphragm- This can be consistent with PTE, metastatic disease, lung hemorrhage, or pneumonitis.
- Age-related renal and hepatic changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the patient history, full coagulation panel is warranted with eventual exploratory surgery. This is a surgical emergency, however, stabilization, given the petechia, is warranted. Paraneoplastic bleeding disorder may be playing a role.



Imaging performed by



pawsonography@gmail.com
530-786-8340



Clinical Sonography & Teletology
Educational Teleconsultation Services™

SonoPath

FOSTERING THE ART OF VETERINARY MEDICINE™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Emma Hirsch

SPECIES

Canine

BREED

Doodle

SEX

Spayed Female

AGE

4 Years

WEIGHT

38.6 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Donnertruckee VH

REFERRING VET

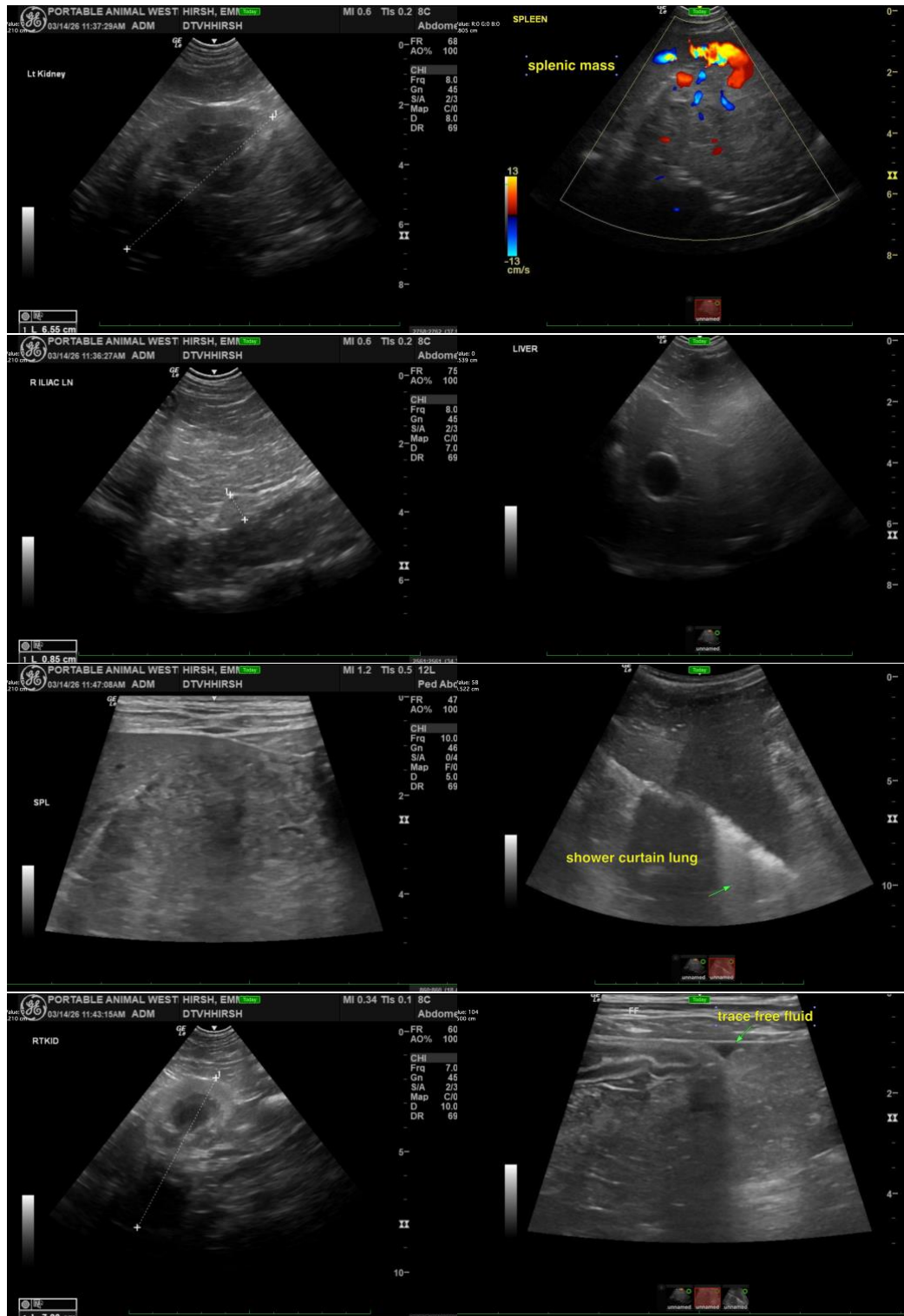
Dr. Vannini

INVOICE

36229

DATE

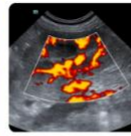
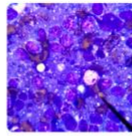
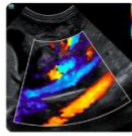
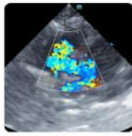
3/14/26



Imaging
performed by



Portland Animal Wellness Sonography, Inc.
pawsonography@gmail.com
530-786-8340



Clinical Sonography & Telectology
Educational Teleconsultation Services™

SonoPath

FOSTERING THE ART OF VETERINARY MEDICINE™

SonoPath.com  info@sonopath.com  1.800.838.4268

PATIENT

Emma Hirsch

SPECIES

Canine

BREED

Doodle

SEX

Spayed Female

AGE

4 Years

WEIGHT

38.6 Pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Loetitia Saint-Jacques,
LVT

HOSPITAL NAME

Donnertruckee VH

REFERRING VET

Dr. Vannini

INVOICE

36229

DATE

3/14/26

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
info@SonoPath.com