



**PATIENT**

Glory Laden

**PRESENTING CLINICAL SIGNS**

History: History of anal gland ACA, (left). Needs ultrasound prior to surgery.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Golden Retriever

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.

**SEX**

Intact female.

The right ovary was uniform and measured 1.44 x 1.15 cm.

The iliac lymph nodes were unremarkable.

**AGE**

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 right kidney measured 5.44 cm. The left kidney measured 5.18 cm.

**WEIGHT**

**Adrenal Glands**

**INTERPRETED BY**

Eric Lindquist, DMV,  
DABVP, Cert. IVUSS,  
CEO of SonoPath.com

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 3.73 x 1.05 cm at the cranial pole and 0.74 cm at the caudal pole. The left adrenal gland measured 2.95 x 0.73 cm at the caudal pole and 0.72 cm at the cranial pole.

**IMAGING PERFORMED BY**

Kelly Vazquez, CVT

**Spleen**

**HOSPITAL NAME**

The **spleen** was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. These changes are consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

**REFERRING VET**

**Liver**

**INVOICE**

The **liver** revealed a hypoechoic nodule in the mid liver and measured 2.13 x 1.44 cm. 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.

**DATE**

3/24/22



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**Gastrointestinal**

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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.

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Golden Retriever

**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.

**SEX**

Intact female.

**Free Abdomen**

The left anal gland revealed a thickened, irregular, undifferentiated mass measuring 3.15 x 1.79 cm. The left anal gland appears encapsulated with slight irregular margins.

**AGE**

**WEIGHT**

**ULTRASONOGRAPHIC FINDINGS**

Thickened, irregular, left anal gland. Carcinoma versus chronic adenitis.

Liver nodule, likely hyperplasia. This would not be a typical location for metastatic disease for anal gland carcinoma if that becomes a definitive diagnosis.

**INTERPRETED BY**

No evidence of metastatic disease.

Eric Lindquist, DMV,  
DABVP, Cert. IVUSS,  
CEO of SonoPath.com

Geriatric abdomen.

**IMAGING PERFORMED BY**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Kelly Vazquez, CVT

Removal of the left anal gland is recommended. Chest radiographs are recommended prior to surgery.

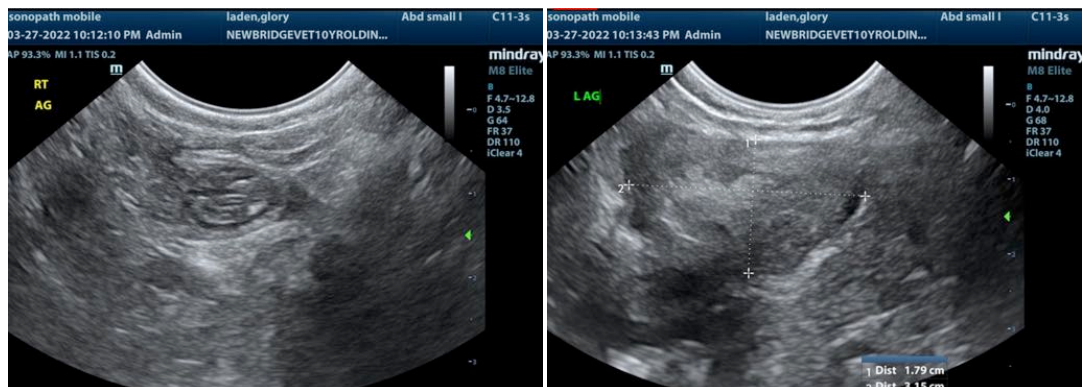
**HOSPITAL NAME**

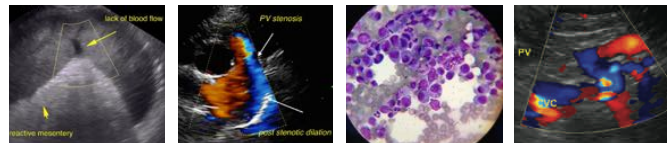
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Intact female.

