



**PATIENT**

Bentley-Hanna  
Albanese

**SPECIES**

Canine

**BREED**

Golden Doodle

**SEX**

Neutered Male

**AGE**

11 Years

**WEIGHT**

86 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Diane McFadden

**HOSPITAL NAME**

AH of Roxbury

**REFERRING VET**

Dr. Elia

**INVOICE**

23335

**DATE**

7/13/23

**PRESENTING CLINICAL SIGNS**

History of cancer - liver mass removed Dec 2022; currently inappetence, elevated WBC and renal values. On Sotalol

Abnormal PE/Chem/CBC/UA Results: glob 3.8, BUN 32, crea 1.7, WBC 53.2, platelets 515, neutrophils 87; USPG 1.027

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **bladder** in this patient was mildly 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 were normal. This is a minor change. The pelvic urethra was imaged 3.0 cm beyond the cystourethral junction.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some minor 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 right kidney measured 8.2 cm. The left kidney measured 8.42 cm. An anechoic cyst was noted in the caudal pole of the right kidney, measuring 1.5 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 right adrenal gland measured 2.92 cm x 0.58 cm at the caudal pole and 1.13 cm at the cranial pole. The left adrenal gland measured 2.9 cm x 0.81 cm at the caudal pole and 0.57 cm at the cranial pole.

**Spleen**

The region of the **splenic fossa** was unremarkable.

**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**



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The **stomach** revealed fluid filled lumen. Hyperperistalsis was noted. The small intestine and colon were unremarkable.

**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.

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**Free Abdomen**

A mixed hypoechoic expansive **mass** was noted, measuring 5.0 cm x 4.3 cm, appears to be of lymph node origin. The mass was moderately vascular. Ultrasound guided FNA could be considered for further definition.

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**ULTRASONOGRAPHIC FINDINGS**

- Undifferentiated lymph node mass- appears to be potentially resectable.
- Age-related renal changes with right kidney cyst
- Fluid filled gastric lumen
- Age-related abdominal changes otherwise

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

FNA of the liver is warranted to assess for micrometastasis. The kidneys appear unremarkable; therefore, prerenal issues are likely playing a role. Ultrasound guided FNA of the mass is indicated. Blood pressure measurements are indicated. If hypertension is present, then urine catecholamine is indicated to assess for ectopic pheochromocytoma given the echotexture of the mass itself, yet both adrenals appear normal. Prognosis is guarded.

