



PATIENT

Duncan-Reese Georgia

SPECIES

Canine

BREED

Terrier X

SEX

Spayed Female

AGE

10 Years

WEIGHT

34.2 Pounds

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Harold Mike Beard

HOSPITAL NAME

West Prince AH

REFERRING VET

Dr. Greg Hartman

INVOICE

36786

DATE

4/11/22

PRESENTING CLINICAL SIGNS

Vomiting last 5 days, reduced appetite
Abnormal PE/Chem/CBC/UA Results: Neutrophilia, Monocytosis, Eosinopenia. ALT/SAP high. Calcium low. BUN low (9). WBC elevated. Survey abdominal xrays RDVM reports mid abdominal mass and swollen liver.

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. The capsules were acceptably uniform without significant irregularities. Slight pyelectasia noted in the left kidney, possibly owing to fluid therapy if the patient was on fluids at the time of the sonogram. The kidneys measured 6.0 cm each.

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 left adrenal gland measured 5.0 mm. The right adrenal gland measured 0.80 cm at the cranial pole and 0.40 cm at the caudal pole.

Spleen

The **spleen** was swollen with coalescing micronodular changes.

Liver

The **liver** was swollen and irregular. Expansive, isoechoic masses were noted. Enhanced mesentery noted. The gallbladder was deviated ventrocaudally owing to regional mass effect. Hepatic lymph nodes were enlarged up to 2.0 cm.

Gastrointestinal

The stomach itself was unremarkable. Variable intestinal thickening noted with an overt intestinal mass, undifferentiated. The mass measured 5.0 cm with regional hyperechoic, ill-defined fat, consistent with peritonitis.

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

The cranial abdomen revealed multifocal, mixed hypoechoic lymph node enlargement with regional inflammation.



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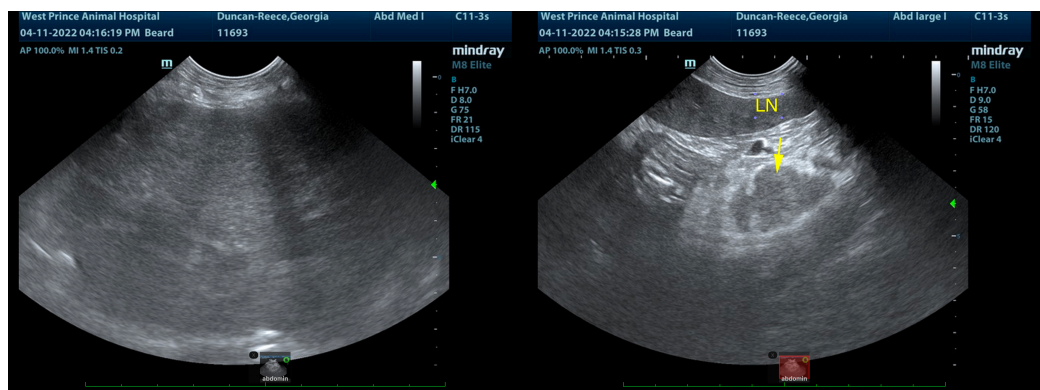
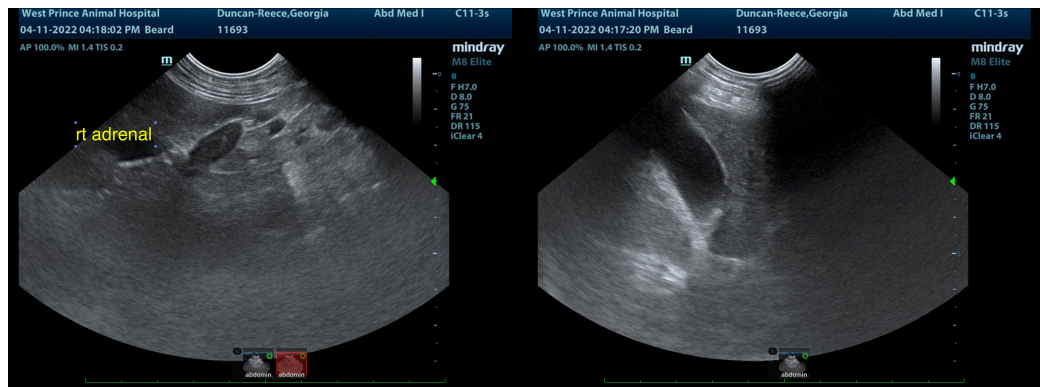
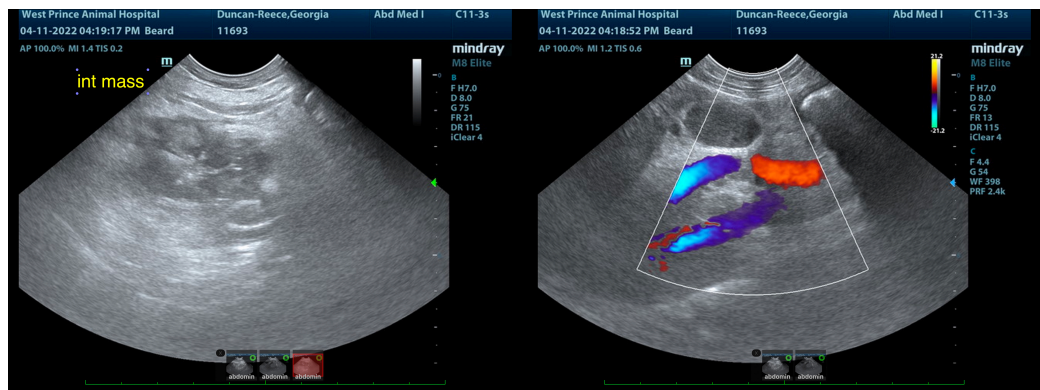
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ULTRASONOGRAPHIC FINDINGS

- Multifocal undifferentiated round cell neoplasia pattern involving intestine, lymph nodes, liver +/- spleen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Sampling and immediate chemotherapeutic intervention recommended.





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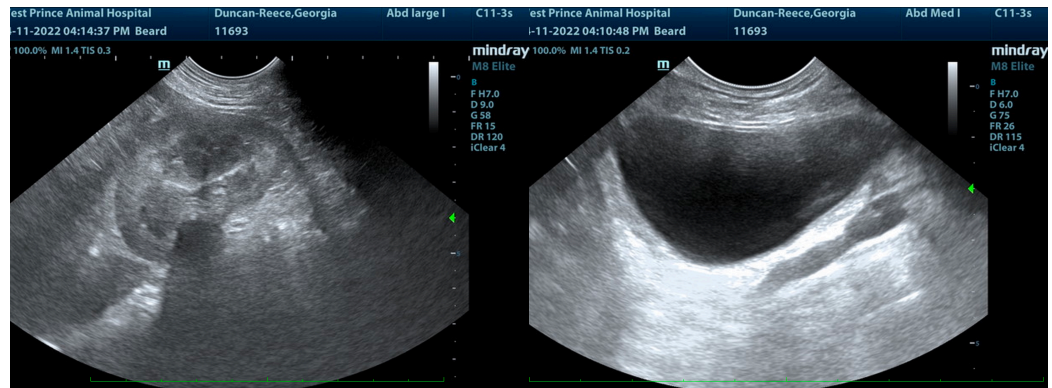
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com

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