



PATIENT

Bear Ball

SPECIES

Canine

BREED

Pomeranian

SEX

Neutered Male

AGE

10

WEIGHT

9.8

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

Dr. Maniar

INVOICE

16252

DATE

06/02/26

PRESENTING CLINICAL SIGNS

Lethargic suspect splenic mass on x-rays anemic Hx of Cushing's

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra to a depth of 1.0 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 **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. Pinpoint nonobstructive nephrolithiasis was present in the left kidney. The left kidney measured 4.5 cm in length. The right kidney measured 4.5 cm in length.

Adrenal Glands

The **right adrenal gland** was enlarged, irregular and nodular measuring up to 1.4 cm width at the cranial pole and 1.0 cm width at the caudal pole.

The **left adrenal gland** was enlarged and irregular measuring 2.5 cm x 1.1 cm width at the cranial pole and 0.83 cm width at the caudal pole.

Spleen

The **spleen** was impinged upon by the hepatic mass.

Liver

The **liver** revealed complex mixed hypoechoic 8.0+ cm microcystic mass deriving from the caudal aspect to caudate process of the liver, possibly involving the left caudal liver.

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

- Extensive hepatic mass imping upon the spleen.
- Age-related renal changes with left kidney nephrolithiasis.



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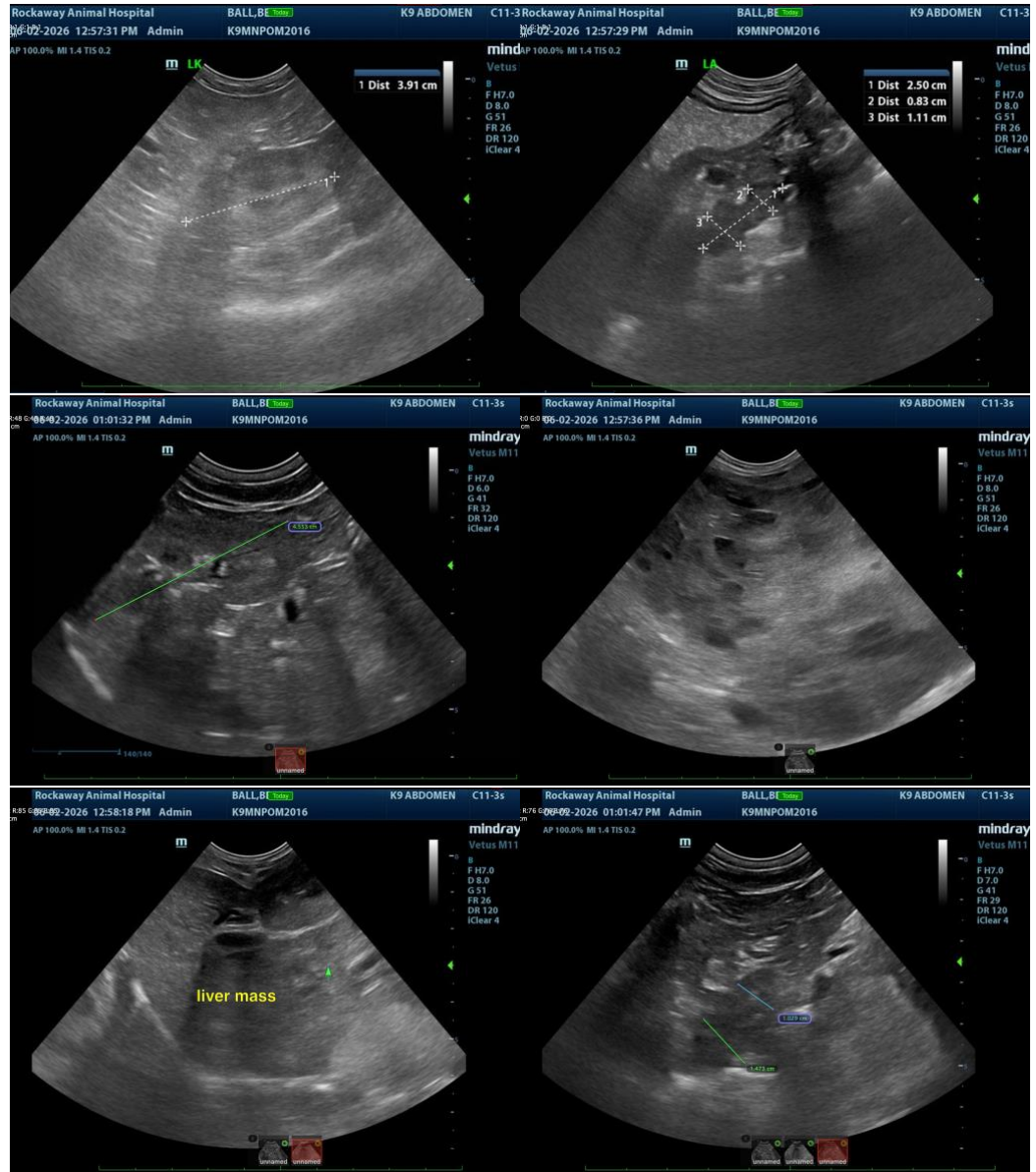
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- Bilateral enlarged, irregular adrenal glands- bilateral neoplasia versus hyperplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the mass could be considered to confirm this is hepatic origin. CT evaluation for surgical planning would be appropriate. Prognosis is guarded.



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.



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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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