

PATIENT

Junior Hernandez

SPECIES

Canine

BREED

Dalmatian

SEX

Neutered male

AGE

10 years

WEIGHT

58 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Logas

HOSPITAL NAME

Bradenton VH

REFERRING VET

Dr. Logas

INVOICE

97097

DATE

3/22/22

PRESENTING CLINICAL SIGNS

History: Patient was presented for vomiting and not eating. 6 months ago patient was presented for similar symptoms and elevated liver enzymes. No toxins that aware of. Owner declined leptospirosis testing
Abnormal PE/Chem/CBC/UA Results: NEU%-93.0, MCHC-38.6, Globulin-3.8, Cholesterol-376, ALP-618

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** was over distended with suspended debris. Bladder calculus was noted and measured 1.5 cm and were non-obstructive.

The left kidney is mildly swollen with slightly thickened cortices and slight corticomedullary mineralization.

Adrenal Glands

The **adrenal glands** were not visualized.

Spleen

The **spleen** in this patient was mildly enlarged with uniform parenchyma and was folded upon itself caudally and was uniform with mild capsular swelling and enhanced surrounding mesentery.

Liver

The **liver** was swollen and irregular. The gallbladder wall was edematous and thickened with excessive debris.

Gastrointestinal

The upper **gastrointestinal tract** is mildly thickened with enhanced surrounding mesentery. A minor amount of chyme was noted in the lumen.

Pancreas

An undifferentiated hypoechoic mass was noted in the right pancreatic base. This may be hepatic lymph node in origin. The lymph node measured 3.0 cm. The exact origin cannot be fully evaluated.

Free Abdomen

A mild amount of free fluid was noted in variable parts of the abdomen.



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ULTRASONOGRAPHIC FINDINGS

Enlarged spleen and liver.

Undefined mass in the cranial abdomen.

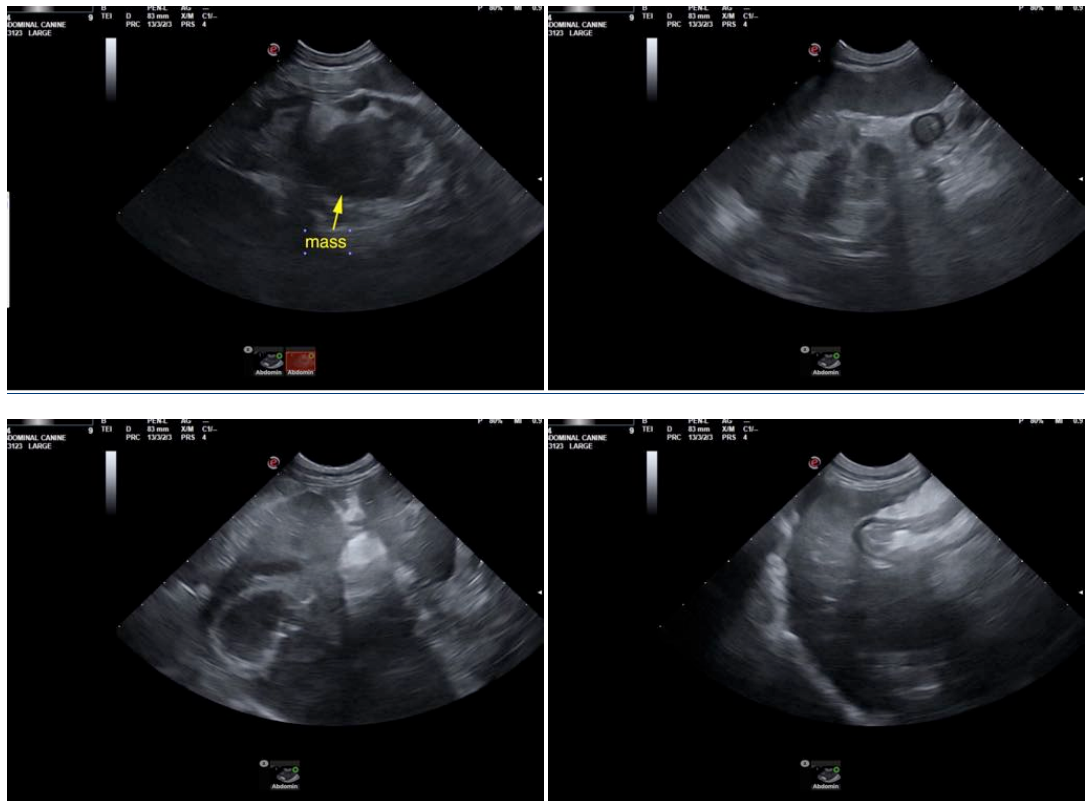
Reactive mesentery.

Variable GI thickening.

Concurrent bladder calculus.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I am concerned for round cell neoplasia. FNA of the spleen, liver +/- cranial abdominal mass if accessible is recommended. The prognosis is very guarded.





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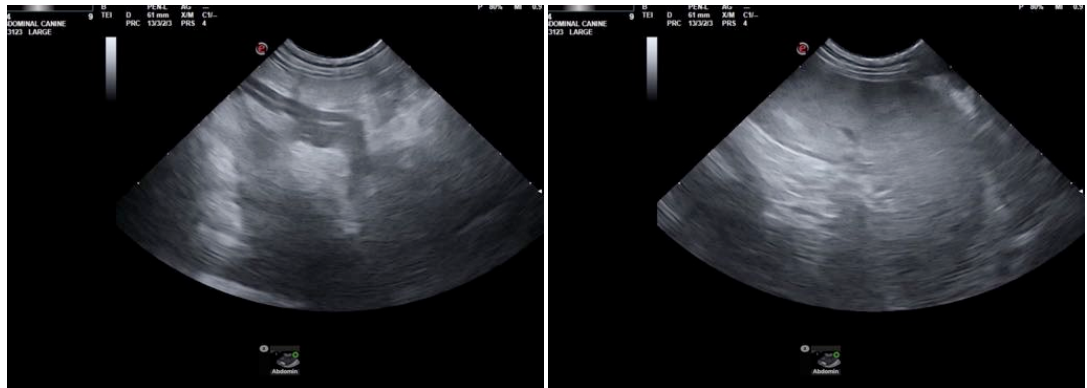
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com
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