



PATIENT

Rain Kaffar

SPECIES

Canine

BREED

Cocker Spaniel

SEX

Spayed Female

AGE

11 Years

WEIGHT

34 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jessie Evoniuk

HOSPITAL NAME

State Avenue VC

REFERRING VET

Dr. Jessie Evoniuk

INVOICE

36470

DATE

4/3/26

PRESENTING CLINICAL SIGNS

- Presented on referral for adominal US
- Not eating for 1 week- did eat this morning
- Last known BM was 1 week ago
- V+ for 1 week- improved with Cerenia
- Medications - Amoxicillin and Cerenia
- Abnormal PE/Chem/CBC/UA Results: Dull, no overt abdominal pain. RBC 5.50 Hematocrit 38.0 Hemoglobin 12.2 MCHC 32.1 Reticulocyte Hemoglobin 22.5 Neutrophils 10.415 Monocytes 0.884 Eosinophils 0.066 Platelets 1,020 Anion Gap 28 Total Protein 8.1 Globulin 4.3 ALP b 18,950 ALT 179 Potassium 6.1 Na: K Ratio 24 Creatine Kinase 734 Lipase 285

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, and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 5.4 cm. The left kidney measured 5.4 cm.

Adrenal Glands

The **left adrenal gland** was enlarged. The left adrenal gland measured 1.16 cm.

The **right adrenal gland** revealed no evident pathology.

Spleen

The **spleen** revealed a focal hypoechoic mass, measuring 1.5 cm, with uniform parenchyma and slight areas of mineralization otherwise.

Liver

The **liver** was swollen and irregular in contour. It was riddled with multiple mixed hypoechoic disruptive nodules, strongly consistent with metastatic disease. An overt mixed hypoechoic parenchymal mass was noted, measuring approximately 8.0+ cm with regional inflammation deriving from the right caudal liver. The gallbladder and common bile duct were unremarkable. Some extension of the larger liver mass into the regional omentum was also noted.

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 associated abnormal lymphatic activity was noted. The GI was deviated caudally.

Pancreas

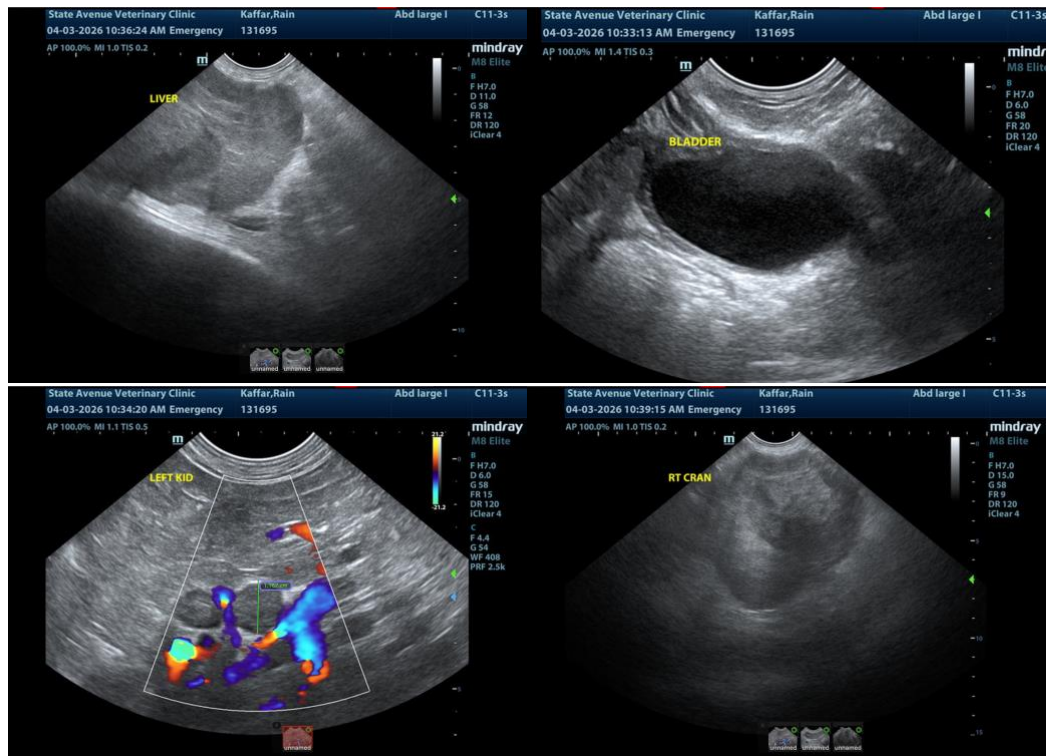
The **pancreas** was obscured by portions of overlying and adjacent neoplasia.

