



PATIENT

Josie Jade Godoy

SPECIES

Canine

BREED

Rhodesian

SEX

FS

AGE

7yr

WEIGHT

112lb

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Mayra Sanchez

HOSPITAL NAME

Sunset Animal Hospital

REFERRING VET

Dr. Polit

INVOICE

13122ag

DATE

03/06/2023

PRESENTING CLINICAL SIGNS

Patient presented for coughing

Abnormal PE/Chem/CBC/UA Results: PE: Multiple new SQ masses; slightly increased lung sounds; no crackles or wheezes CBC: mild leukopenia Chem: NAF Thoracic Rads: submitted to Sonopath Abdominal Rads: mass effect cranial abdomen

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 were noted. Ureteral papillae were normal.

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. Areas of pinpoint mineralization are present. The left kidney measured 7.28 cm in length. The right kidney measured 7.48 cm in length.

Adrenal Glands

The bilateral adrenal glands were not visualized.

Spleen

The spleen was enlarged and micronodular with hypoechoic nodular changes. The spleen was folded upon itself.

Liver

The liver images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. 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.

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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ULTRASONOGRAPHIC FINDINGS

- Enlarged micronodular spleen-if mast cell disease is suspected, a 25g FNA is warranted

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No other evidence of pathology was present.

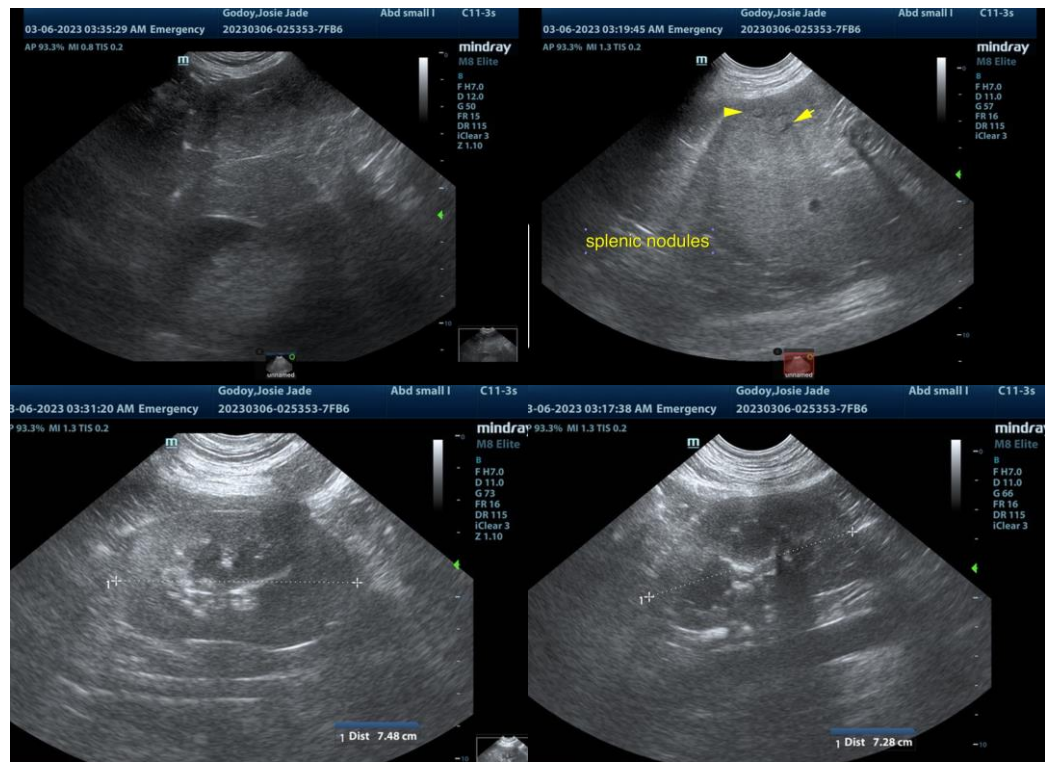
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If adrenal disease is suspected, further imaging of the adrenals under sedation is indicated.

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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.

REFERRING VET

Dr. Polit

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
Eric.Lindquist@SonoPath.com

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