

**DATE PRESENTING CLINICAL SIGNS**

5/1/23 History: Painful. Elevated liver enzymes and anemia.

**PATIENT**

Jack Anderson

Current Medications: None.  
 Lab Results: See attached.  
 Date of Previous IntraPet Ultrasound: No previous.  
 Sedation: Not required to complete full diagnostic ultrasound.  
 Stat Report: Not requested.  
 Imaging Performed By: Rachel Brillhart, RDMS.

**SPECIES**

Canine

**BREED**

Labrador Mix

**SEX**

Neutered Male

**AGE**

8/13/10

**WEIGHT**

80 Pounds

**INTERPRETED BY**Eric Lindquist, DMV  
DABVP, Cert. IVUSS**HOSPITAL NAME**

Madonna Vet

**REFERRING VET**

Dr. Cangro

**INVOICE**

22273

**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 largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some mild age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex. The left kidney measured 6.0 cm. The right kidney measured 6.04 cm. Nonobstructive pinpoint mineralizations were noted. Slight pyelectasia (0.36 cm) was noted in the right kidney.

**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 right adrenal gland measured 2.66 cm x 0.88 cm and 0.84 cm at the cranial pole. The left adrenal gland measured 3.19 cm x 0.8 cm at the caudal pole and 0.88 cm at the cranial pole.

**Spleen**

The **spleen** revealed an expansive, mixed hypoechoic, mildly complex mass (6.0 cm) in the mid body with a reticular infiltrative pattern noted throughout the spleen.

**Liver**

The **liver** was riddled with multiple macro- and micronodular masses, measuring up to 9.24 cm with cystic component. Heterogenous parenchyma was noted throughout the liver. 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.

**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**

**Free fluid** was noted throughout the abdomen. Reactive and heterogenous mesentery was noted around the spleen and liver.

### **Other**

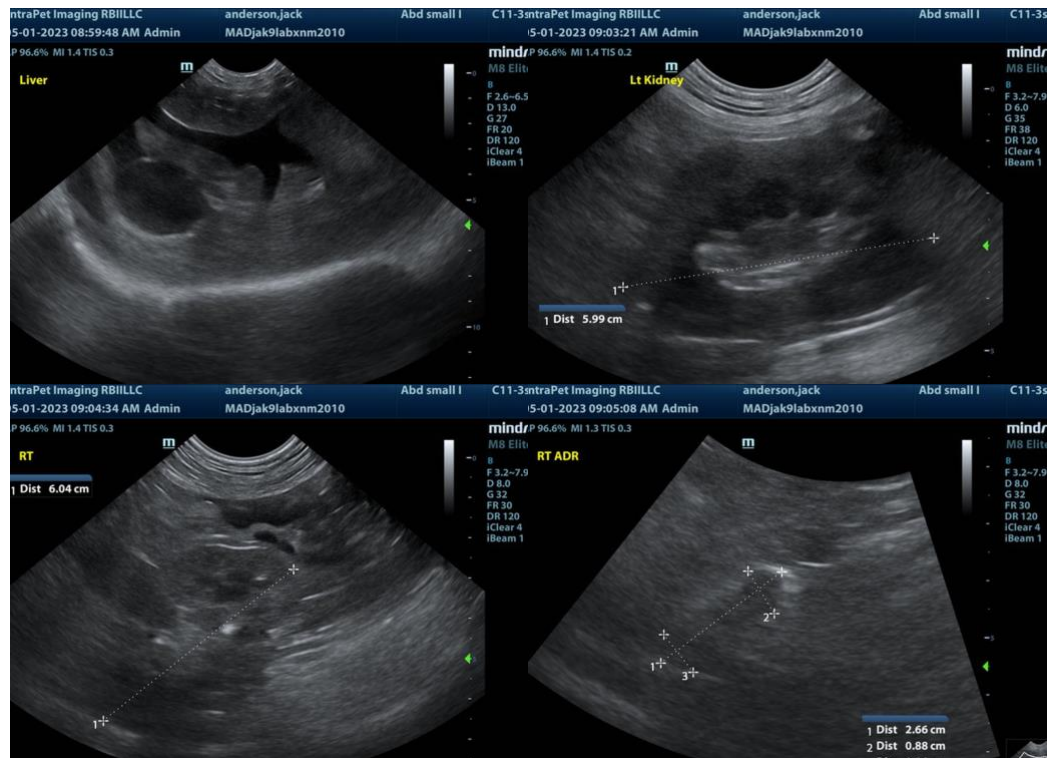
A rapid view of the **heart** revealed no evident pathology.

