



PATIENT

Jax Bonaventura

SPECIES

Canine

BREED

Terrier Mix

SEX

Neutered Male

AGE

13

WEIGHT

17.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Varujan
Belekdanian

HOSPITAL NAME

Overpeck Creek
Animal Hospital

REFERRING VET

Dr. Varujan
Belekdanian

INVOICE

14740

DATE

03/30/26

PRESENTING CLINICAL SIGNS

- Jax is a 13 year old MN small mixed breed presenting ADR for the past several days. Patient's exam showed that patient had some sensitivity to touch on the abdomen, as well as from spin on thoraco-lumbar region upon palpation. Patient's labwork showed a non-regenerative anemia (HCT 34.6%, reticulocyte count of 10,000), a platelet count of 50,000, a BUN of 35, a hypokalemia of 3.7, ALT 219, and a negative 4dx. Patient has been historically diagnosed with a soft tissue sarcoma of the right forelimb, hypertriglyceridemia that's been managed with a hepatic prescription diet, and protein losing nephropathy that's being managed with telmisartan 10 mg SID.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra to a depth of 1.0 cm 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 were 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 mild 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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 4.6 cm in length. The right kidney measured 4.6 cm in length.

Adrenal Glands

The **right adrenal gland** was 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 0.80 cm width at the cranial pole and 0.40 cm width at the caudal pole.

The **left adrenal gland** revealed a hyperechoic nodule at the cranial pole. The left adrenal gland measured 0.90 cm width at the cranial pole and 0.70 cm width at the caudal pole.

Spleen

The **spleen** presented mildly enlarged with focal hypoechoic lipid plaques yet not pathological. The spleen measured 1.9 cm width with a fairly uniform parenchyma and swollen contour. Subtle micronodular changes were noted in the spleen.

Liver

The **liver** was swollen with irregular contour and pronounced caudate process. The gallbladder and common bile duct were unremarkable. Slight hepatic lymphadenopathy was 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



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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.

Heart

Limited views of the **heart** revealed no evidence of pathology. Normal volumes and functions with no evidence of masses.

ULTRASONOGRAPHIC FINDINGS

- Splenohepatomegaly with lipid plaques in the spleen.
- Slight left adrenal nodule- likely benign adenoma.
- Age-related renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen and liver is indicated to assess for early infiltrative disease such as lymphoma versus reactive spleen and benign hepatopathy for the liver. Prognosis is guarded.



