



## PATIENT

Augie Ash

## SPECIES

Canine

## BREED

Labradoodle

## SEX

Neutered Male

## AGE

14.5 Years

## WEIGHT

43 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Rodriguez

## HOSPITAL NAME

Foxfield Veterinary  
Services

## REFERRING VET

Dr. Rodriguez

## INVOICE

15904

## DATE

05/07/26

## PRESENTING CLINICAL SIGNS

Anorexia. Hx of IMPA. Enlarged lymph nodes. FNA pending. Afebrile

RBC: 5.3, HCT: 35, WBC: 27.55, neut: 24, Lymph: 1 eosin: 1.53, ALK: 1813.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The **urinary bladder**, trigone, and pelvic urethra to a depth of 3.0 cm 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 were noted. Ureteral papillae were normal.

The iliac **lymph nodes** were enlarged, rounded and hypoechoic measuring up to 2.5 cm x 1.3 cm.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some moderate 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 7.2 cm in length. The right kidney measured 8.5 cm in length.

### Adrenal Glands

The **adrenal glands** appeared slightly enlarged and swollen. No evidence of focal capsular expansion or invasion into the phrenic veins was noted. No overt suspicion of neoplasia was noted. This is considered likely a hyperplastic change associated with stress or adrenal endocrinopathy (PDH). If isosthenuria is persistently present and the patient morphologically suggests Cushing's disease then ACTH testing would be indicated. The left adrenal gland measured 2.8 cm x 1.15 cm width at the caudal pole and 1.29 cm width at the cranial pole. The right adrenal gland measured 2.84 cm x 1.13 cm width at the caudal pole and 1.6 cm width at the cranial pole.

### Spleen

The **spleen** was not visualized owing to previous splenectomy.

### Liver

The **liver** presented swollen and hypoechoic with macronodular changes. The gallbladder and common bile duct were unremarkable. The hepatic lymph nodes were enlarged and rounded.

### 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



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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.

## SPECIES

Canine

### Free Abdomen

The cranial abdominal **lymph nodes** presented abnormal length to width ratio with distorted, swollen, irregular contour. Parenchymal detail was indiscernible. This is most consistent with lymphoproliferative disease such as lymphoma/round cell neoplasia, metastatic disease, or an aggressive inflammatory process. FNA, cytology and culture are warranted. The lymph nodes measured up to 2.4 cm x 1.9 cm.

## BREED

Labradoodle

## SEX

Rapid view of the **heart** revealed no evident pathology.

Neutered Male

## ULTRASONOGRAPHIC FINDINGS

## AGE

14.5 Years

- Bilateral adrenal hypertrophy.
- Multicentric round cell neoplasia pattern involving the lymph nodes and liver.
- Age-related abdominal changes otherwise.

## WEIGHT

43 lbs

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

25-gauge FNA of the lymph nodes and liver are warranted for a definitive diagnosis and immediate chemotherapeutic intervention.

