



PATIENT

Golden Smith

SPECIES

Canine

BREED

Borzoi

SEX

Intact Male

AGE

9 Years 1 Month

WEIGHT

110 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Chloe Lowe, CVT

HOSPITAL NAME

Black River Veterinary
Hospital

REFERRING VET

Dr. Tack

INVOICE

74124

DATE

4/1/26

PRESENTING CLINICAL SIGNS

Pre-surgical, concerned for liver mass. Patient has very large mass right tail base 8"x 12". History of prostatitis.

Abnormal PE/Chem/CBC/UA Results: Mild increased ALT, T. Bili

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 **prostate** was uniformly enlarged (5.5 cm) with lobar swelling appeared to impinge upon the urethra and mildly deviate the descending colon. The prostatic tissue was hyperechoic containing focal areas of decreased echogenicity. These changes are suggestive of either chronic inflammatory episodes, benign cystic pathology or both. Underlying neoplasia cannot be completely ruled-out but is lower on the differential list. This presentation is most consistent with benign prostatic hyperplasia with possible active prostatitis.

The iliac trifurcation was unremarkable.

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. Left kidney measured 7.17 cm. Right kidney measured 8.56 cm.

Adrenal Glands

The **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. Left measured 1.77 cm x 0.49 cm at the cranial pole and 0.60 cm at the caudal pole. Right measured 0.96 cm at the cranial pole and 0.65 cm at the caudal pole.

Spleen

The **spleen** was folded upon itself cranially. It presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Slight nodular changes noted, non-disruptive. Vascular and biliary



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tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. The hepatic lymph nodes were unremarkable. No evidence of post-hepatic obstruction.

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

Large amount of abdominal fat noted in this patient.

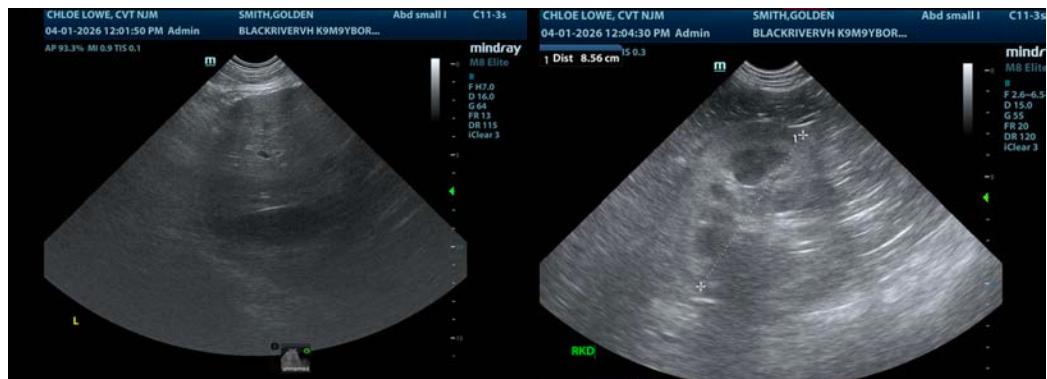
The testicles were imaged and found to be uniform, no evident pathology.

ULTRASONOGRAPHIC FINDINGS

- Folded spleen, positional variant.
- Slight nodular hepatic changes.
- BPH prostate.
- Age related renal changes.
- Large amount of abdominal fat.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Structurally the liver is largely unremarkable. No evidence of gross neoplasia. If the bilirubin elevation is not artifactual, Leptospirosis titers should be considered. The large amount of abdominal fat along with the splenic fold may be creating the appearance of a mass on radiographs. If any prostatic signs are present, neutering should be considered. If neutering is not an option, the following protocol could be considered: Off-label Finasteride (Propecia) (0.1-0.5 mg/kg Sid) treatment +/- FNA or prostatic wash cytology and culture.





