



PATIENT

Aurora Nailor

SPECIES

Canine

BREED

Labrador Cross

SEX

Spayed Female

AGE

10 years

WEIGHT

30 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Cordon

HOSPITAL NAME

Mason Dixon Animal
Emergency

REFERRING VET

Dr. Cordon

INVOICE

30636

DATE

5/23/22

PRESENTING CLINICAL SIGNS

History: Concern for Splenic Mass: Currently Stable. Stomach seems larger, radiograph shows possible splenic mass. PT is eating and drinking. Diagnostics: Complete Blood Count - WNL PCV/TS - 42%/6.8 Chemistry - WNL

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 **left kidney** 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 left kidney measured 6.5 cm. The right kidney is not visualized.

Adrenal Glands

The left and right adrenal gland are not visualized.

Spleen

The **spleen** revealed a complex, cystic and parenchymal mass that measured 15.0 cm. The splenic mass impinges upon the liver; however, it appears to derive from the cranial pole of the spleen. A separate nodular change was noted on the spleen.

Liver

There is visible normal **liver**. The splenic mass impinges upon the liver; however, I cannot clearly separate the mass from hepatic parenchyma. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. Comet tail pattern was noted. There is a possible early metastatic disease to the lungs.

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

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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.

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ULTRASONOGRAPHIC FINDINGS

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Cranial abdominal mass. Strong suspicion for splenic origin impinging upon the liver.

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Spayed Female

Comet tail lung pattern. Possible early metastatic pattern to the lungs.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

30 kg

CT of the chest and abdomen would be ideal for surgical planning. Separate splenic nodule would support a neoplastic process as opposed to a benign ominous lesion. Otherwise, direct exploratory surgery is warranted if chest radiographs are free of evident pathology.

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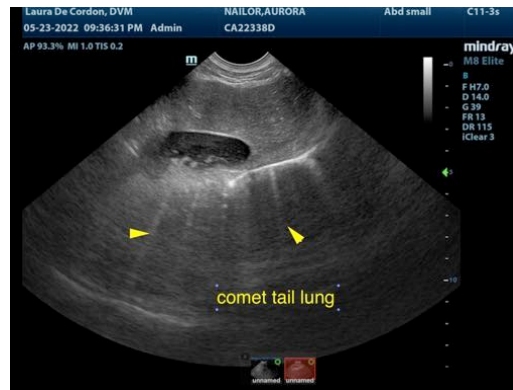
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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