



PATIENT

Maisy Kearns

SPECIES

Canine

BREED

Mix

SEX

Spayed Female

AGE

12 Years 6 Months

WEIGHT

44.3 lbs

INTERPRETED BY

Eric Lindquist, DMV,
DABVP(CFM), Cert.
IVUSS

IMAGING PERFORMED BY

Rebecca Hamilton

HOSPITAL NAME

Wantage Veterinary
Hospital

REFERRING VET

Dr. Bullock

INVOICE

15812

DATE

05/05/26

PRESENTING CLINICAL SIGNS

Seizures vs. syncope - one episode occurred here for annual. Regenerative anemia. Hx of Splenectomy- 2025- benign nodule w/ hematoma

Abnormal PE/Chem/CBC/UA Results: ^ ALkP, Regenerative anemia

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **bladder** in this patient was minor thickened with slight echogenic mural changes. No calculi or masses were noted. Slight micropolypoid changes were noted. This is a frequent finding in older animals and may be linked to a history of chronic urinary tract infection or active urinary tract infection. Urinalysis would be recommended with culture if any evidence of inflammatory sediment is present. The region of the trigone and visible pelvic urethra to a depth of 2.0 cm were normal. Minimal amount of urine was present at the time of the sonogram.

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 and no evidence of pelvic dilation was present. The left kidney measured 5.4 cm in length. The right kidney measured 5.6 cm in length.

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 left adrenal gland measured 2.56 cm x 0.57 cm width at the cranial pole and 0.61 cm width at the caudal pole. The right adrenal gland measured 2.43 cm x 1.0 cm width at the cranial pole and 0.50 cm width at the caudal pole.

Spleen

The region of the **splenic fossa** was unremarkable other than a minor amount of fat and remodeling, typical for a splenectomy.

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some mild age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The left lateral liver revealed a focal hypoechoic nodule measuring 1.3 cm x 2.3 cm most consistent with hyperplasia. Cannot completely rule out the possibility of a metastatic event. This should be monitored.

Gastrointestinal



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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

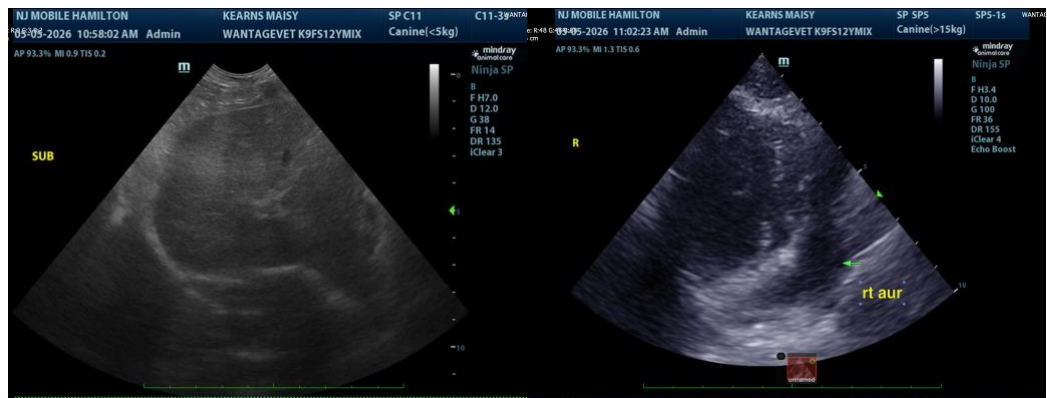
Rapid view of the **heart** revealed no evidence of pathology in the right auricle of pericardium.

ULTRASONOGRAPHIC FINDINGS

- Structurally unremarkable geriatric abdomen.
- Hepatic nodule.
- Minor bladder thickening.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt return of prior splenic pathology. Urinalysis is warranted to assess for any evidence of UTI. Recheck sonogram in 3-4 weeks primarily on the liver. If nodules are progressing, then FNA is indicated.