ULTRASONOGRAPHIC FINDINGS

- Splenic nodule
- Multifocal metastatic hepatic pattern with an overt hepatic mass and target lesions
- GI was deviated caudally
- Bilateral adrenal hypertrophy

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Multicentric round cell neoplasia or hemangiosarcoma suspected. FNA of the general hepatic parenchyma, liver mass, and splenic lesions all indicated, however, prognosis is poor.





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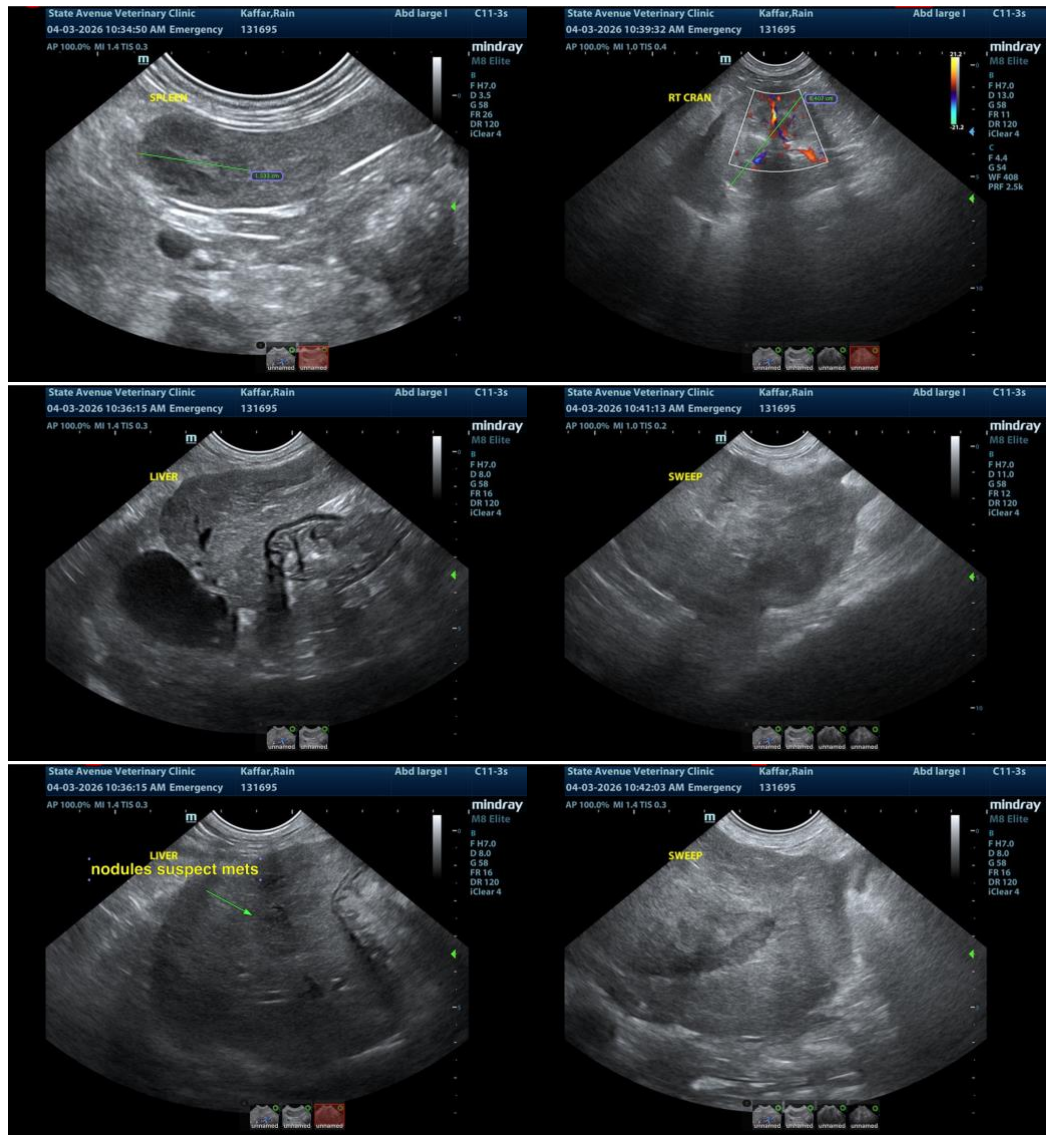
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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