



PATIENT PRESENTING CLINICAL SIGNS

Sugar Biggs Blood in urine Diagnosed with bladder tumor in July of 2022 at trigone of the bladder

SPECIES Abnormal PE/Chem/CBC/UA Results: Liver enzymes are elevated Current Medications None

Canine

BREED

Border Collie

SEX

Spayed Female

AGE

15 Years

WEIGHT

~50 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Linn Vet Hospital

REFERRING VET

Dr. Braat

INVOICE

46356

DATE

3/31/23

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed a 4.8 cm x 2.0 cm mineralizing mass entering into the deep pelvic urethra at least 7.0 cm. The mass was significantly vascular on color flow assessment. The ureters were not obstructed at this time.

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 6.13 cm. The left kidney measured 5.3 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 2.4 cm x 0.62 cm at the caudal pole and 0.77 cm at the cranial pole. The left adrenal gland measured 2.5 cm x 0.63 cm at the caudal pole and 0.84 cm at the cranial pole.

Spleen

The **spleen** was heterogeneous with mildly irregular contour and isoechoic nodular changes, consistent with hyperplasia. Potential underlying neoplasia such as lymphoma, likely unrelated to the bladder presentation.

Liver

The **liver** presented increased portal markings and swollen irregular contour. Gallbladder calculi noted. Hepatic lymph nodes were enlarged and rounded.

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.



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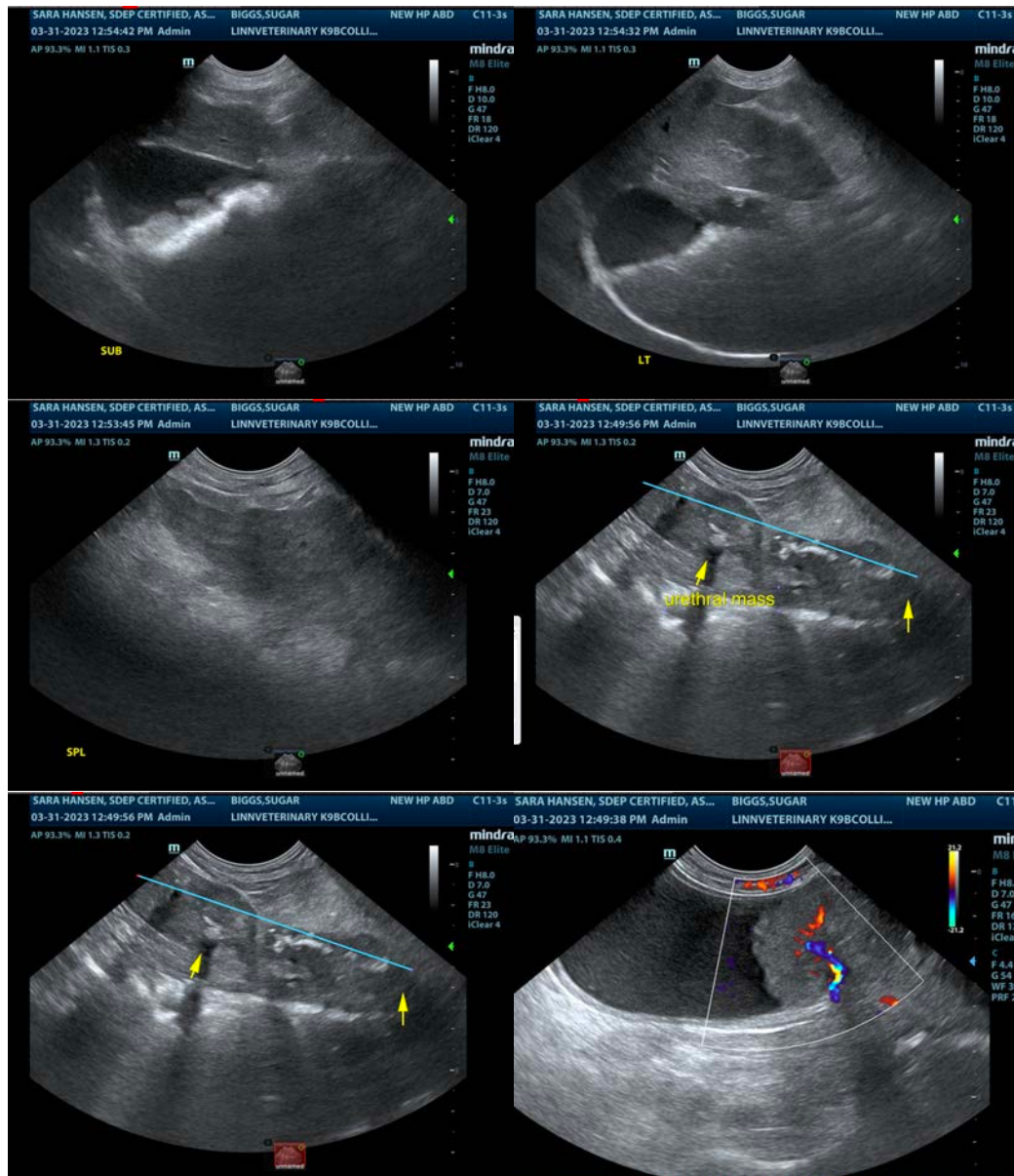
3/31/23

