



PATIENT

Penny Divers

SPECIES

Canine

BREED

Retriever Mix

SEX

Spayed female

AGE

11 years

WEIGHT

88 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Whitesell

HOSPITAL NAME

Dickson AC

REFERRING VET

Dr. Whitesell

INVOICE

74938

DATE

4/28/26

PRESENTING CLINICAL SIGNS

History: Last Wednesday P was lying on the floor and didn't wanna get up and go outside or go to bed with O. Thursday didn't eat anything, Friday ate a little bit. Saturday bought new food. P is eating eggs and eating the new food off and own. Very lethargic. Pooped in the house this AM which she never does. Pooped in the driveway yesterday. The stool looked normal. Drinking a lot of water
MCV 60.3fL, MCH 20.2pg, WBC 17.70K/mcL, Neutrophils 14.31 K/mcL, Monocytes 1.46 K/mcL, PDW 25.3fL ALT 171 U/L, ALP 1,678 U/L, Abdominal mass seen on x-ray

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction and appeared normal. 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 was noted. Ureteral papillae were normal.

The **kidneys** were swollen, slightly irregular, mild, heterogenous cortical changes. This is strongly suggestive for metastatic disease. The left kidney measured 8.68 cm.

Adrenal Glands

The **adrenal glands** were not visualized.

Spleen

The **spleen** revealed a hypoechoic and expansive parenchymal mass measuring 3.7 cm and separate 7.3 cm cavitated mass with regional inflammation. Regional omental involvement appeared to be present as the mass appears to have ruptured into the regional omentum.

Liver

The **liver** revealed multi-focal, heterogenous nodular changes and irregular contour. There were areas of cavitation noted within the hepatic nodules. The gallbladder and common bile duct 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.



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Pancreas

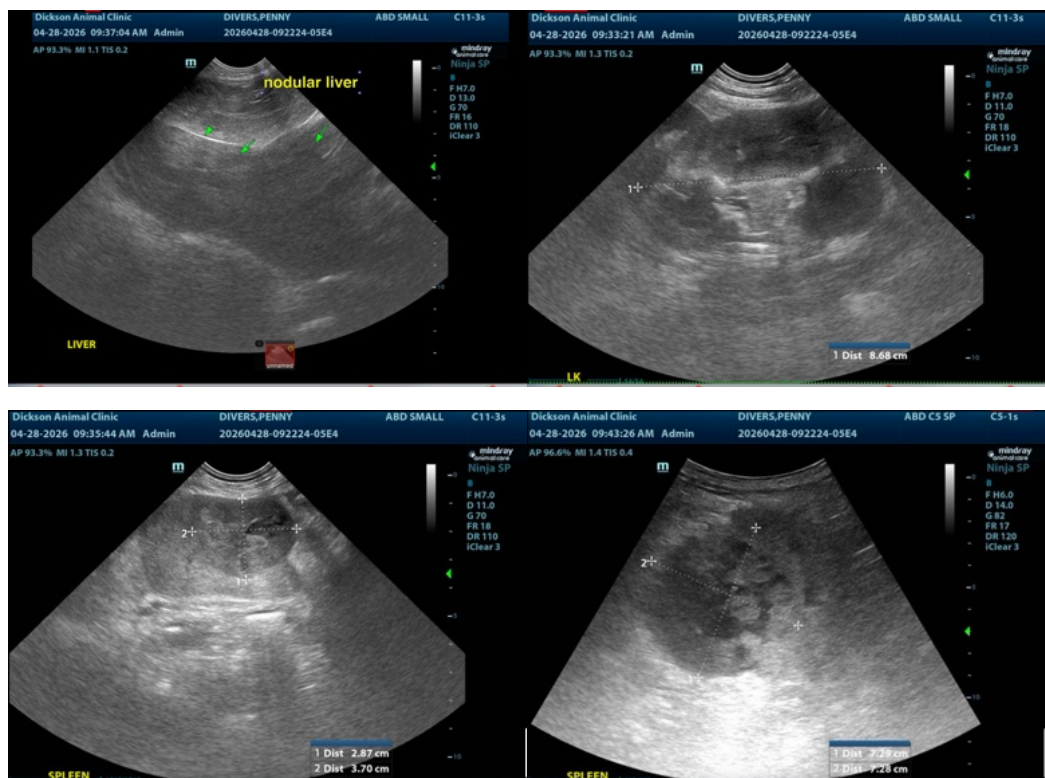
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

Multiple splenic masses with likely renal and hepatic involvement.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the parenchymal portions of the splenic masses, renal cortex and liver are warranted for further definition. Immediate chemotherapeutic intervention is warranted. Round cell neoplasia versus hemangiosarcoma are both potentials in this case.





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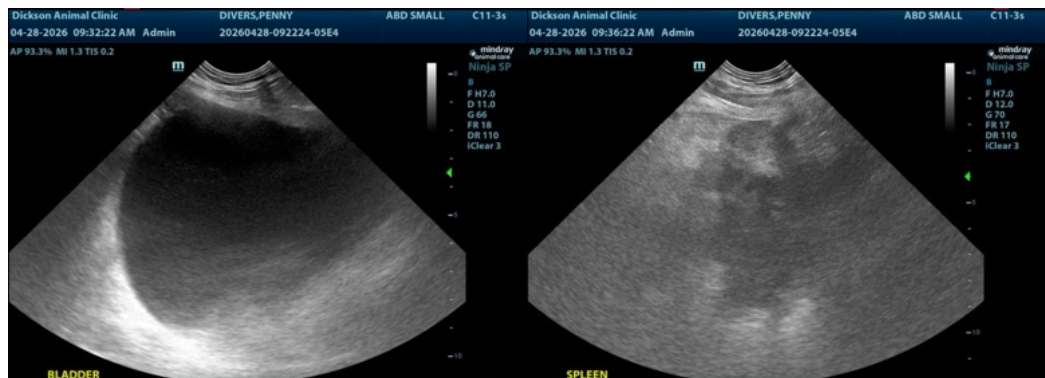
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, CEO of SonoPath.com

info@SonoPath.com