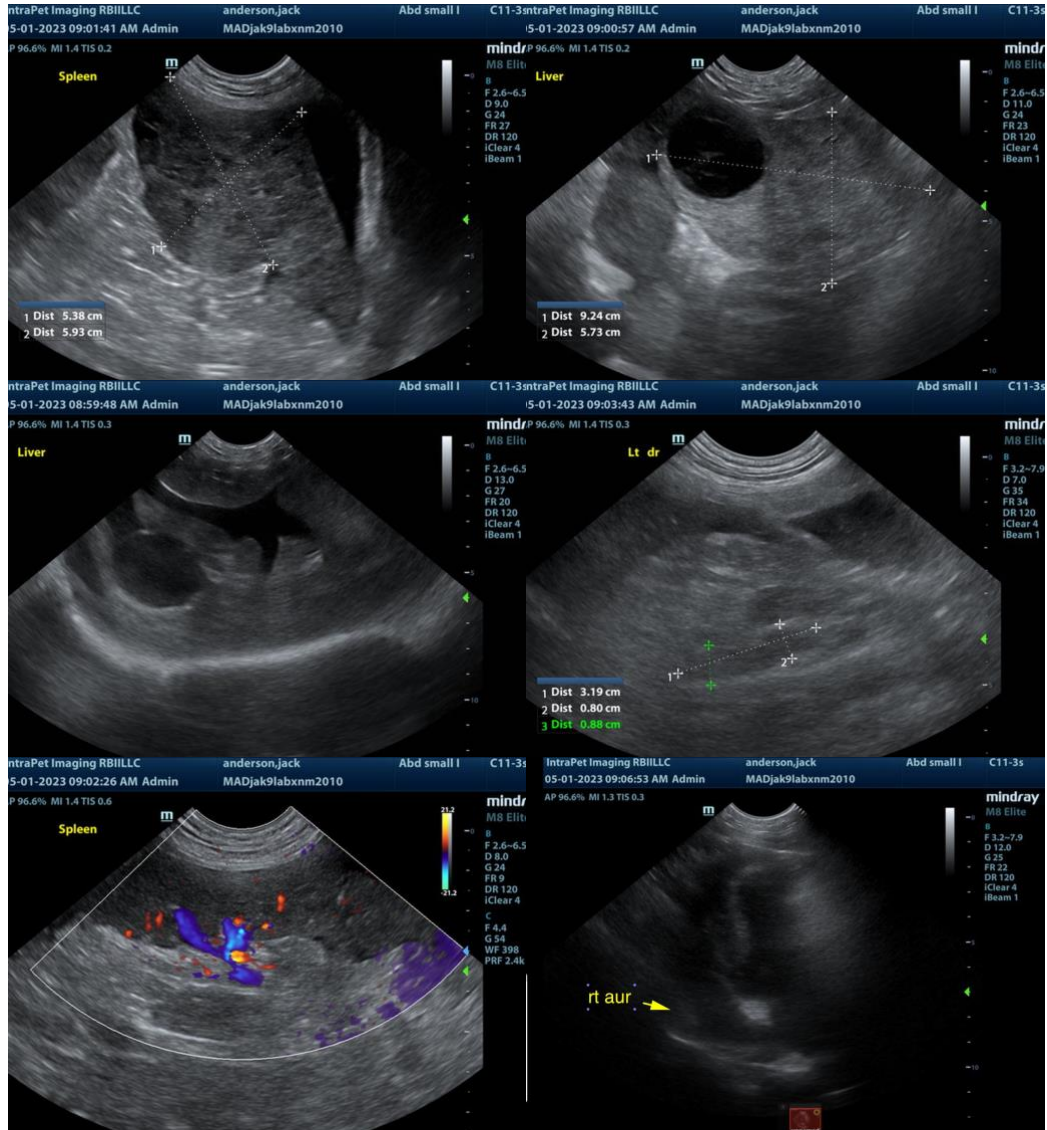
## **ULTRASONOGRAPHIC FINDINGS**

- Multicentric sarcomatous patterns in the spleen and liver with secondary paraneoplastic effusion
- Age-related renal changes with nonobstructive pinpoint mineralizations and pyelectasia

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Prognosis is poor.





The information and recommendations provided are based on the images presented by the referring veterinarian. 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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 info@SonoPath.com