



**PATIENT PRESENTING CLINICAL SIGNS**

Chibs Skinner Abnormal PE/Chem/CBC/UA Results: FNA of Spleen and Mesenteric Lymph nodes are pending  
Bloodwork was unremarkable 4DX - negative

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

**Urinary System**

**BREED**

Mastiff

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction. 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.

**SEX**

Neutered male

The inguinal lymph nodes were enlarged, hypoechoic and mildly irregular.

**AGE**

7 years

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 left kidney measured 6.0 cm. The right kidney measured 6.0 cm.

**WEIGHT**

115 lbs

**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 0.4 cm. The region of the right adrenal gland was imaged with no evidence of pathology.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Mack

**Spleen**

The **spleen** revealed coalescing reticulated pattern with micronodular changes.

**HOSPITAL NAME**

Northside VC

**Liver**

The **liver** revealed coarse architecture with increased portal markings. The gallbladder was echogenic and slightly thickened. Increased portal markings were noted with heterogenous parenchymal changes.

**REFERRING VET**

Dr. Mack

**Gastrointestinal**

**INVOICE**

30751

Examination of the **gastrointestinal tract** revealed a stomach free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Distal small intestinal thickening was also present. The mesenteric lymph nodes were enlarged, hypoechoic and distorted. The largest lymph node measured 4.0 x 2.5 cm.

**DATE**

5/26/22



**PATIENT**

Chibs Skinner

**Pancreas**

**SPECIES**

Canine

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.

**BREED**

Mastiff

**ULTRASONOGRAPHIC FINDINGS**

Infiltrative splenic, hepatic and mesenteric lymph nodes pattern.

Distal small intestinal thickening. Early intestinal neoplasia is likely.

**SEX**

Neutered male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

FNA of the spleen, liver and lymph nodes would all be indicated with immediate chemotherapeutic intervention. This is likely round cell neoplasia with a mild potential for underlying fungal disease. Aspirates are essential in this case.

**WEIGHT**

115 lbs

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Mack

**HOSPITAL NAME**

Northside VC

**REFERRING VET**

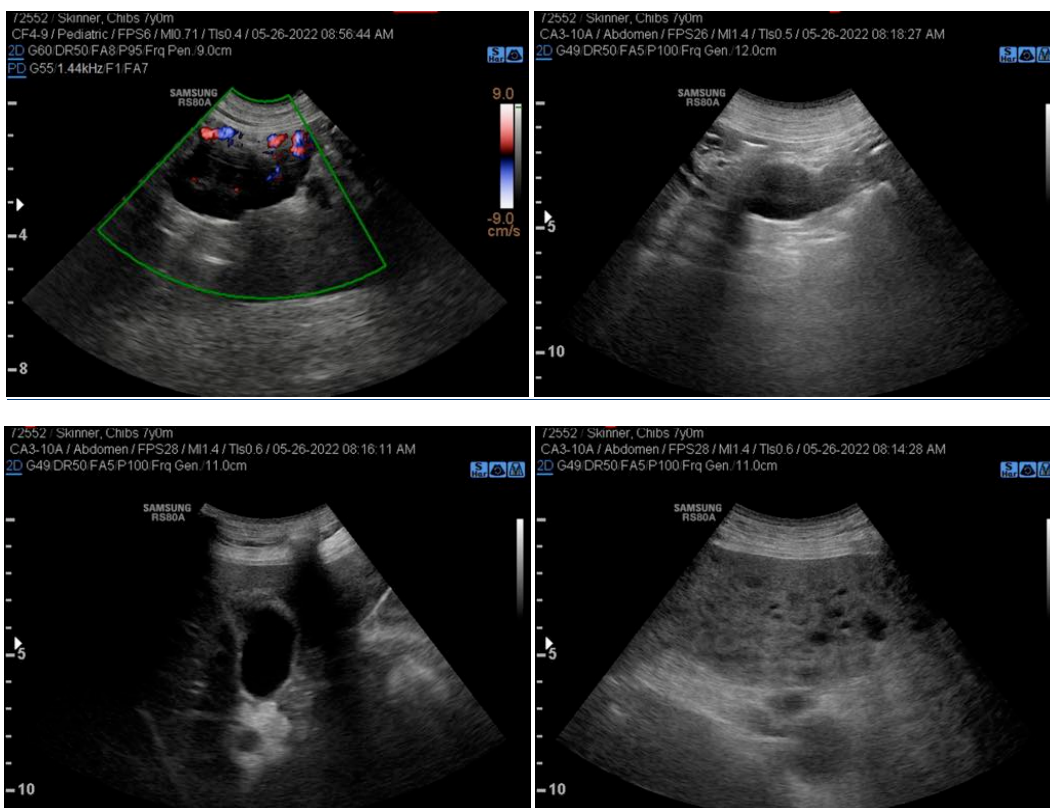
Dr. Mack

**INVOICE**

30751

**DATE**

5/26/22





**PATIENT**

Chibs Skinner

**SPECIES**

Canine

**BREED**

Mastiff

**SEX**

Neutered male

**AGE**

7 years

**WEIGHT**

115 lbs



**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Dr. Mack

**HOSPITAL NAME**

Northside VC

**REFERRING VET**

Dr. Mack

**INVOICE**

30751

**DATE**

5/26/22

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  
info@SonoPath.com