



PATIENT

Oliver Campion

SPECIES

Canine

BREED

Golden Retriever

SEX

Neutered Male

AGE

10 Years

WEIGHT

89 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Danielle Shemanski,
DVM, MA

HOSPITAL NAME

Western New York
Veterinary Services

REFERRING VET

Mike DeLucia, DVM

INVOICE

74401

DATE

4/10/26

PRESENTING CLINICAL SIGNS

ABD mass, concern for splenic origin. P has hx of 2 prior CCL repairs. Recent PE identified large ABD mass, confirmed on rads., that appeared near the splenic tail (non-splenic origin w/ secondary splenic displacement can't be ruled out). Mass is approx baseball- to softball-sized. Thoracic rads showed possible cranioventral thoracic mass, though a R cranial shoulder SQ mass may correspond.

History: O first noted a possible abdominal mass in Aug during HL stretching (not palpated at that time and was intermittently detectable only in dorsal recumbency). The mass palpated during the annual exam last Friday. Patient remains BAR, good appetite and water intake. Pre-visit / Sedation medications administered: Trazodone & Gaba at 9:30 AM prior to arrival Butorphanol 0.7 mg IM administered in-clinic for sedation prior to ABD/US

Abnormal PE/Chem/CBC/UA Results: July 14, 2025 - Basophils 0.18 (Ref 0-0.10 K/uL) HIGH - MPV 13.6 (Ref 8.7-13.2 fL) HIGH - Plateletcrit 0.51 (Ref 0.14-0.46%) HIGH - Alt 175 (10-125 U/L) HIGH - Ast 52 (0-50 U/L) HIGH - Cholesterol 383 (110-320 mg/dL) HIGH

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 pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

The residual prostate measured 5.0 mm.

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. Right kidney measured 8.27 cm. Left kidney measured 7.88 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. Right measured 3.0 cm x 0.60 cm at the cranial pole and 0.65 cm at the caudal pole. Left measured 2.48 cm x 0.65 cm at the cranial pole and 0.57 cm at the caudal pole.

Spleen

The **spleen** revealed a parenchymal mass measuring 7.0 cm, deriving from the mid cranial body of the spleen.

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. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal



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contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

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.

Other

Rapid view of the heart revealed no evidence of pathology in the right auricle or pericardium. Normal volumes and contractility subjectively based on image set provided.

A right cranial thoracic mass was noted in this patient, measuring 5.0 cm. It appeared to be deriving from a cranial mediastinal lymph node.

ULTRASONOGRAPHIC FINDINGS

- Splenic mass.
- Age related hepatic changes.
- Cranial mediastinal mass – suspect lymph node origin.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of both masses indicated for further definition. Suspect multicentric sarcoma.





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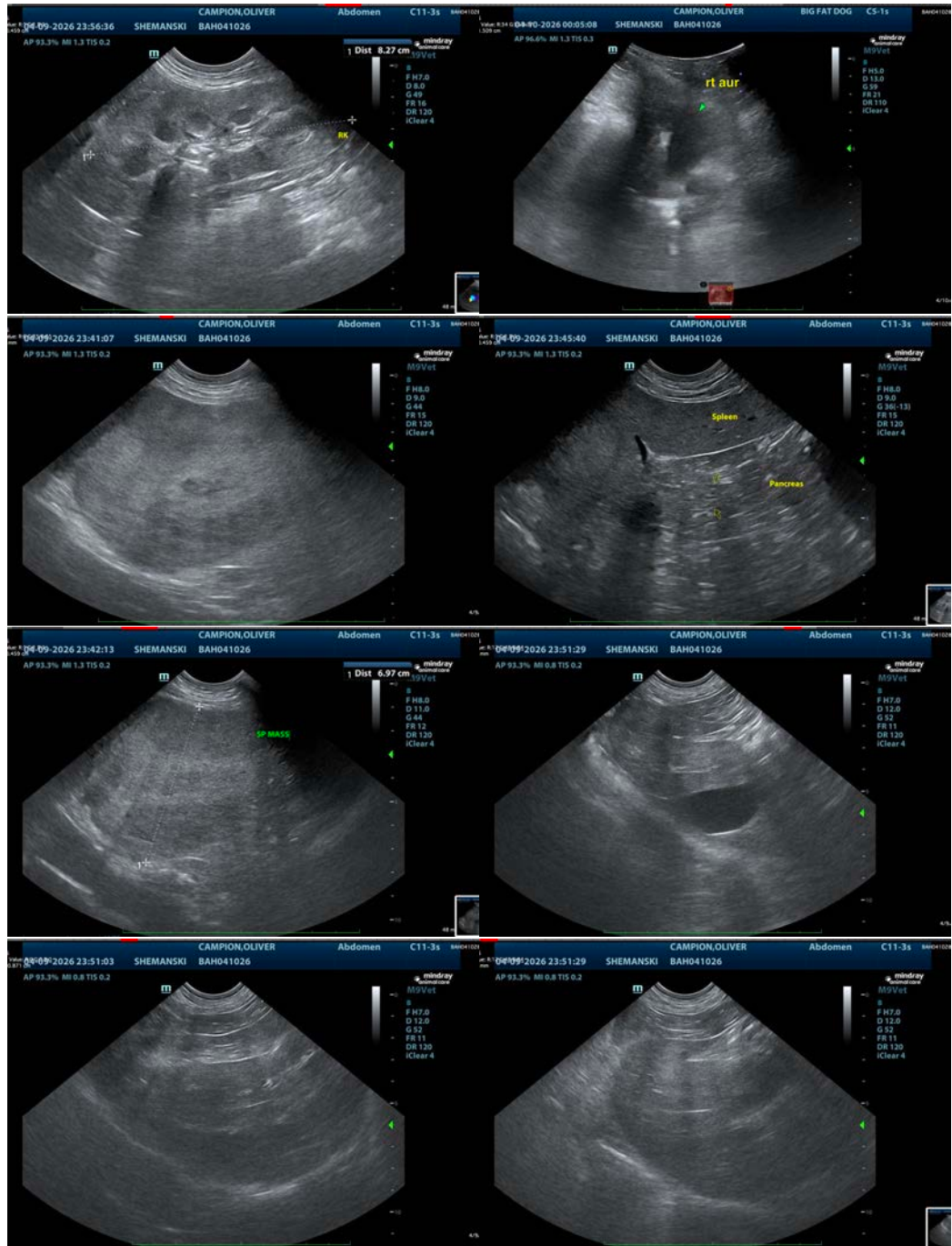
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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