



PATIENT

Andrew Bnaks

SPECIES

Canine

BREED

Pomeranian

SEX

Neutered Male

AGE

16

WEIGHT

10

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Byron Cabrera

HOSPITAL NAME

All Creatures Great &
Small Denville

REFERRING VET

Silas Ashmore

INVOICE

23541

DATE

7/20/23

PRESENTING CLINICAL SIGNS

History: Loss of appetite, vomit, diarrhea, loss of detail in pancreatic area on abdominal rads.

Abnormal PE/Chem/CBC/UA Results: elevated WBC (39000), CPL abnormal, HCT= 25, BUW -57

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed a calculus, measuring 1.1 cm, nonobstructive. The bladder wall was unremarkable. The pelvic urethra was imaged 1.0 cm beyond the cystourethral junction.

A parenchymal cyst was noted at the medial cortex of the **left kidney**. Pinpoint mineralizations were noted. The left kidney measured 4.4 cm.

Adrenal Glands

The **left adrenal gland** was mildly enlarged at the caudal pole, measuring 0.8 cm. The cranial pole measured 0.6 cm.

The **right adrenal gland** measured 1.1 cm at the caudal pole and 0.7 cm at the cranial pole. The right adrenal gland was hypoechoic, swollen and inflamed.

Spleen

Multiple expansive nodular masses were noted, deriving from the **spleen**, measuring approximately 7.0 cm x 5.0 cm. Nodular changes were noted elsewhere in the spleen. A second mass deriving from the cranial pole was noted. A hyperechoic splenic nodule was noted, consistent with lipogranuloma. Significant inflammation was noted around the splenic masses.

Liver

The **liver** was riddled with multiple hypoechoic nodules with target type appearance. 25G FNA of the nodules is warranted to confirm suspicion of metastatic disease. Gallbladder polyps and debris were noted. The gallbladder wall was thickened, consistent with chronic cholangitis.

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 masses with significant inflammation
- Liver nodules, strongly suspicious for metastatic disease
- Prominent adrenal glands



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- Left kidney cyst and mineralizations.
- Concurrent bladder calculus, nonobstructive.
- Gallbladder polyps and debris with thickened gallbladder wall

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA of the spleen and liver is recommended. Given the anemia, bone marrow involvement may be an issue. No free fluid was noted. This is likely round cell neoplasia.

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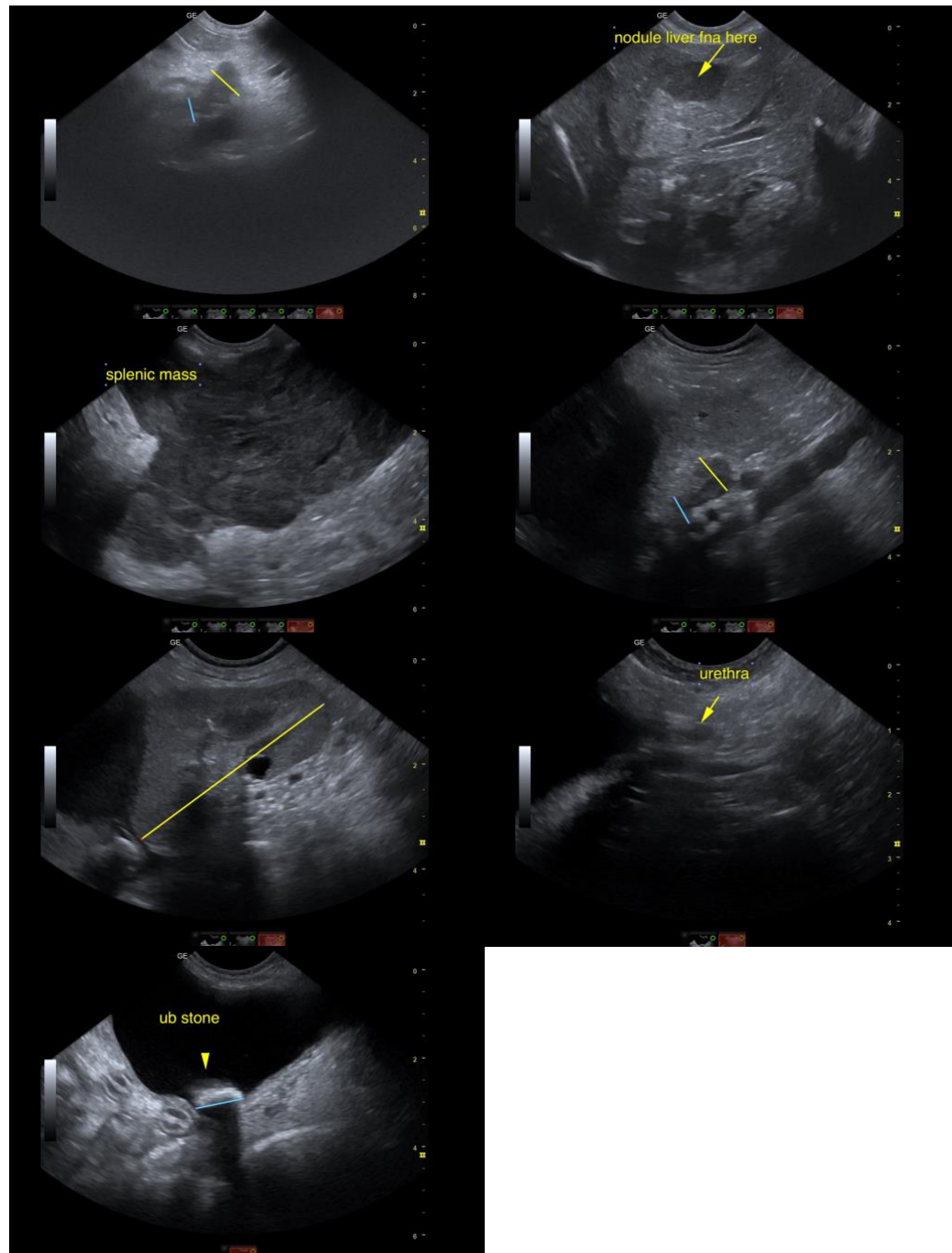
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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.

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info@SonoPath.com

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