



PATIENT

Bella Soares-DaSilveira

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed Female

AGE

8 Years

WEIGHT

40.7 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Natalia Franco

HOSPITAL NAME

Eagleson Veterinary
Clinic

REFERRING VET

Dr. Boules Maher

INVOICE

14487

DATE

03/20/26

PRESENTING CLINICAL SIGNS

- Presented for lethargy, pacing, anorexia and distended abdomen. Vomited bile a few times.
- AUS recommended for further investigation.

Abnormal PE/Chem/CBC/UA Results: Free fluid on AFast and loss of details on abdominal rads. BW WNL with the exception of mild increase of ALP. Serosanguineous fluid (bright light red, moderate turbidity) submitted for cytology.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed a small calculus grouping of which measured 1.6 cm and appeared nonobstructive at the time of the sonogram. The urethra was visible to a depth of 2.0 cm.

The **kidneys** were swollen with enhanced surrounding mesentery. The left kidney measured 7.6 cm in length. The right kidney measured 7.8 cm in length.

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 left adrenal gland measured 0.60 cm width. The right adrenal gland measured 0.60 cm width.

Spleen

The **spleen** presented slightly swollen and mildly irregular.

Liver

The **liver** presented distinctly hypoechoic to falciform fat with ill-defined mural detail.

Gastrointestinal

Variable areas of **intestinal** infiltrative patterns were noted creating mass effects with loss of mural detail. Areas of intestinal stasis were present.

Pancreas

The **pancreas** was obscured by hyperechoic omental enhancement.

Free Abdomen

A large amount of abdominal fat was noted in this patient. Free fluid was noted in the abdomen as well as reactive mesentery.

Enlarged hypoechoic mesenteric lymph nodes were present with loss of structural detail, the largest of which measured 4.0 cm x 1.5 cm.

ULTRASONOGRAPHIC FINDINGS

- Multicentric lymphoma pattern -primarily of the GI tract and lymph nodes.
- Swollen spleen/kidneys.



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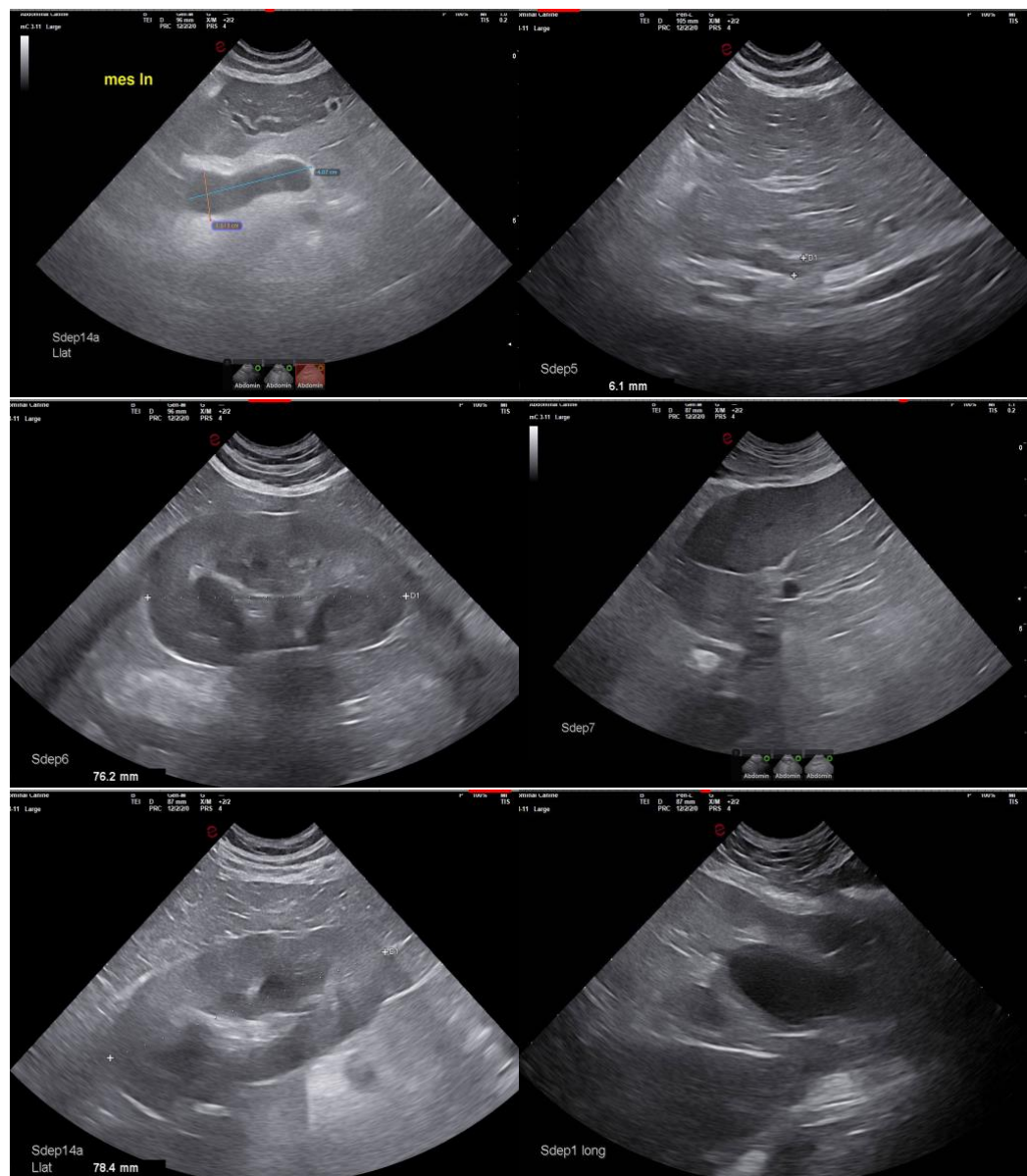
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- Reactive mesentery and secondary peritonitis.
- Abdominal fat and free fluid.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen, liver, lymph nodes and intestine and/or abdominocentesis and cytospin are all indicated for a definitive diagnosis. Chest radiographs are warranted to assess for comorbidity/metastatic disease.





