



PATIENT

Duncan Kysliger

SPECIES

Canine

BREED

Great Swiss Mountain
Dog

SEX

Neutered male

AGE

8 years

WEIGHT

113.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Annette Anleu

HOSPITAL NAME

Ellwood AH

REFERRING VET

Dr. Maro

INVOICE

72110

DATE

3/2/26

PRESENTING CLINICAL SIGNS

- Pets mucous membranes have appeared somewhat pale pink at times.
- Breed has predisposition for "splenic masses"
- SDMA 15 (0-14), BUN 34 (9-31), ProBNP 1475 (0-900)

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 was noted. Ureteral papillae 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 right kidney measured 6.86 cm.

The residual prostate was uniform and measured 1.6 cm in width.

Adrenal Glands

The **adrenal glands** were not visualized.

Spleen

The **spleen** revealed a focal, hypoechoic, expansive nodule measuring 2.28 cm with mild disruption of architecture. Another nodule was noted and measured 2.13 cm. The spleen was folded upon itself cranially.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.



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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

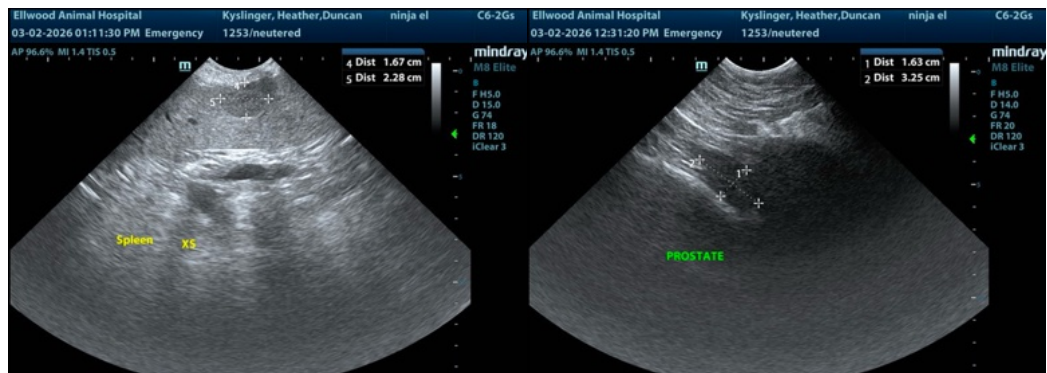
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

Splenic nodules, one disrupted architecture.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the breed predisposition, I recommend proactive splenectomy in this patient. Differentials include emerging hemangiosarcoma or round cell neoplasia, necrosis and nodular hyperplasia. Chest radiographs and rapid echocardiogram are warranted to assess for metastatic disease. There was no evidence of pathology elsewhere in the abdomen.





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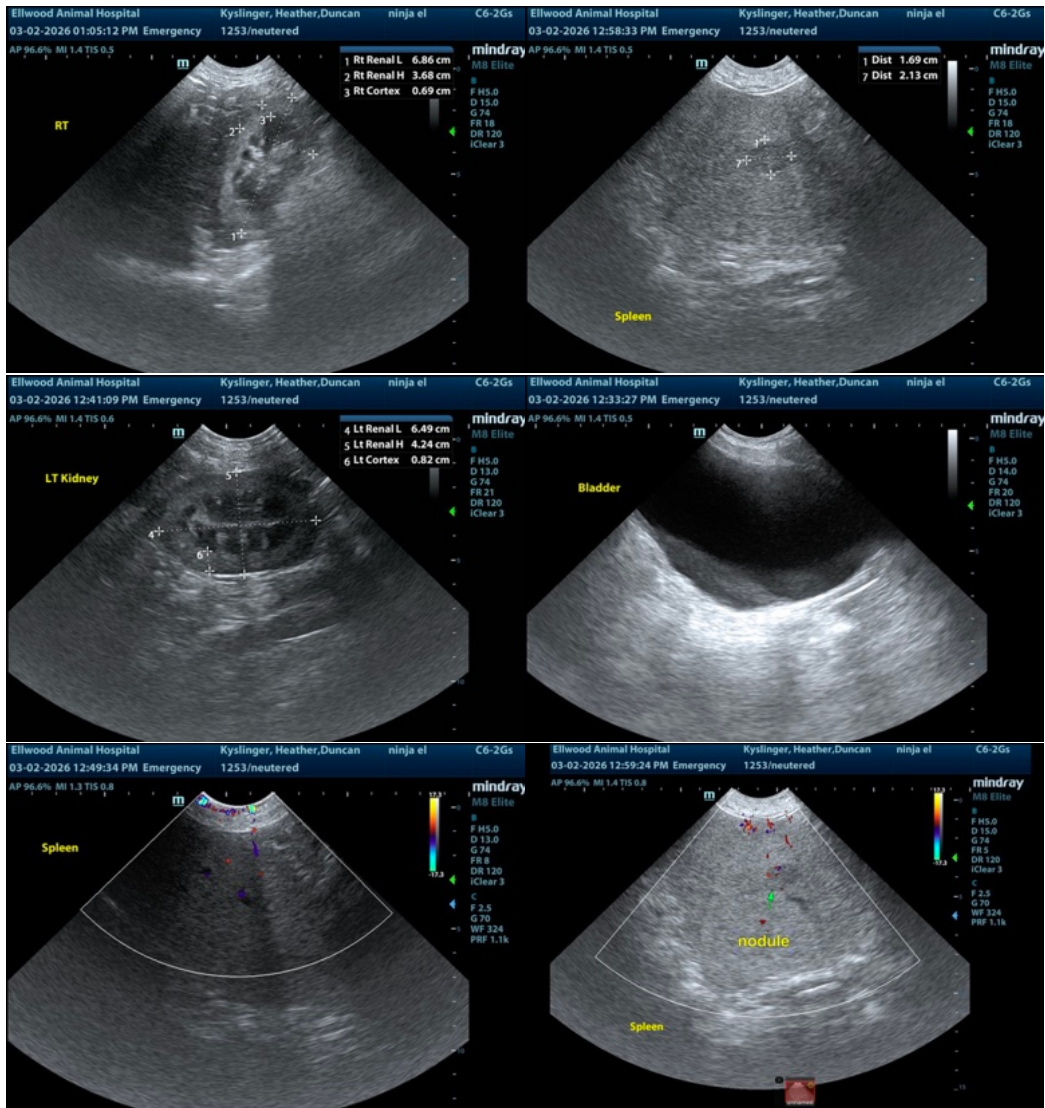
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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