



## PATIENT

Leo McAreavey

## SPECIES

Canine

## BREED

Mini Golden Doodle

## SEX

Neutered Male

## AGE

10 Years

## WEIGHT

38.5 Pounds

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Olivia Mellgren

## HOSPITAL NAME

VROAM, Inc.

## REFERRING VET

Dr. Olivia Mellgren

## INVOICE

36607

## DATE

4/14/26

## PRESENTING CLINICAL SIGNS

History: Hx of mast cell tumor on cell, Hx of bladder stones and cystotomy, Under anesthesia today for mass removal on limb, Ultrasounding due to rising ALP.

Abnormal PE/Chem/CBC/UA Results: ALT elevated since Oct 2025, highest was 193, this month ALT 180 ALP elevated since Feb 2025 (no recent lab work prior), this month ALP now 3830 U/L CBC/chem/T4/4dx performed this month. Chol 807, lipase 344

## 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 2.0 cm beyond the cystourethral junction. The iliac trifurcation was unremarkable.

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 left kidney measured 5.3 cm. The right kidney measured 5.3 cm.

### *Adrenal Glands*

The **left adrenal gland** was 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 0.75 cm.

The **right adrenal gland** revealed mild uniform enlargement. The right adrenal gland measured 1.7 cm at the cranial pole and 1.3 cm at the caudal pole.

### *Spleen*

The **spleen** 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. Cranial folding of the spleen was noted, not pathological. This is a positional variant.

### *Liver*

The **liver** revealed mild uniform enlarged, slight coarse architecture and minor increased portal markings, structurally unremarkable. Microcystic hepatic lymph nodes were noted, largest measuring 2.5 cm x 1.8 cm. The gallbladder and common bile duct were unremarkable.

### *Gastrointestinal*



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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*

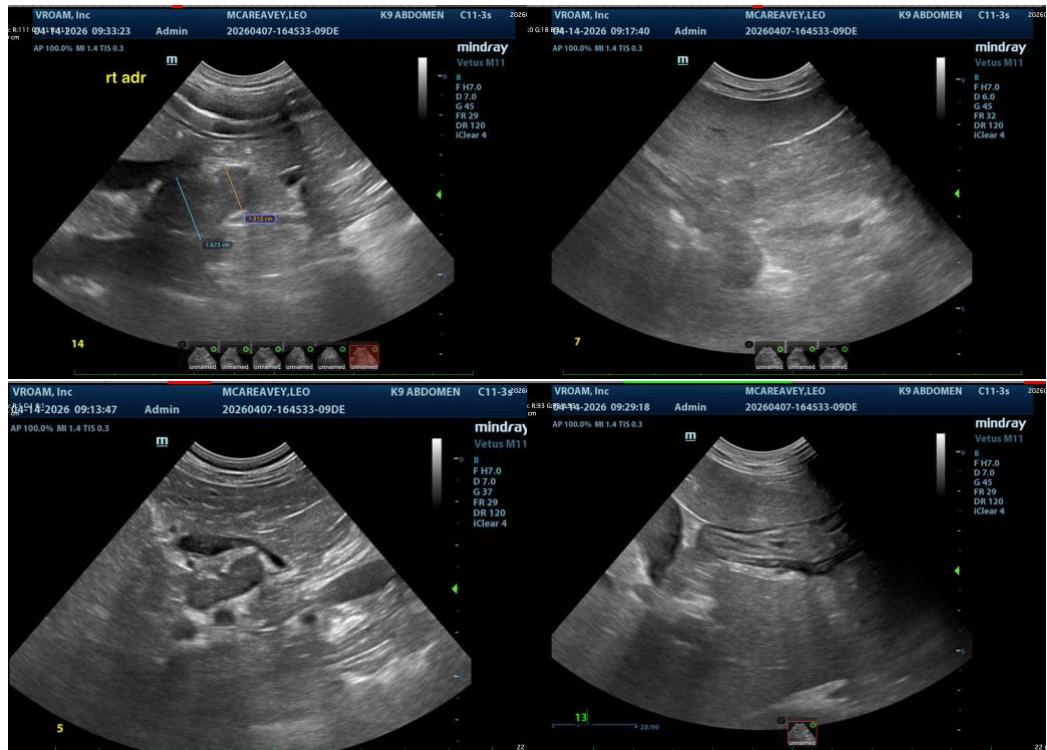
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

### ULTRASONOGRAPHIC FINDINGS

- Subjectively benign hepatopathy with microcystic hepatic lymph nodes, likely secondary to low grade inflammation.
- Minor right adrenal gland enlargement

### INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the lymph nodes could be considered for further definition. No evidence of structural changes consistent with mast cell disease. Management should be based on FNA results.