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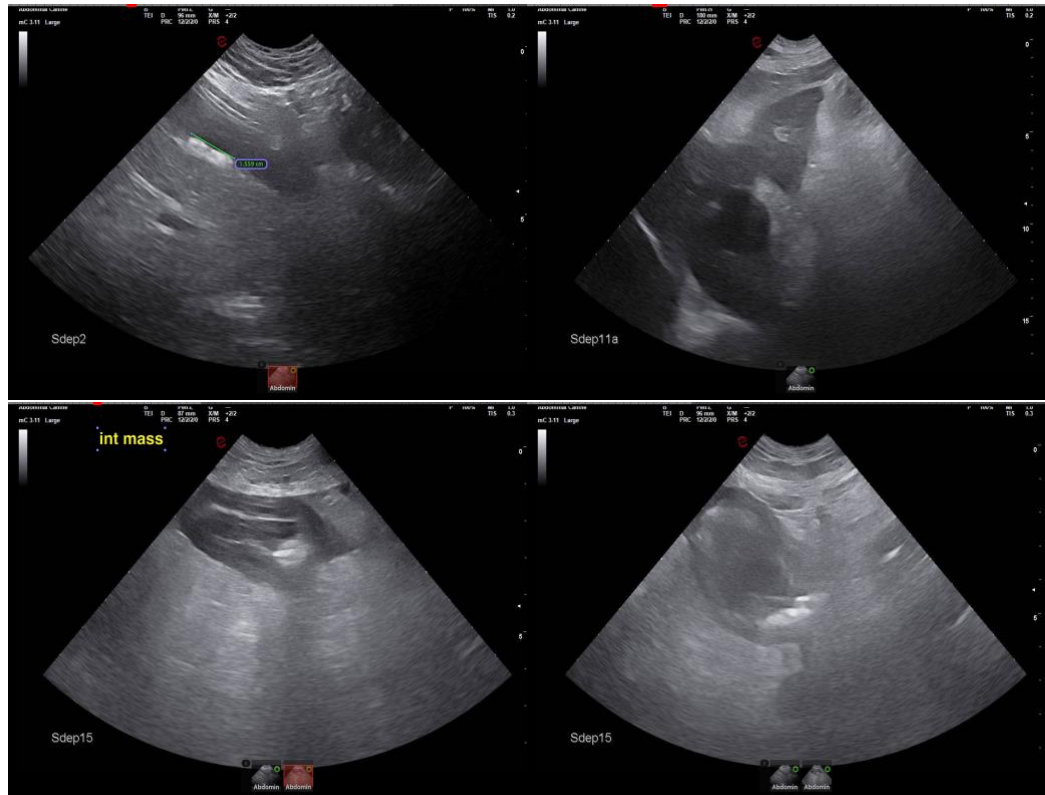
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,

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