



**PATIENT**

Ozzy VanDuerson

**SPECIES**

Canine

**BREED**

Hound

**SEX**

Neutered Male

**AGE**

12 Years

**WEIGHT**

**PRESENTING CLINICAL SIGNS**

Weight loss, anorexia, hematuria.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** revealed a concentric mass measuring up to 2.0 cm in width and occupying the cystourethral junction and proximal urethra, extending in a concentric fashion throughout the bladder with concurrent accumulation of calculi noted. The deep pelvic urethra was thickened and irregular.

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 his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The kidneys measured 8.0 cm each.

**Adrenal Glands**

The **adrenal glands** were not visualized owing to the mass, as pressure on the mass would be precarious.

**Spleen**

The **spleen** was enlarged and irregular with heterogeneous parenchymal changes. A 10 cm mass was deriving from the caudal pole and slight free fluid.

**Liver**

The **liver** presented heterogeneous, irregular, hypoechoic nodules, which may represent metastatic disease. The gallbladder and common bile duct 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.

**Free Abdomen**

A cranial abdominal lymph node (appeared to be hepatic lymph node) measuring 4.3 cmx 2.77 cm.

**ULTRASONOGRAPHIC FINDINGS**

- Multicentric neoplasia with polymorbidity
- Bladder mass

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**HOSPITAL NAME**

Franklin Lakes AH

**REFERRING VET**

Dr. Maniar

**INVOICE**

44070

**DATE**

7/18/23



**PATIENT**

Ozzy VanDuerson

- Splenic mass
- Cranial abdominal lymphadenopathy
- Liver nodules – strong concern for metastatic disease.
- Age related renal changes

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Prognosis is poor. Palliative therapy with splenectomy, urethral stent placement, and oncological intervention could be considered if the liver is not metastatic. However, quality of life measures should be considered in this patient.

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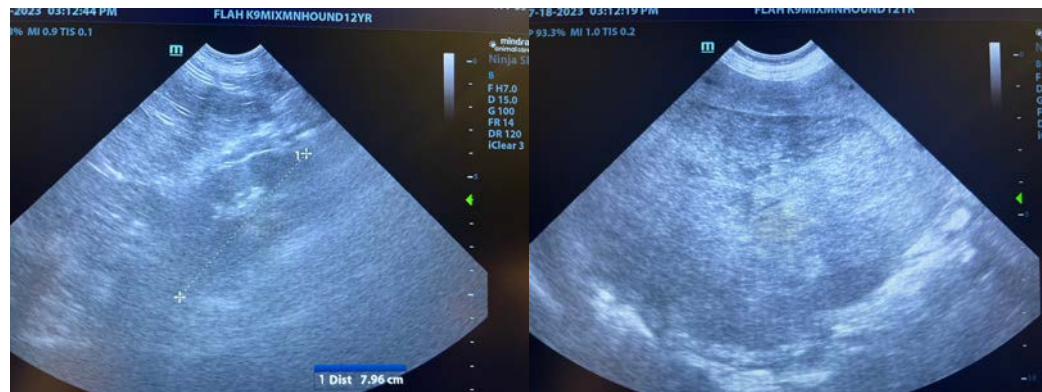
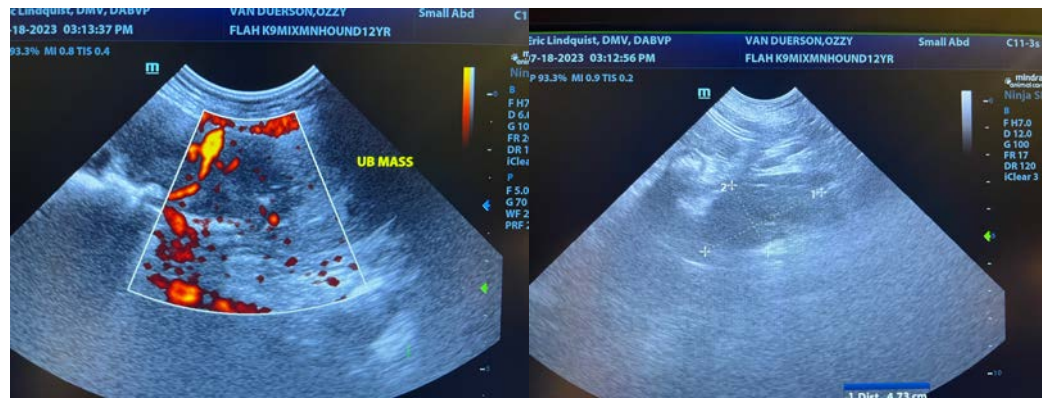
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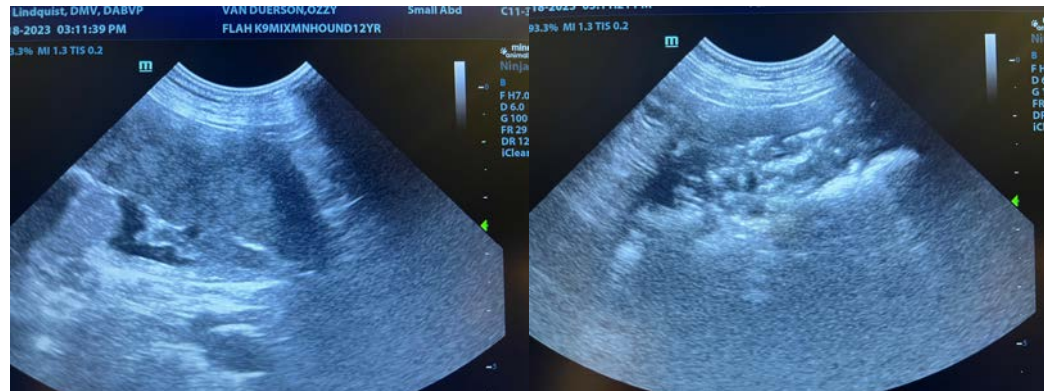
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com

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