



PATIENT

Madison Orth

SPECIES

Canine

BREED

Labrador Mix

SEX

Spayed Female

AGE

10 years

WEIGHT

77 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Moss

HOSPITAL NAME

Harvest Hills VH

REFERRING VET

Dr. Moss

INVOICE

96527

DATE

3/2/22

PRESENTING CLINICAL SIGNS

Pt presented for vomiting, lethargy starting last week but got better over the weekend and then worse again 2 days later. Pt doesn't get into things or eat human food.
Abnormal PE/Chem/CBC/UA Results: CBC was within expectations, with suspected band neuts and low eos. Platelets were normal. ALP-823 and ALT-199. on 5/7/21 pt has normal ALP and 171-ALT. Rads showed abnormal location of stomach and can't see tail of spleen.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. 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 6.0 cm. The right kidney was visualized obliquely, but obscured by the reactive mesentery.

Adrenal Glands

The left **adrenal gland** was slightly irregular at the cranial pole and measured 1.3 cm. The cranial pole was visualized obliquely. The caudal pole measured 0.7 cm.

Spleen

The **spleen** revealed an expansive parenchymal mass. The mass measured 7.0 cm with reactive surrounding mesentery.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some 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.



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Gastrointestinal

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The **stomach** revealed minor fluid filled lumen with variable intestinal wall thickening. A separate intestinal mass measuring 6.0 cm was noted and appears to be jejunal with reactive surrounding mesentery. Variable other portions of small intestine were also thickened.

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Pancreas

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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.

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ULTRASONOGRAPHIC FINDINGS

AGE

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Intestinal mass with reactive mesentery and variable intestinal thickening.

Concurrent splenic mass.

Multi-centric sarcoma is suspected.

WEIGHT

77 lbs

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the parenchymal portion of the splenic mass and intestinal mass is warranted with immediate chemotherapeutic intervention.

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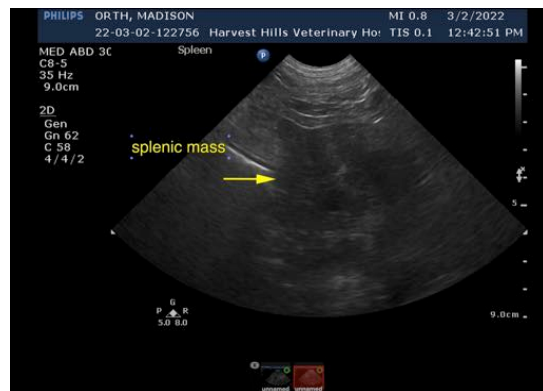
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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