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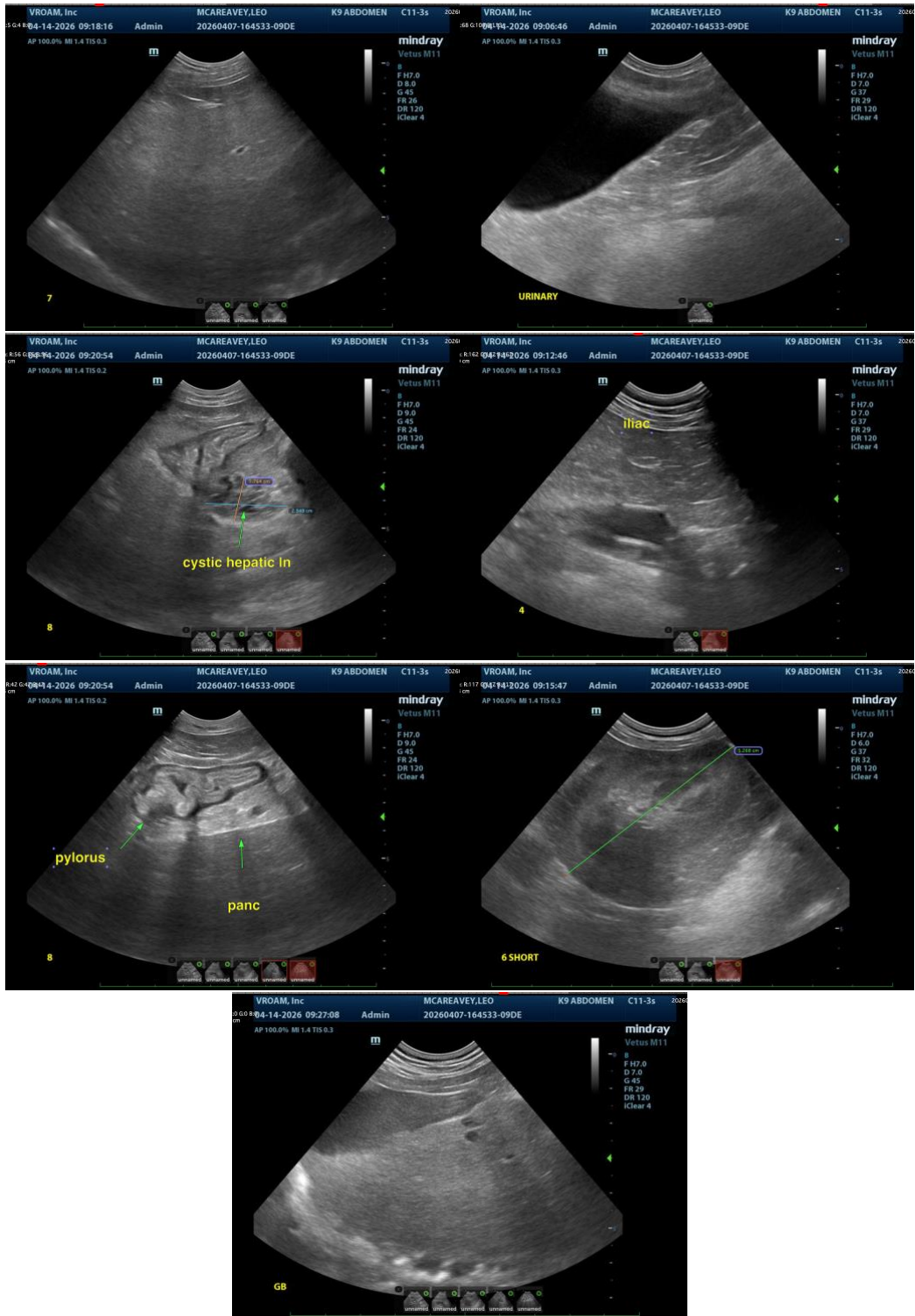
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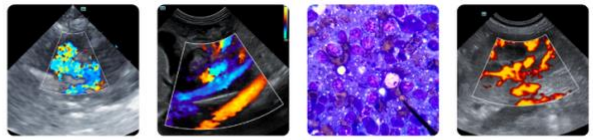
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not



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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,  
CEO, Owner, Founder -- SonoPath.com  
[info@SonoPath.com](mailto:info@SonoPath.com)