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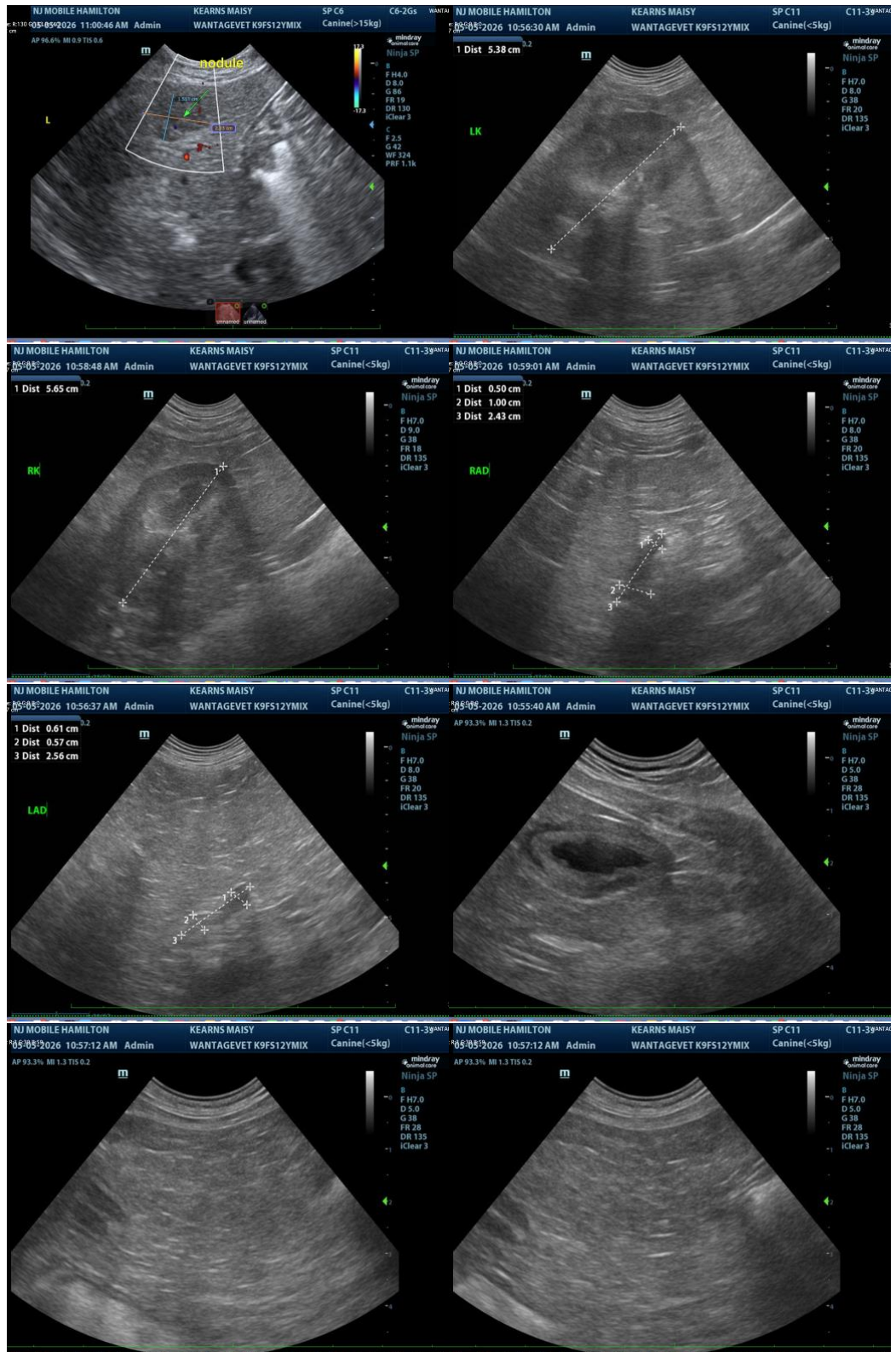
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Owner, Founder -- SonoPath.com

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