



**PATIENT**

Pearl Baer

**SPECIES**

Canine

**BREED**

Golden Retriever

**SEX**

Spayed Femae

**AGE**

9 Years

**WEIGHT**

54.2 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Jack Reese

**HOSPITAL NAME**

Willow Run VC

**REFERRING VET**

Dr. Molly Arnold

**INVOICE**

37741

**DATE**

5/18/22

**PRESENTING CLINICAL SIGNS**

Several week history of intermittent appetite, otherwise normal activity level. No vomiting, diarrhea or other changes noted at home.

Abnormal PE/Chem/CBC/UA Results: GGT 15 Bilirubin 0.4 Negative fecal, no other abnormal lab work changes.

**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 kidneys measured 6.0 cm each.

**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 3.2 cm x 0.55 cm at the cranial pole and 0.46 cm at the caudal pole.

The **right adrenal gland** was not visualized.

**Spleen**

The **spleen** was riddled with multiple disruptive microcystic and necrotic parenchymal masses, the largest grouping measured 5.5 cm at the caudal pole. Multiple lesions noted throughout the spleen. Another at the cranial pole measured 2.5 cm.

**Liver**

The **liver** was riddled with multiple mixed hypoechoic masses occupying the left and right 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.



**PATIENT**

*Free Abdomen*

Pearl Baer

Reactive mesentery and slight free fluid noted.

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**ULTRASONOGRAPHIC FINDINGS**

- Splenohepatic sarcoma pattern – hemangiosarcoma likely.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

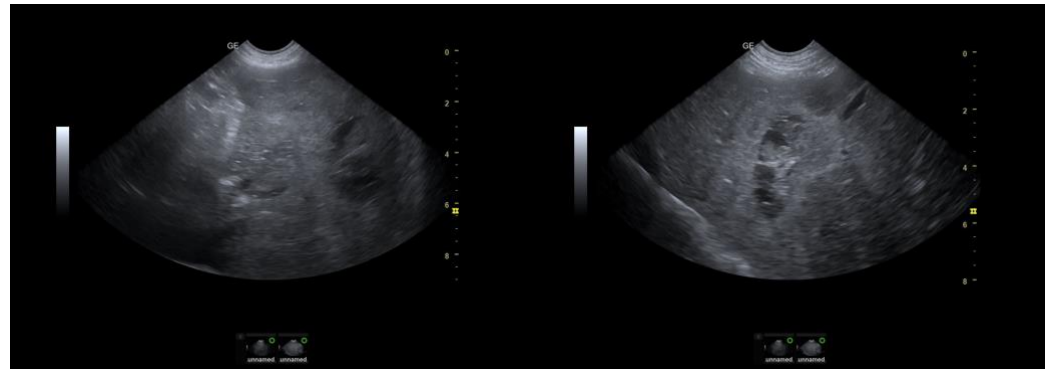
**BREED**

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FNA or core biopsy of the parenchymal portions of the masses could be considered with some risk on core biopsy, minimal risk on FNA. Chest radiographs and echocardiogram warranted to assess for metastatic disease.

