



**PATIENT**

Penny Austin

**PRESENTING CLINICAL SIGNS**

History: Transferred from RDVM on 6/1. Decreased appetite for the last 2 1/2 weeks. Blood work performed at RDVM showed neutrophilia, increased ALT, ALP and GGT.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Golden Retriever

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.

**SEX**

Spayed Female

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 6.72 cm. The right kidney measured 5.51 cm.

**AGE**

9 years

**WEIGHT**

34.4 lbs

**Adrenal Glands**

The left **adrenal gland** was subnormal in size and measured 0.3 cm. The region of the right adrenal gland was unremarkable.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**Spleen**

The **spleen** revealed heterogenous parenchymal changes with scalloping contour. The spleen had a curvilinear pattern with micronodular changes along with generalized enlargement. The spleen was folded upon itself.

**IMAGING PERFORMED BY**

Dr. DeCordon

**Liver**

The **liver** revealed increased portal markings with scalloping, irregular contour. The hepatic parenchyma was hypoechoic and diffuse, hyperechoic increased portal markings. Enhanced mesentery was noted around the liver. The gallbladder and common bile duct were unremarkable.

**HOSPITAL NAME**

Mason Dixon Animal  
Emergency Hospital

**REFERRING VET**

Dr. DeCordon

**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**

Penny Austin

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

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

Strong concern for hepatosplenic lymphoma. This is a transitional state between cholangiohepatitis and lymphoma.

Golden Retriever

Subnormal adrenal size.

**SEX**

Spayed Female

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

9 years

Screening FNA of the spleen and liver is indicated with ideally core liver biopsy to assess for potential cholangiohepatitis versus lymphoma. This may necessitate biopsy for a definitive diagnosis. Concurrent Addison's or adrenal burnout should be considered. Sampling of the spleen and liver is essential in this case. For research purposes please send the cytology or histopathology results for this particular case to [info@sonopath.com](mailto:info@sonopath.com).

**WEIGHT**

34.4 lbs

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DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

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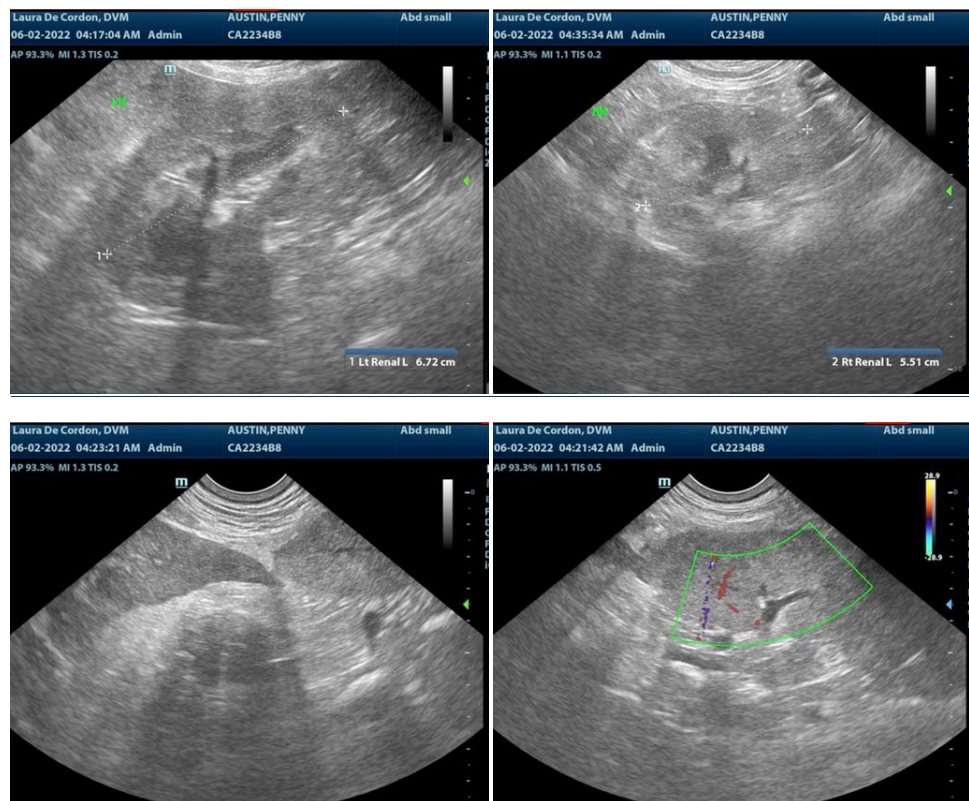
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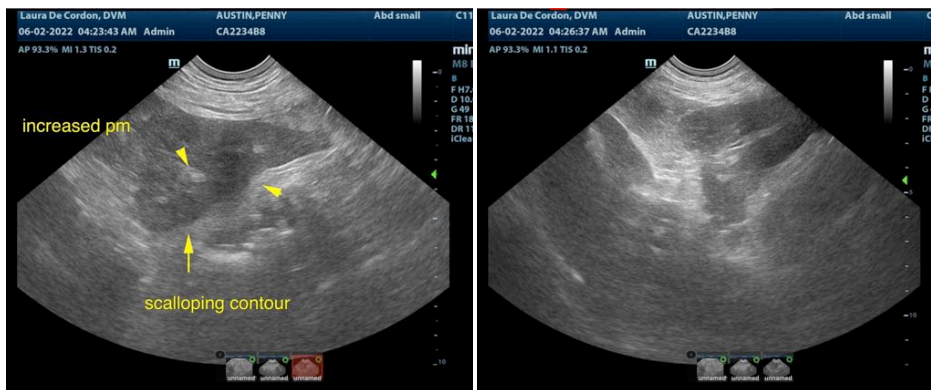
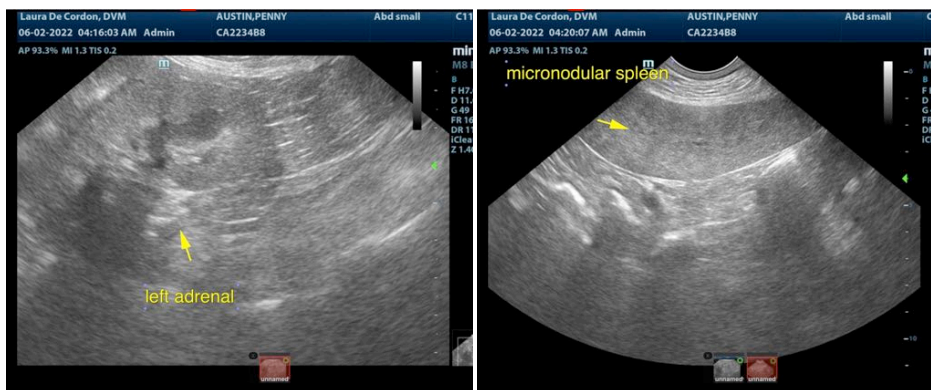
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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Penny Austin

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com

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