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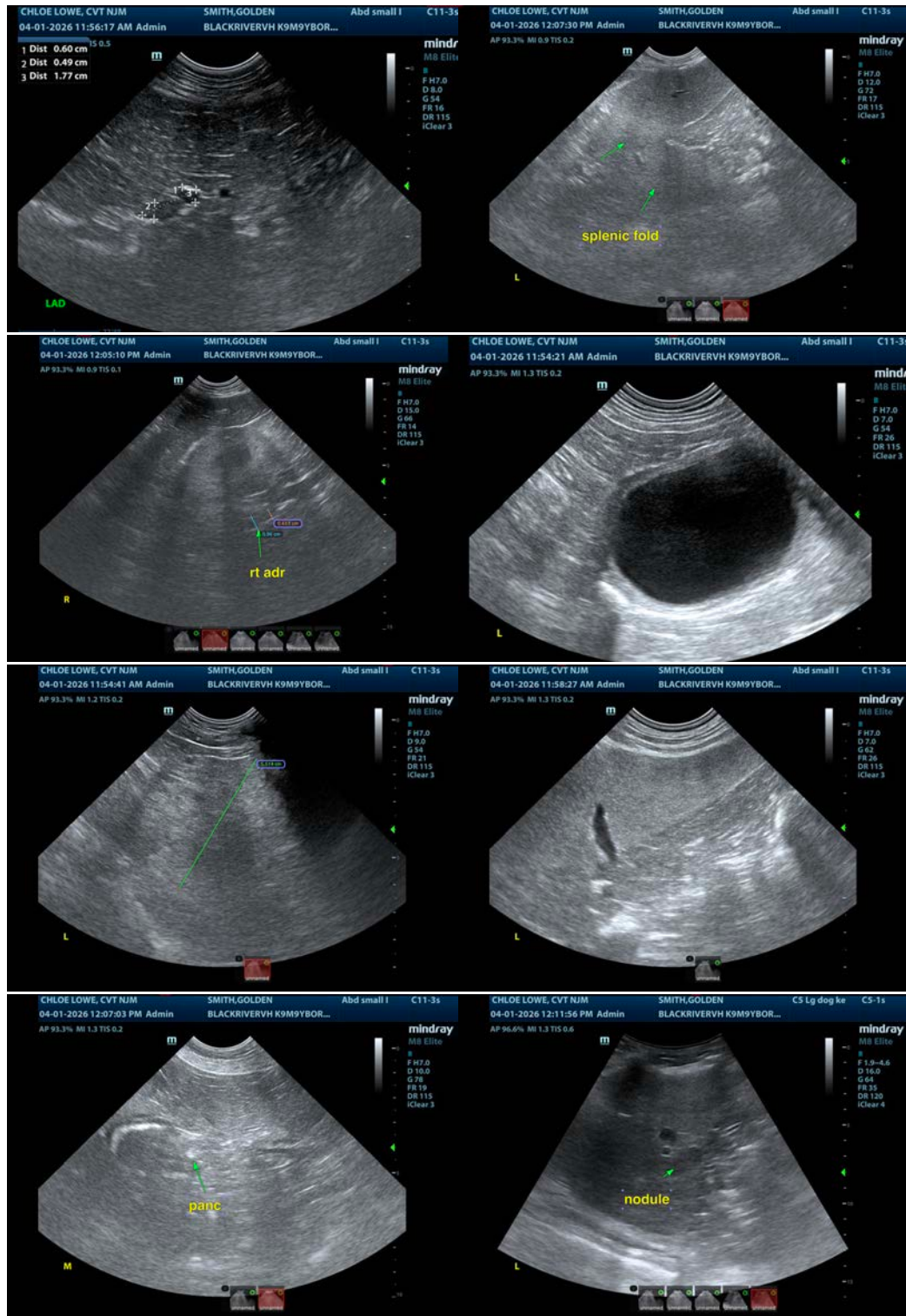
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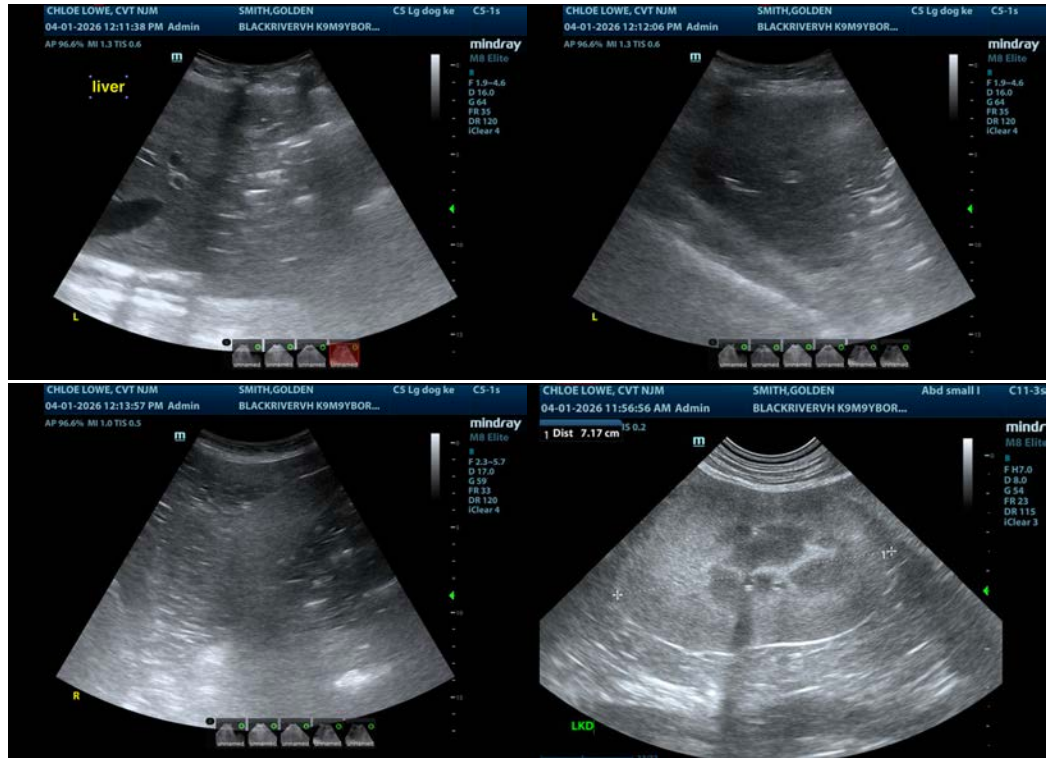
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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