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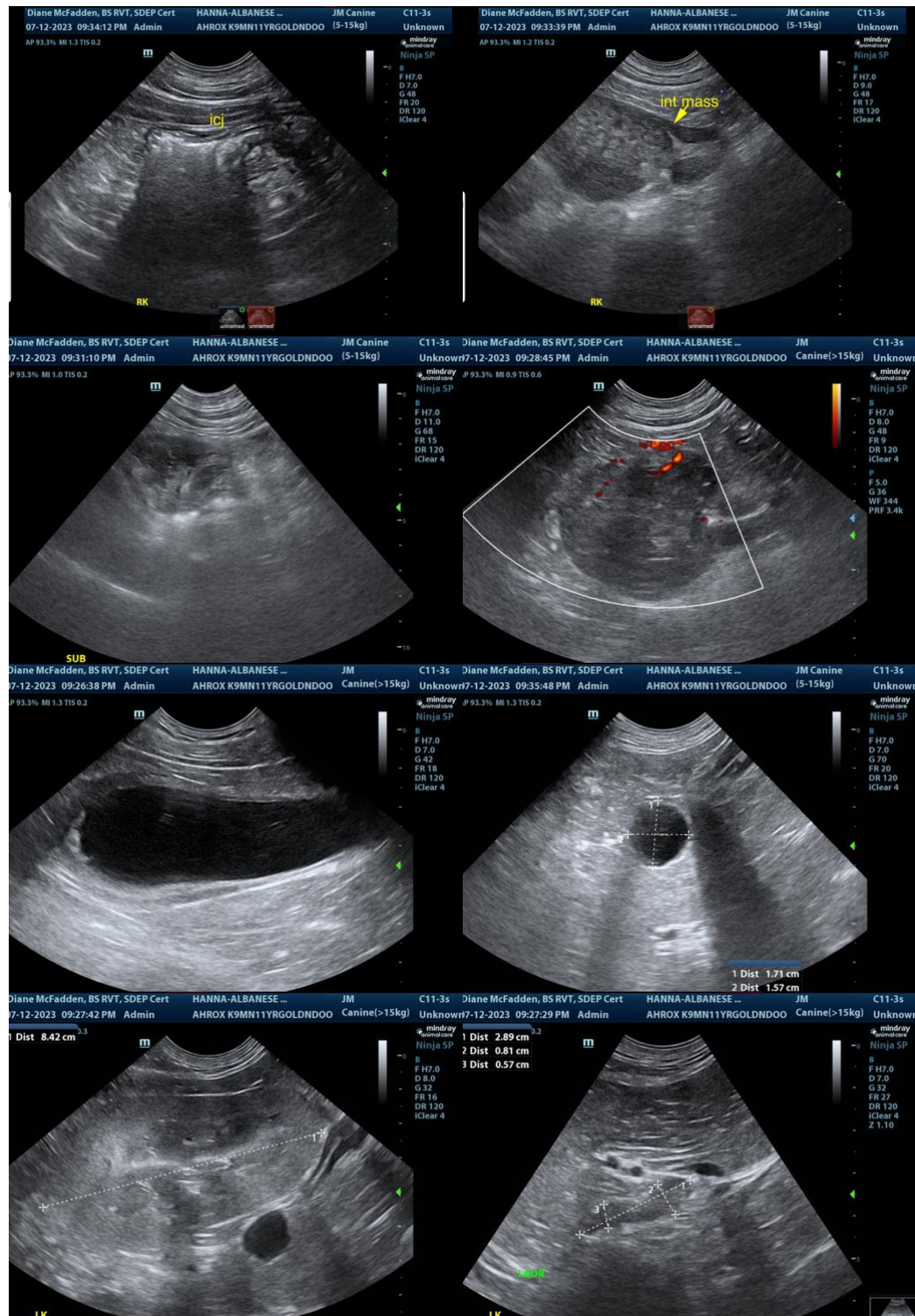
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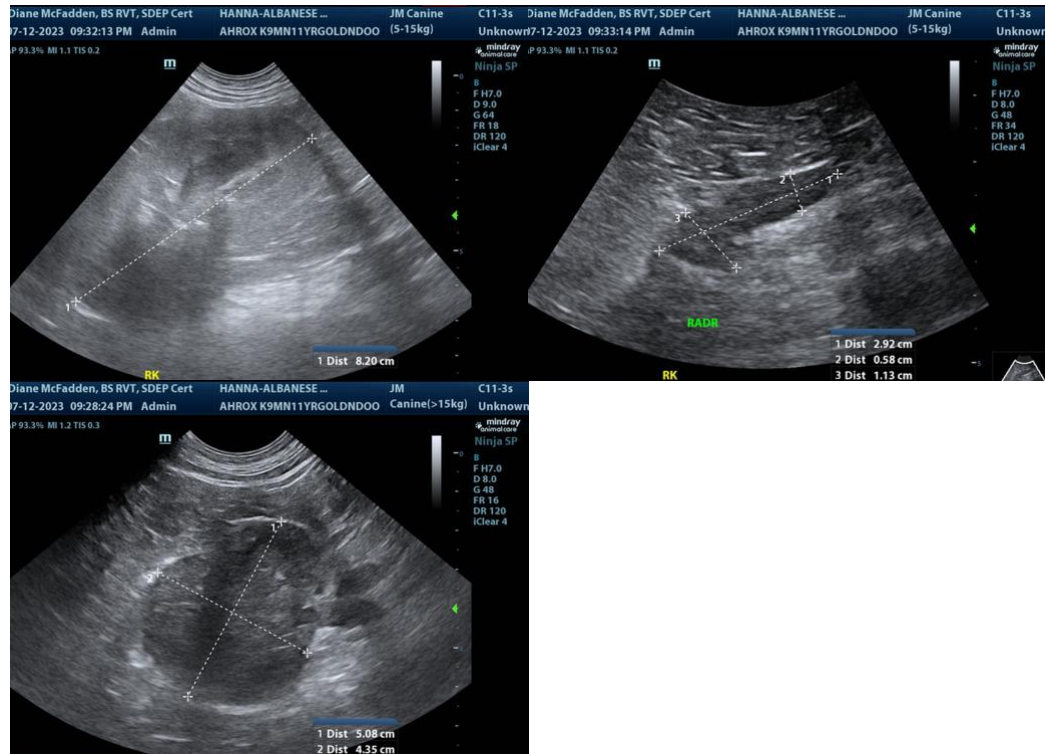
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com