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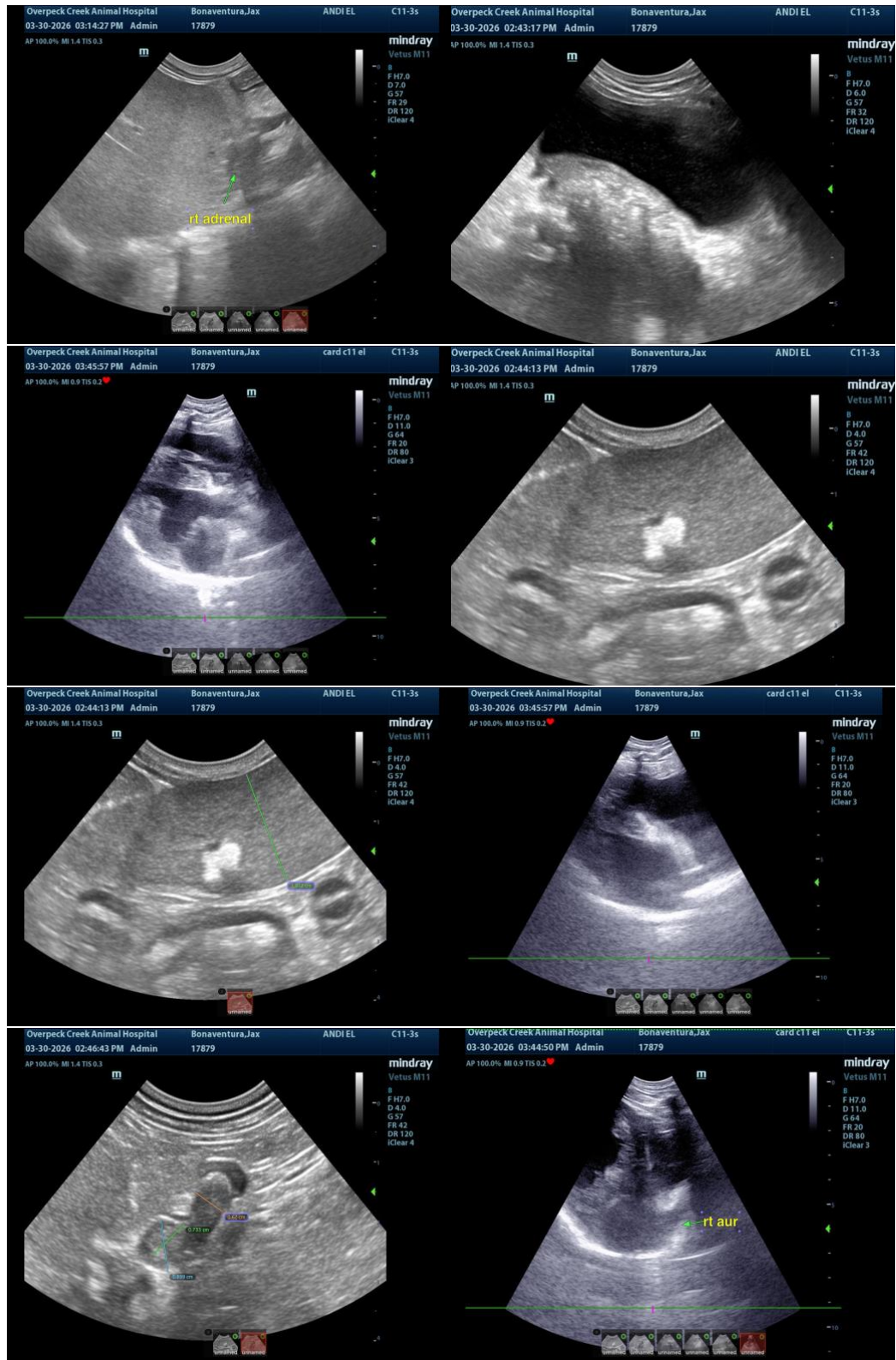
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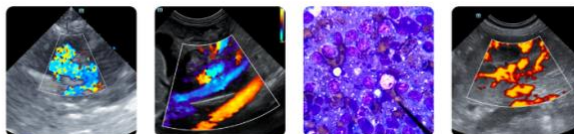
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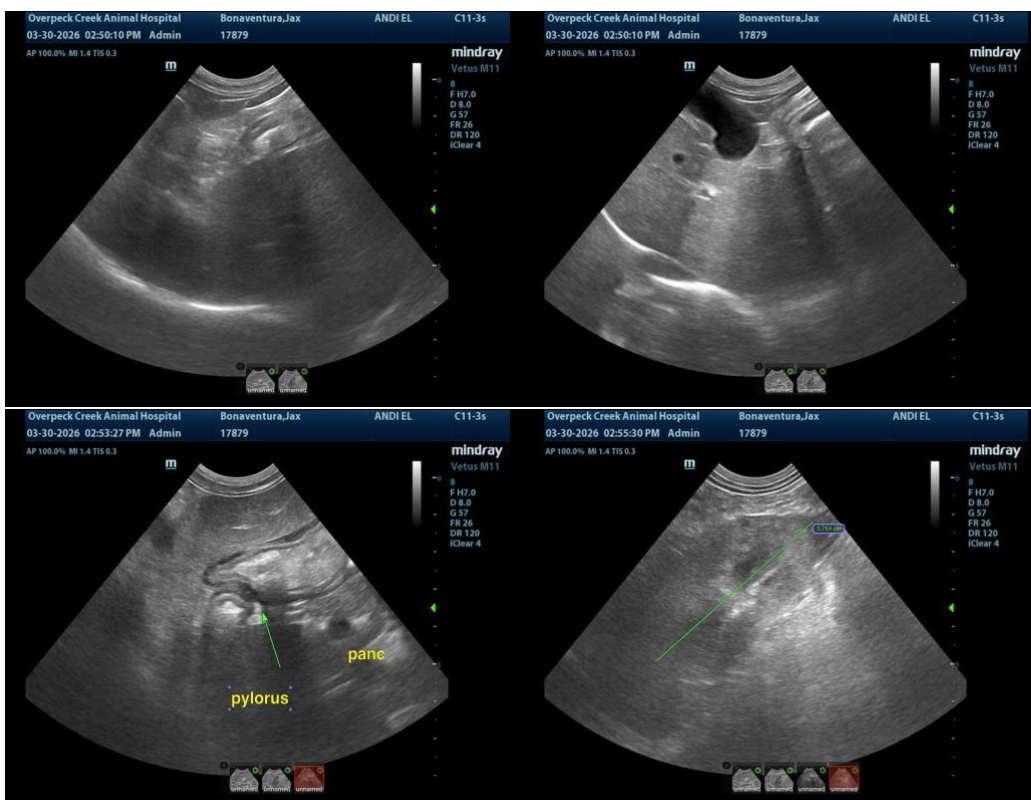
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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