

**DATE**

3/29/22

PRESENTING CLINICAL SIGNS

Anemia and blood in the abdomen.
Current Medications: None listed.
Radiographs: Haziness around the spleen.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Requested.
Imaging Performed By: Andi Parkinson, RDMS

PATIENT

Sophie Hitt

SPECIES

Canine

BREED

Golden Lab

SEX

Spayed Female

AGE**WEIGHT**

5/19/11

INTERPRETED BYEric Lindquist, DMV
DABVP, Cert. IVUSS**HOSPITAL NAME**Animal Medical Clinic
of Dulaney Valley**REFERRING VET**

Dr. Chrest

INVOICE

97871

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 7.43 cm. The left kidney measured 6.67 cm.

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 right adrenal gland measured 2.02 x 0.74 cm. The left adrenal gland measured 2.11 x 0.78 cm at the caudal pole and 0.42 cm at the cranial pole.

Spleen

The **spleen** revealed multi-centric, mixed echogenic nodular changes with irregular contour. A large undifferentiated splenic mass was noted and measured 0.8 cm with regional inflammation, adhesions and surrounding free fluid. Multi-focal, target lesions were noted throughout the spleen.

Liver

The **liver** revealed nodules and masses with double layered gallbladder. Expansive, irregular target lesions were noted.

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.

Free Abdomen

A moderate amount of echogenic free fluid was noted in the abdomen.

Heart

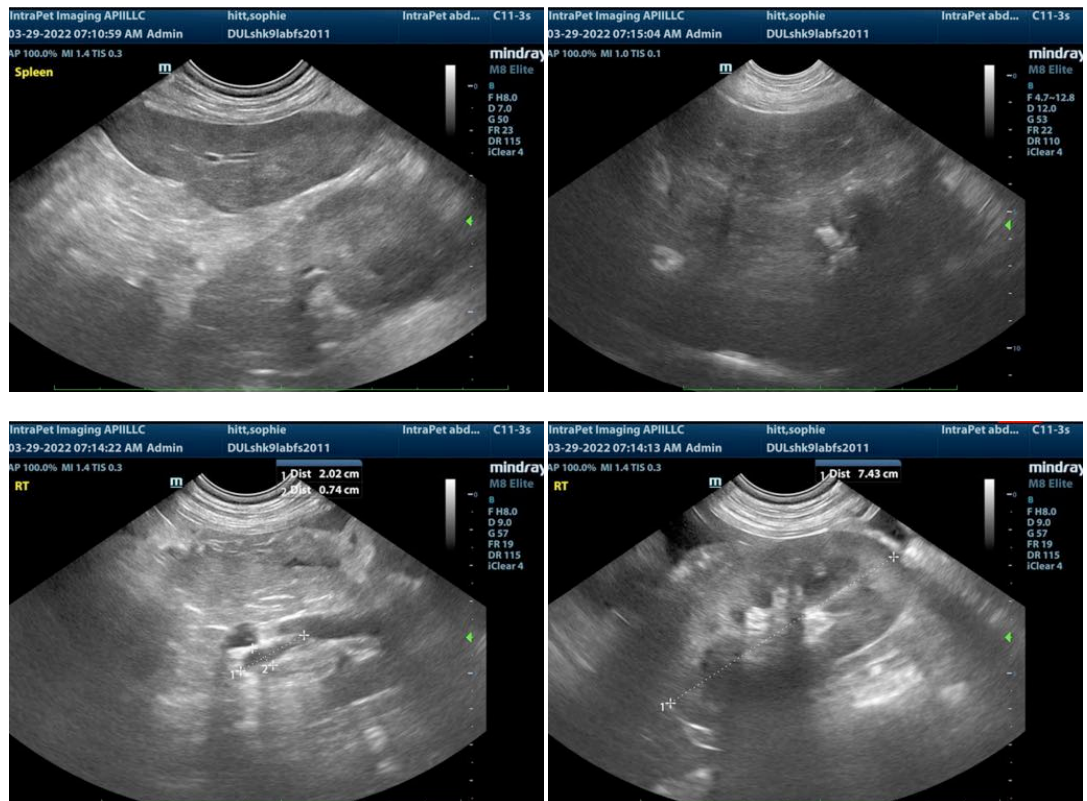
Periodic tachyarrhythmia was noted with slight pleural effusion.