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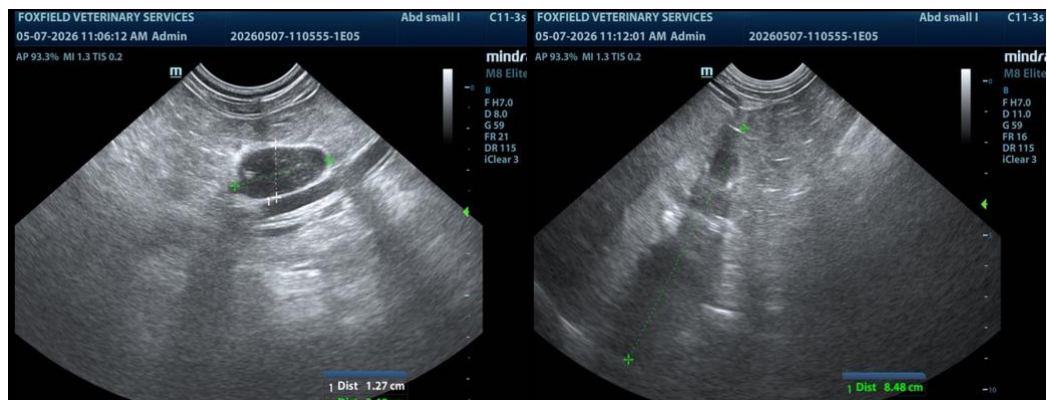
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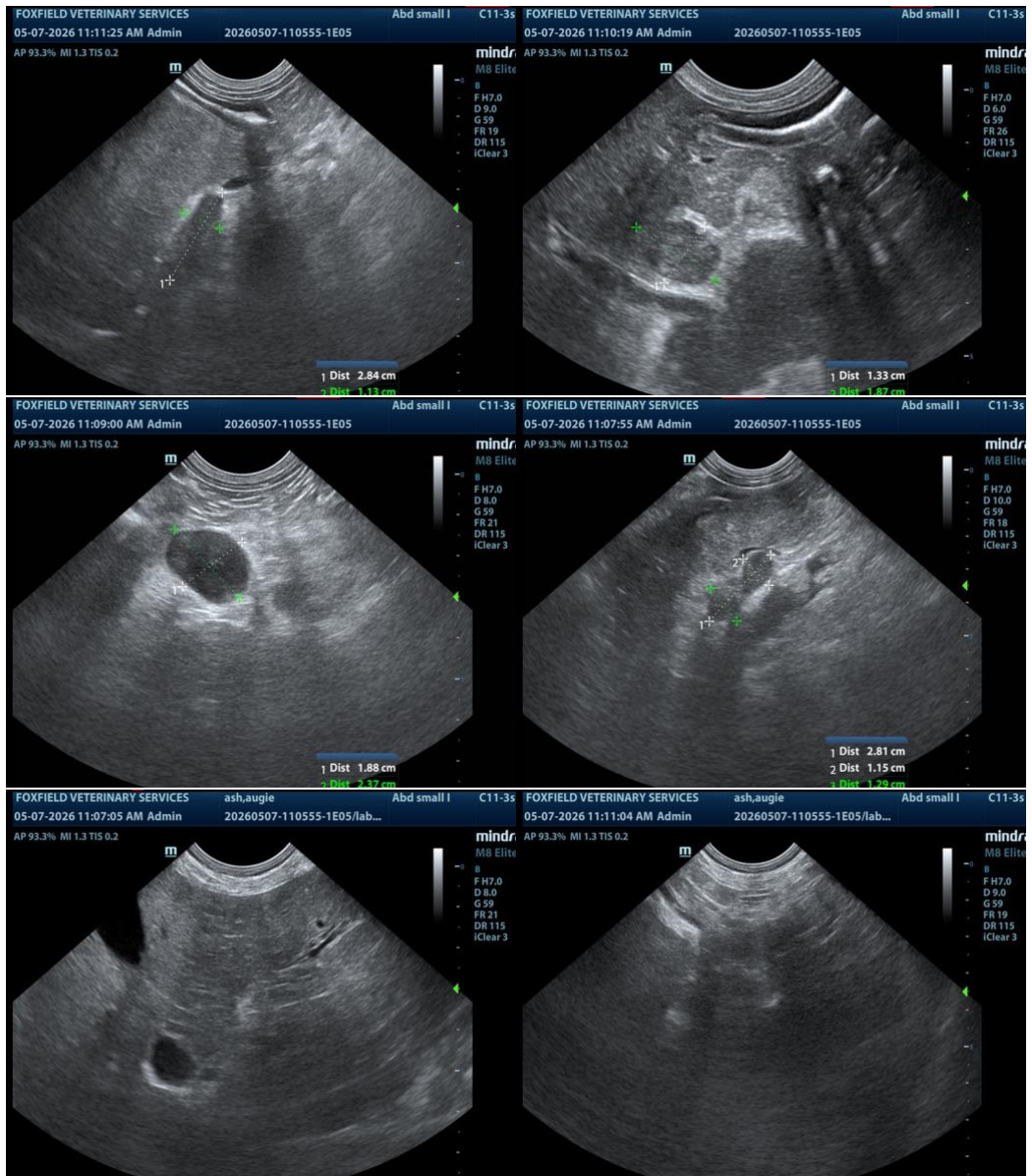
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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,

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