



PATIENT

Scarlet Turek

SPECIES

Canine

BREED

Airedale Terrier

SEX

Spayed female

AGE

10 years

WEIGHT

44.2 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

MEW

HOSPITAL NAME

Weddington AH

REFERRING VET

Dr. Weddington AH

INVOICE

75215

DATE

5/5/26

PRESENTING CLINICAL SIGNS

History: 6 mo history of weight loss of unknown origin, intermittent decreased appetite. P current on HW/flea/tick meds. O noticed new firm mass on L hip recently. Labs in Nov showed mild regenerative anemia. Screening rads in Nov showed no significant abnormalities. Labs earlier this week showed HCT of 20% with elliptocytes and schistocytes. Rads show subjectively enlarged spleen. AUS to rule out immune mediated vs splenic mass/neoplasia.

5/2026: Labwork review: CBC: marked anemia (HCT 20%), elliptocytes, schistocytes, 5/100 nrbc - r/o splenic dysfunction, immune mediated Chemistry: mild hyperglobulinemia, mildly elevated ALP (167), mildly elevated SDMA (16.3), mildly elevated amylase, mildly decreased CK T4: 0.6 - euthyroid sick U/A: 1.024 USG, 2+ protein, quiet sediment 11/2025: CBC: mild normocytic, normochromic anemia (33%), mild bands with normal neutrophil count Chemistry: mild hyperglobulinemia (3.8), mildly elevated ALP (278), mildly elevated amylase, mildly elevated PSL (224) T4: 0.6 - r/o euthyroid sick vs hypoT4 U/A: unable to collect HWT: neg

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 **kidneys** 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 5.3 cm. The right kidney measured 6.0 cm.

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 0.4 cm. The right adrenal gland measured 1.0 cm at the cranial pole and 0.68 cm at the caudal pole.

Spleen

The **spleen** revealed a focal, hypoechoic nodule in the mid cranial abdomen measuring 1.2 cm. 25-gauge FNA of the nodule is recommended. The remainder of the spleen was unremarkable.



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Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some 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 hepatic lymph nodes 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.

ULTRASONOGRAPHIC FINDINGS

Focal splenic nodule.
Otherwise, unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the splenic nodule is recommended. Bone marrow aspirate is likely in this patient's best interest and should be paired with the splenic cytology results and CBC path review.

Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.



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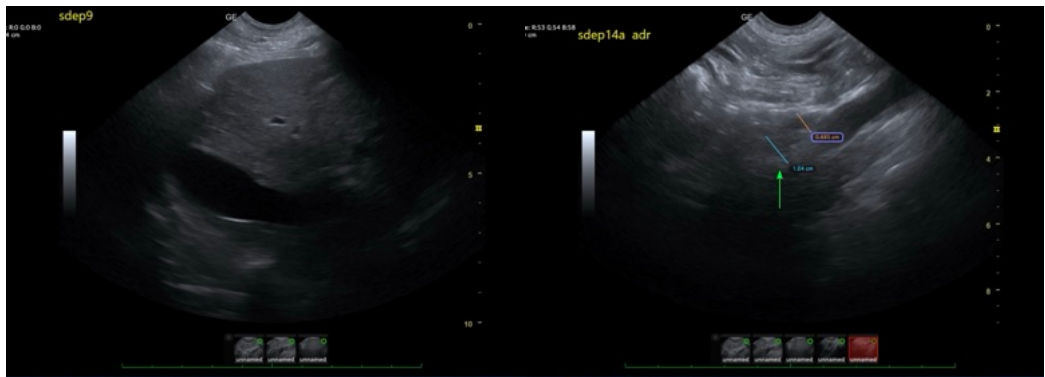
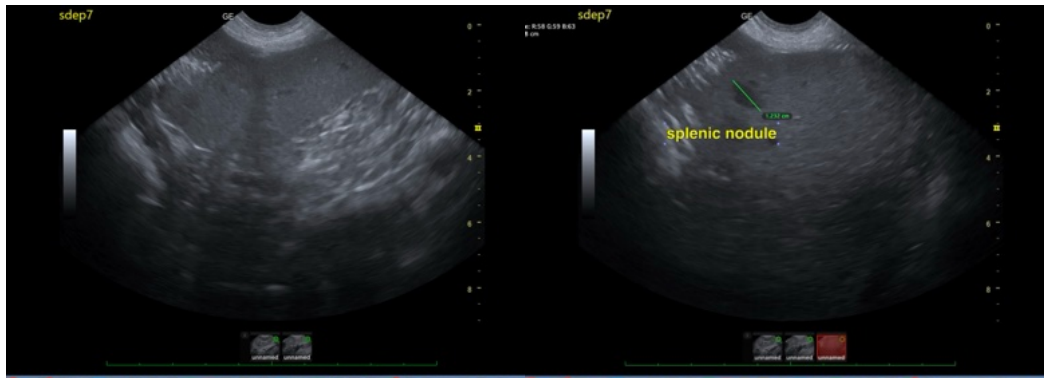
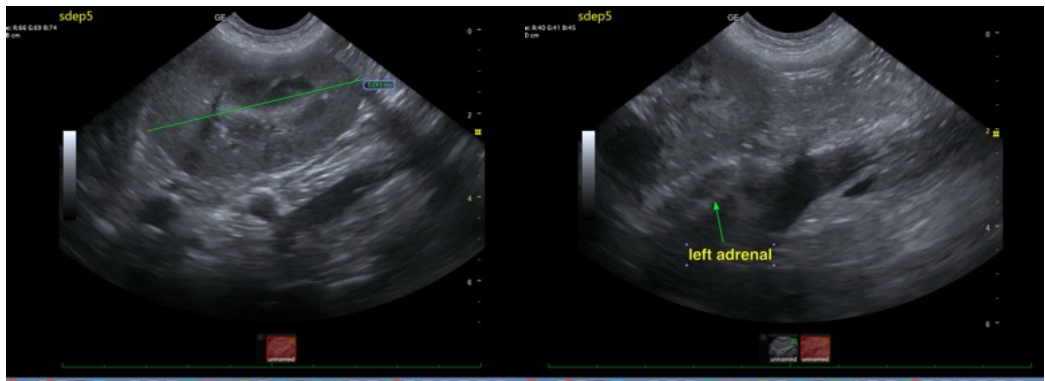
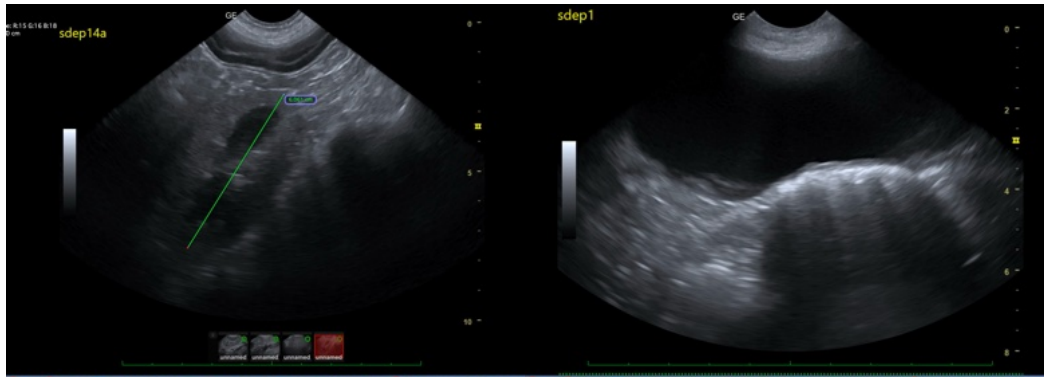
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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