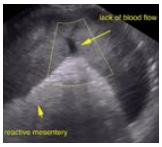
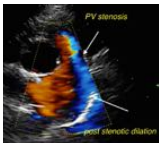
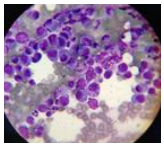
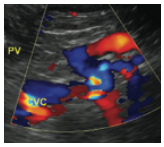




SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jack Langlais

SPECIES

Canine

BREED

Lab Mix

SEX

Neutered male

AGE

9 years

WEIGHT

73.5 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Haley Harasimowicz

HOSPITAL NAME

Waterbury VH

REFERRING VET

Dr. Harasimowicz

INVOICE

31858

DATE

7/20/22

PRESENTING CLINICAL SIGNS

History: P seen on 7/8/22 for acute vomiting after ingesting a piece of towel. P was able to pass foreign material with medical management, but possible splenic mass noted on abdominal rads at that time . Owner presented today for abdominal ultrasound to investigate possible splenic mass. P doing great at home - e/d well, very energetic, no v/d/c/s.
Clinically doing great Most recent labwork (CBC/chem) was on 7/8 and was unremarkable aside from mild amylase and lipase elevation. Hct of 61.6% at that time. 3-view chest rads were also taken today and appear WNL but radiologist review pending.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

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 and right kidney measured 6.0 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 0.8 cm at the cranial pole and 0.6 cm at the caudal pole. The left adrenal gland measured 0.6 cm.

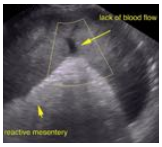
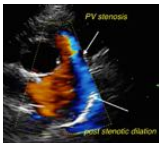
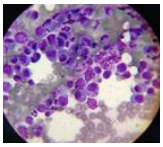
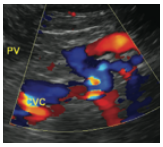
Spleen

The **spleen** revealed a hypoechoic, nodular structure with regional inflammation. This is consistent with a mass, infarct or necrosis.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT

Jack Langlais

SPECIES

Canine

BREED

Lab Mix

SEX

Neutered male

AGE

9 years

WEIGHT

73.5 lbs

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Haley Harasimowicz

HOSPITAL NAME

Waterbury VH

REFERRING VET

Dr. Harasimowicz

INVOICE

31858

DATE

7/20/22

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

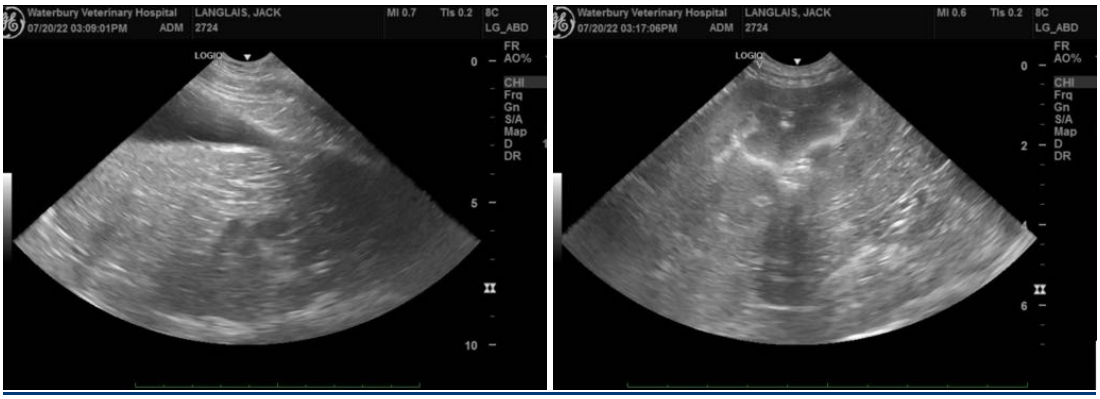
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

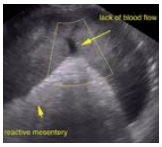
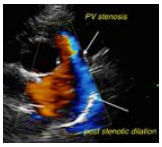
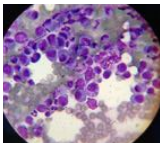
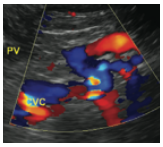
Splenic lesion, consistent with mass, infarct or necrosis with regional inflammation.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Direct splenectomy is recommended if chest radiographs and rapid echocardiogram do not reveal any evidence of metastatic disease. It is very possible that this is a solitary lesion that it may be benign. However, infarct, necrosis, splenitis are all possible. FNA could be considered as well as power doppler assessment of the lesion to assess if blood flow is present. If not present it would suggest infarct or necrosis. Regardless, splenectomy is indicated. There was no evidence of other organ system pathology.



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™

SonoPath.com
1-800-838-4268 info@sonopath.com

PATIENT
Jack Langlais

SPECIES
Canine

BREED
Lab Mix

SEX
Neutered male

AGE
9 years

WEIGHT
73.5 lbs

INTERPRETED BY
Eric Lindquist, DMV DABVP, Cert. IVUSS

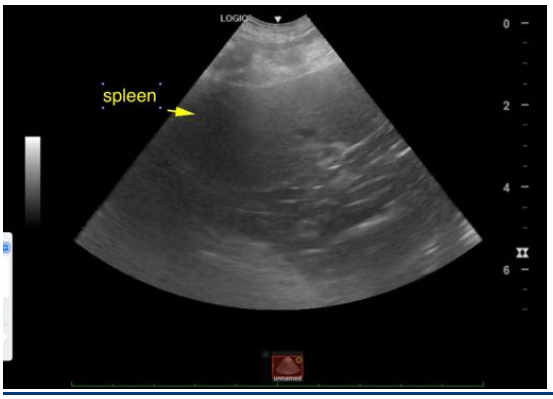
IMAGING PERFORMED BY
Haley Harasimowicz

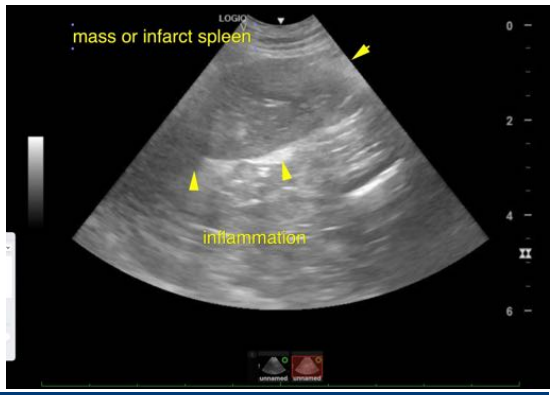
HOSPITAL NAME
Waterbury VH

REFERRING VET
Dr. Harasimowicz

INVOICE
31858

DATE
7/20/22





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
info@SonoPath.com