**AGE**

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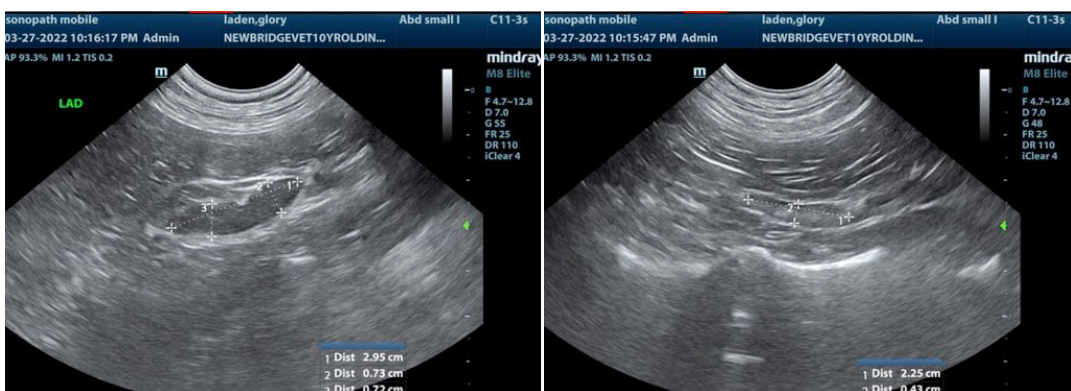
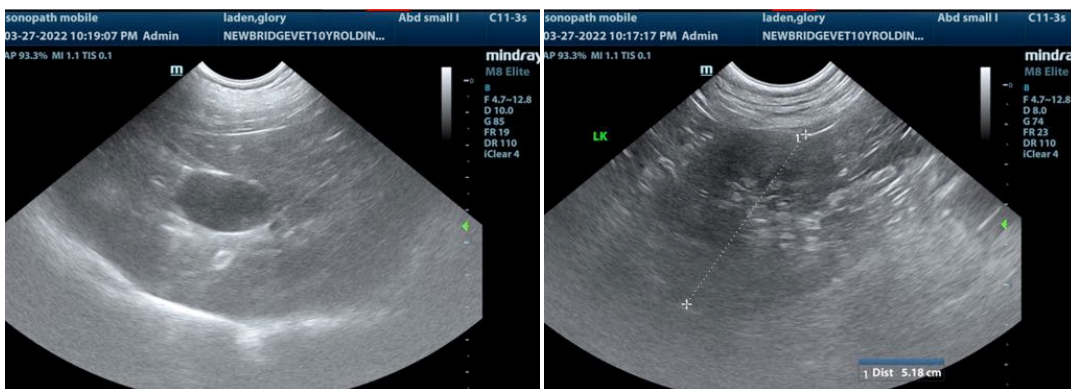
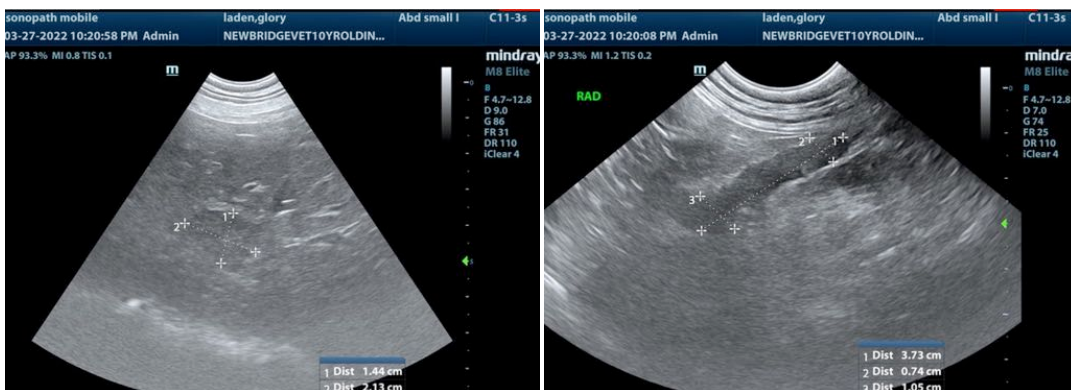
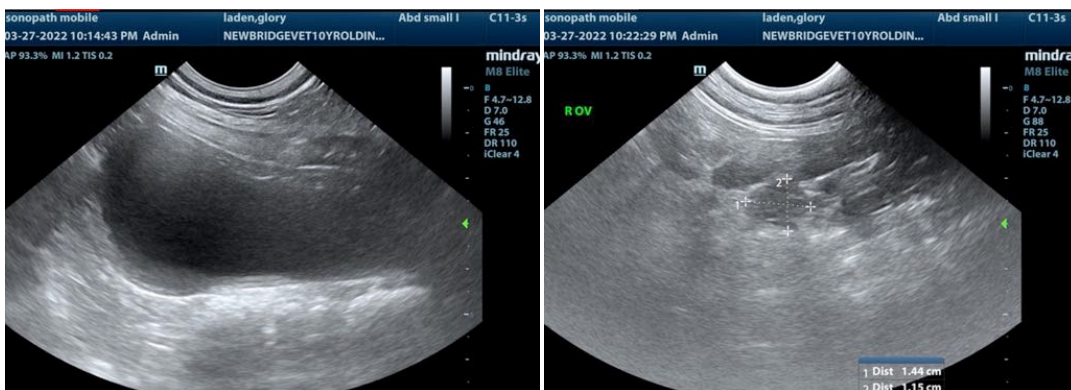
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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**

Info@SonoPath.com

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