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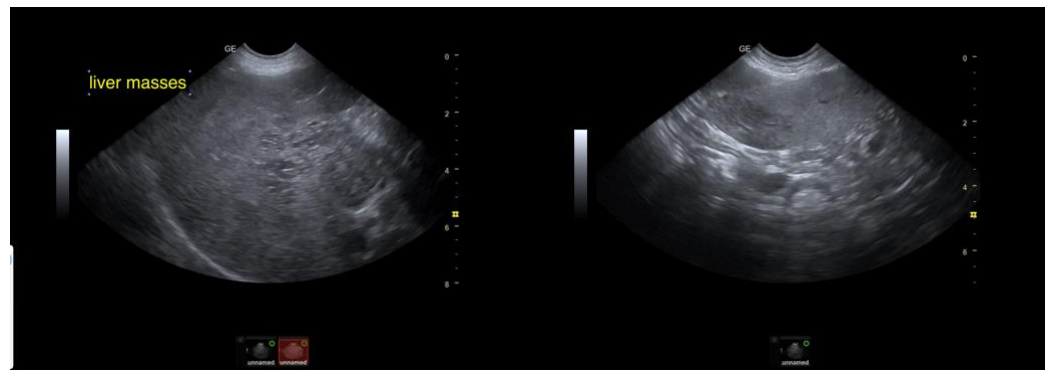
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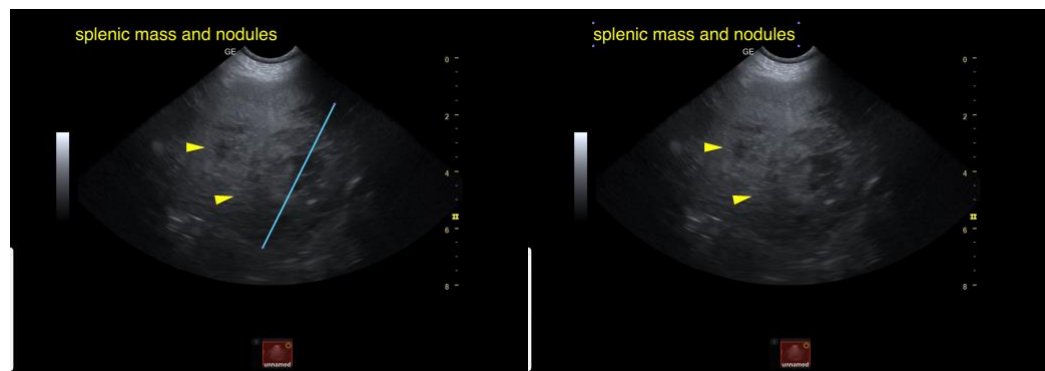


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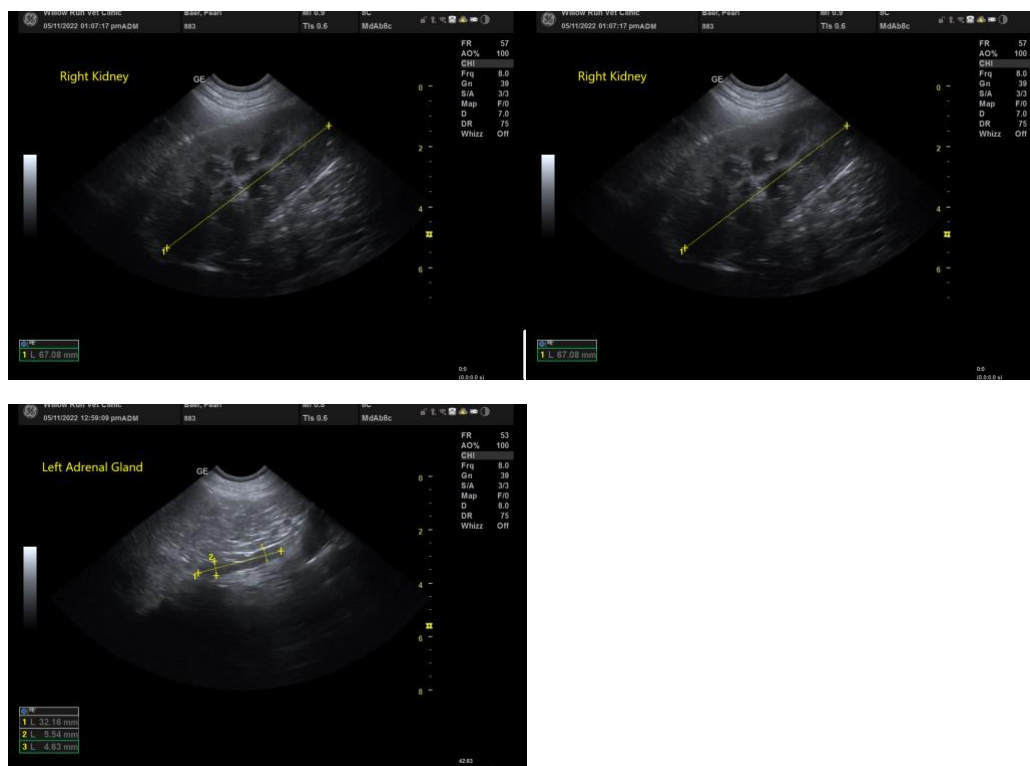
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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