



PATIENT

Seymour Leclercq

SPECIES

Canine

BREED

Scottish Terrier Cross

SEX

Neutered male

AGE

13 years

WEIGHT

11.4 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jessica Bailes

HOSPITAL NAME

All Creatures Great
and Small Corvallis

REFERRING VET

Dr. Bailes

INVOICE

77853

DATE

5/21/26

PRESENTING CLINICAL SIGNS

History: Presented for annual exam - no concerns @ home. Significant weight loss noted; tense cranial abdomen.

Abnormal PE/Chem/CBC/UA Results: Underweight, hepatomegaly, otherwise NSF on PE BW:
CHEM: Increased TP (8.1) w/ increased GLOB (3.9), increased AST (225), increased ALT (567), increased ALP (1609), increased BUN (43), increased triglycerides (313), increased PSL (165), otherwise WNL CBC: poorly regenerative anemia (HCT = 32%, reticulocyte % increased @ 1.2%), basophilia (296), otherwise WNL TT4: WNL @ 1.4

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 was noted. Ureteral papillae were normal.

The **right kidney** revealed a cystic structure at the caudal dorsal cortex measuring 2.5 x 2.5 cm. This is consistent with complex cyst or possible abscess. Underlying neoplasia such as hemangiosarcoma or carcinoma is also possible. The right kidney measured 4.44 cm.

The **left kidney** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some 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 this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 4.2 cm. The right kidney measured 4.44 cm.

The residual prostate measured 0.5 cm.

Adrenal Glands

The right **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 right adrenal gland measured 2.06 x 0.93 cm at the cranial pole and 0.74 cm at the caudal pole. The left adrenal gland was slightly swollen at the caudal pole measuring 0.8 cm and 0.39 cm at the cranial pole and 1.88 cm in length.

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



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congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

Liver

The left **liver** revealed an extensive, 7.8 cm, mixed echogenic, puffy cloud type mass. The mass may be resectable depending upon CT results. The liver mass impinges upon the gallbladder medially. Nodular changes were noted elsewhere in the liver. The right cranial liver appeared unremarkable. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.

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

Slight free fluid adjacent to the liver mass.

ULTRASONOGRAPHIC FINDINGS

Right renal cyst or abscess.

Left liver mass, suspect carcinoma, granulomatous disease, potentially resectable.

Free fluid.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound-guided drainage and culture are indicated of the right renal cyst/abscess. CT evaluation is recommended for surgical planning. The prognosis is guarded.



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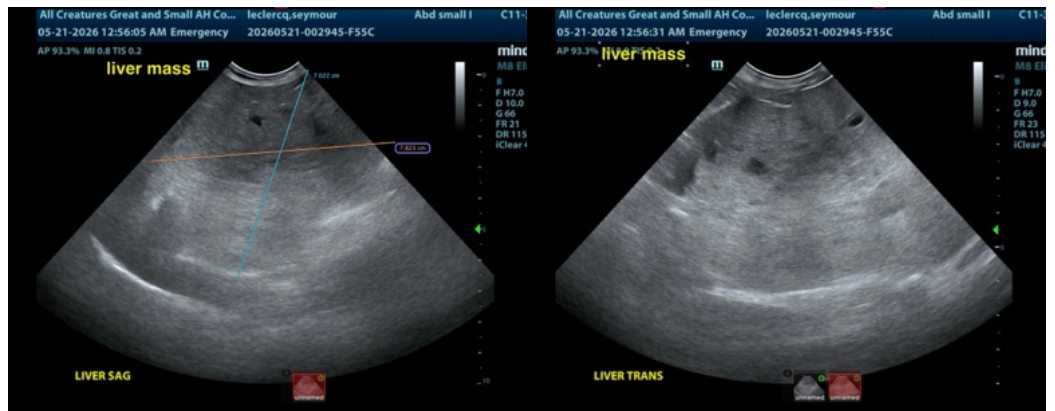
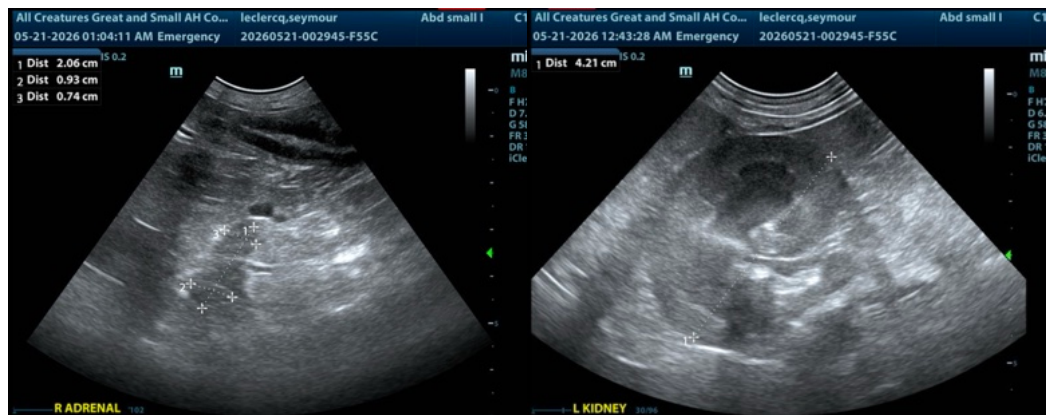
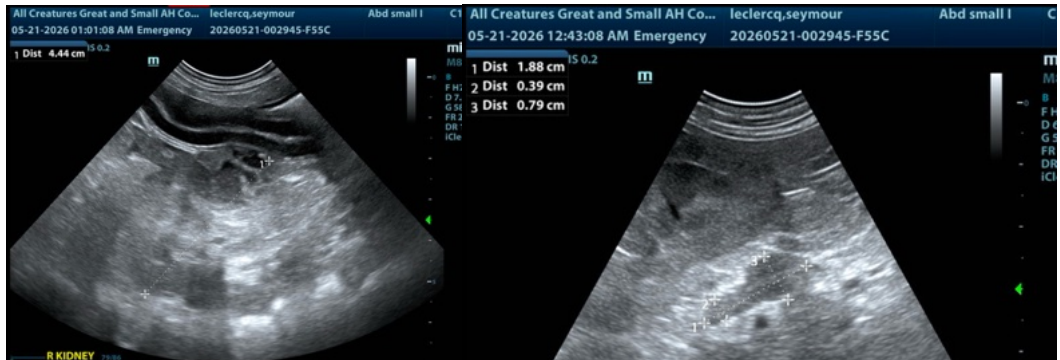
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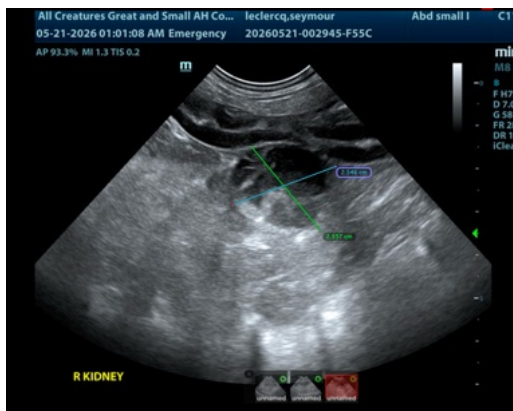
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 (CFM), Cert. IVUSS, CEO of SonoPath.com

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