ULTRASONOGRAPHIC FINDINGS

- Extensive urethral and cystourethral junction bladder tumor.
- Irregular nodular spleen
- Heterogeneous liver with swollen irregular contour and gallbladder calculi

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

There are two separate issues in this patient. Bladder carcinoma with splenitis or round cell neoplasia. Cholangitis with biliary calculi versus round cell neoplasia. Recommend FNA spleen and liver to assess for round cell neoplasia versus splenitis and cholangitis. Prognosis long-term is poor.





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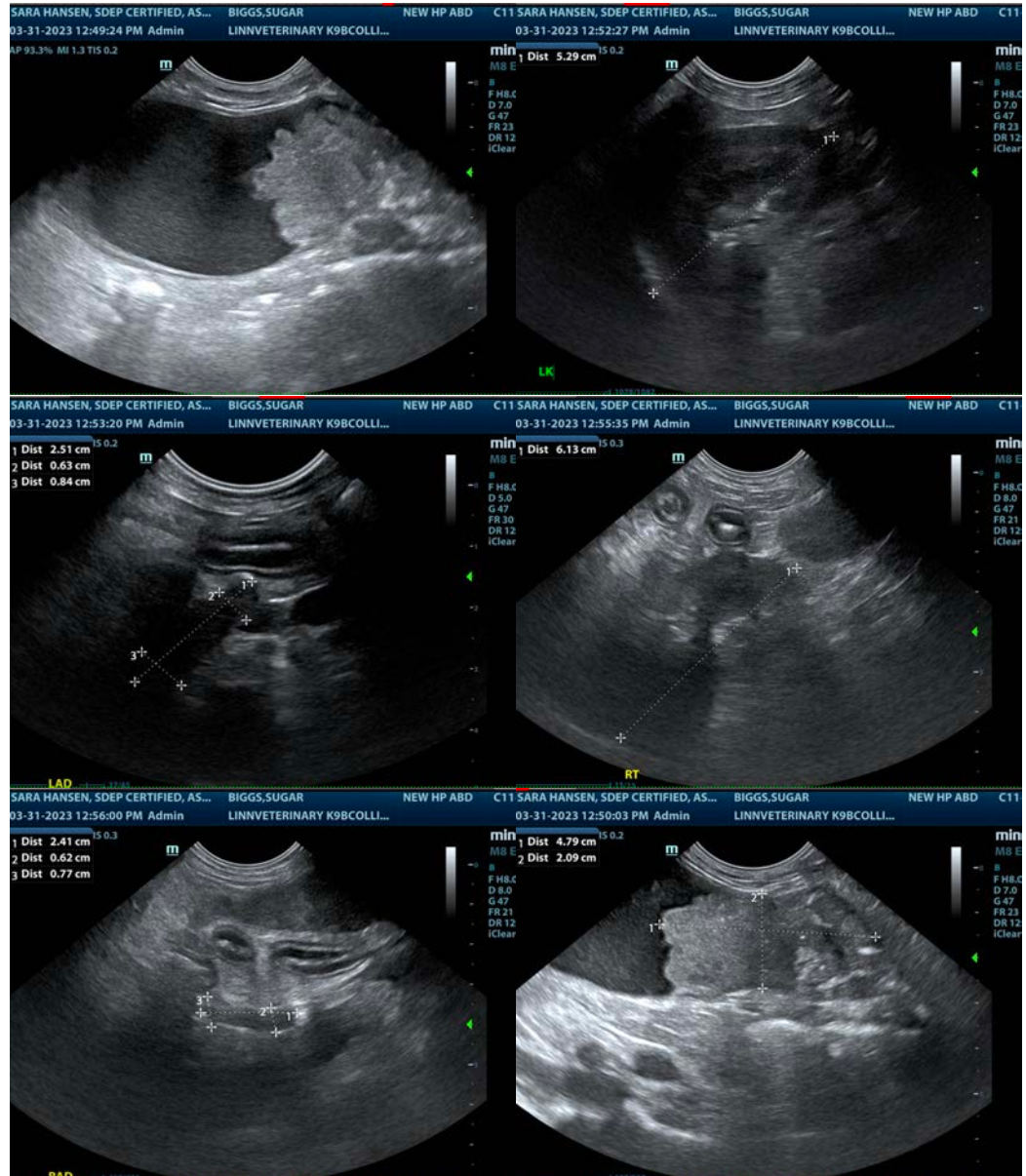
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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