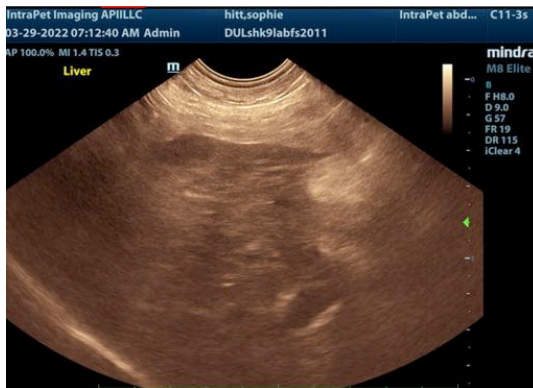
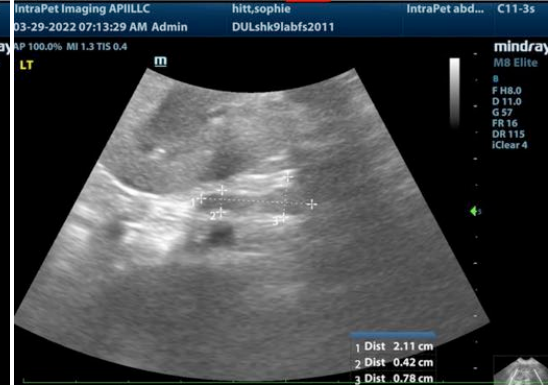
ULTRASONOGRAPHIC FINDINGS

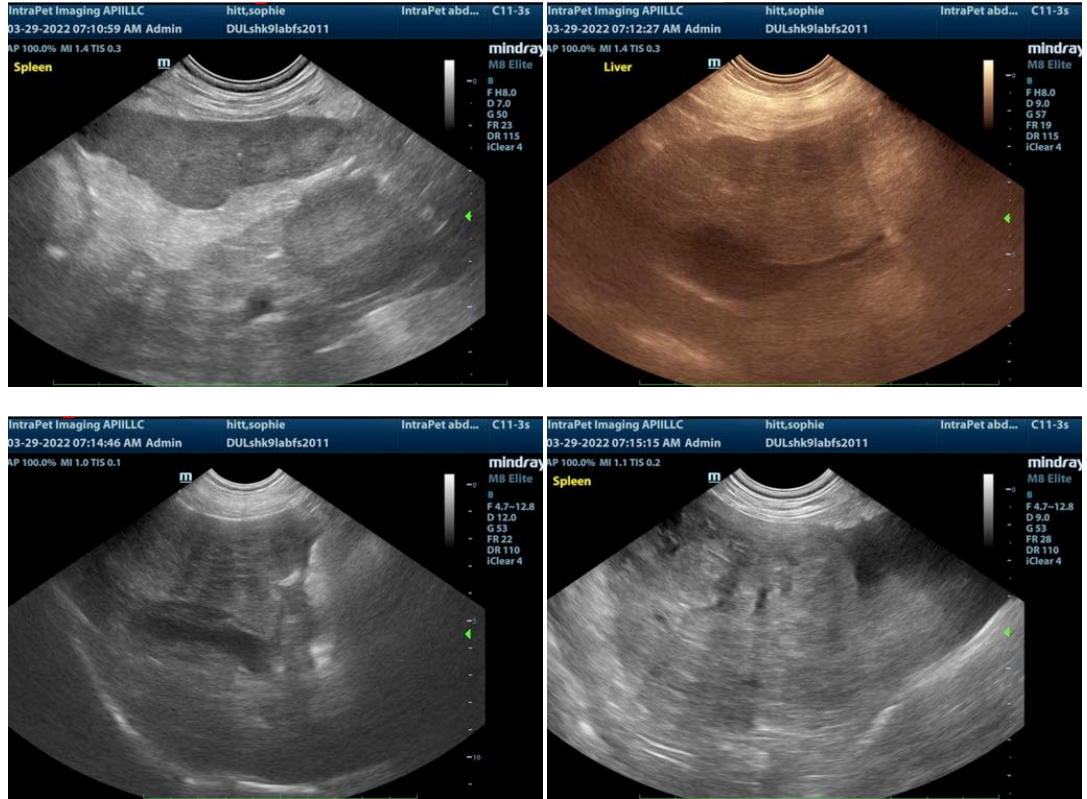
Splenohepatic neoplasia. Sarcoma pattern with free fluid. Either hemoabdomen or paraneoplastic effusion. Early chest metastasis is likely.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The prognosis is poor in this patient given the extent of the pathology. FNA of the liver, spleen and immediate therapeutic intervention could be considered, yet supportive care for quality of life or humane euthanasia should be considered.







The information and recommendations provided are based on the images presented by the referring veterinarian. 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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