



PATIENT

Rosie Schmidt

SPECIES

Canine

BREED

Golden Retriever

SEX

Spayed Female

AGE

11

WEIGHT

86

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Melissa Pascucci

HOSPITAL NAME

American AH

REFERRING VET

Stockmal

INVOICE

23878

DATE

8/11/23

PRESENTING CLINICAL SIGNS

History: Hemoabdomen found last week. Full AUS was not performed at the time. Owners had noted 1 episode of weakness.

Abnormal PE/Chem/CBC/UA Results: PCV 28% on 8/5/23

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 mild change. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

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 right kidney measured 6.0 cm. The left kidney measured 6.0 cm.

Adrenal Glands

The **adrenal glands** were not visualized.

Spleen

The **spleen** revealed heterogenous hypoechoic parenchyma with scalloping contour and occasional nodules. Splenic size is fairly normal yet folded upon itself cranially. Ultrasound guided FNA of the spleen is strongly encouraged, especially in the hypoechoic subcapsular regions. The cr. anial pole of the spleen revealed an overt mass, measuring 5.0 cm.

Liver

The **liver** revealed multiple hypoechoic nodular changes, similar to the splenic presentation. The gallbladder and common bile duct were unremarkable.

Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.



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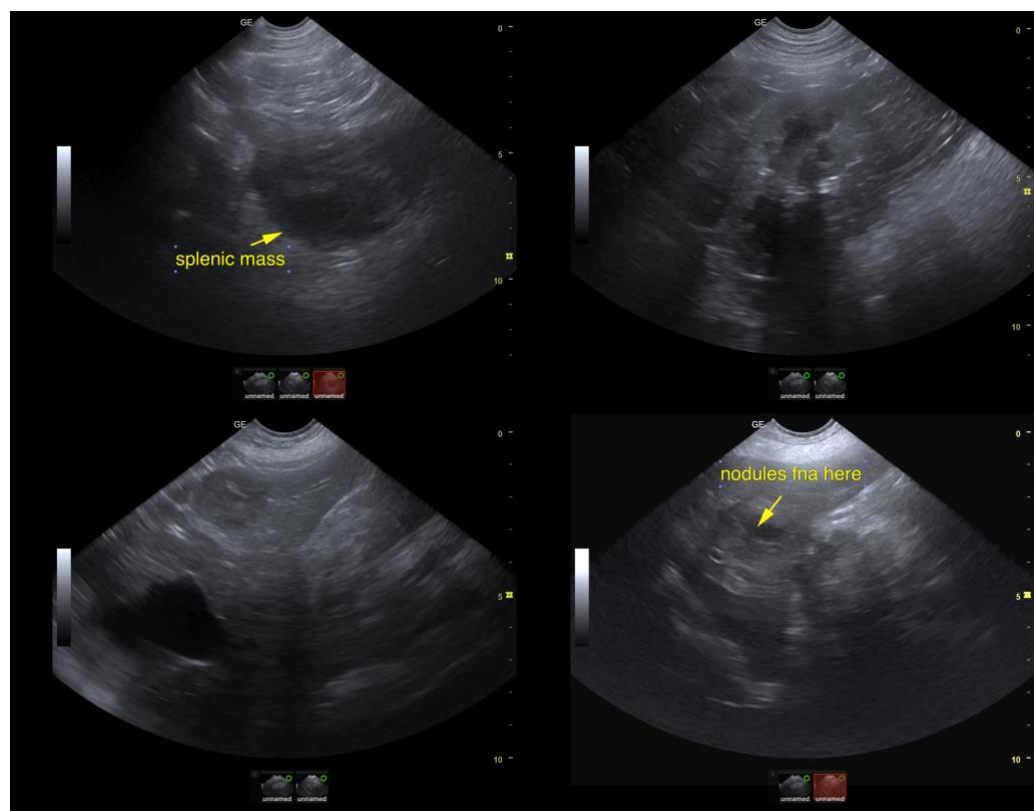
8/11/23

ULTRASONOGRAPHIC FINDINGS

- Hepatic nodular changes
- Splenic mass and nodular changes
- Partially full stomach
- Age-related urinary bladder changes

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Ultrasound guided FNA of the spleen and liver are essential in this patient. Round cell neoplasia/hemangiosarcoma suspected. Fungal or other embolic disease is possible yet less likely, since not endemic in the region. Surgical intervention could be considered, however, direct inspection of the liver is warranted, as metastatic disease is suspected. Chest radiographs +/- echocardiogram is warranted to assess for metastatic disease.





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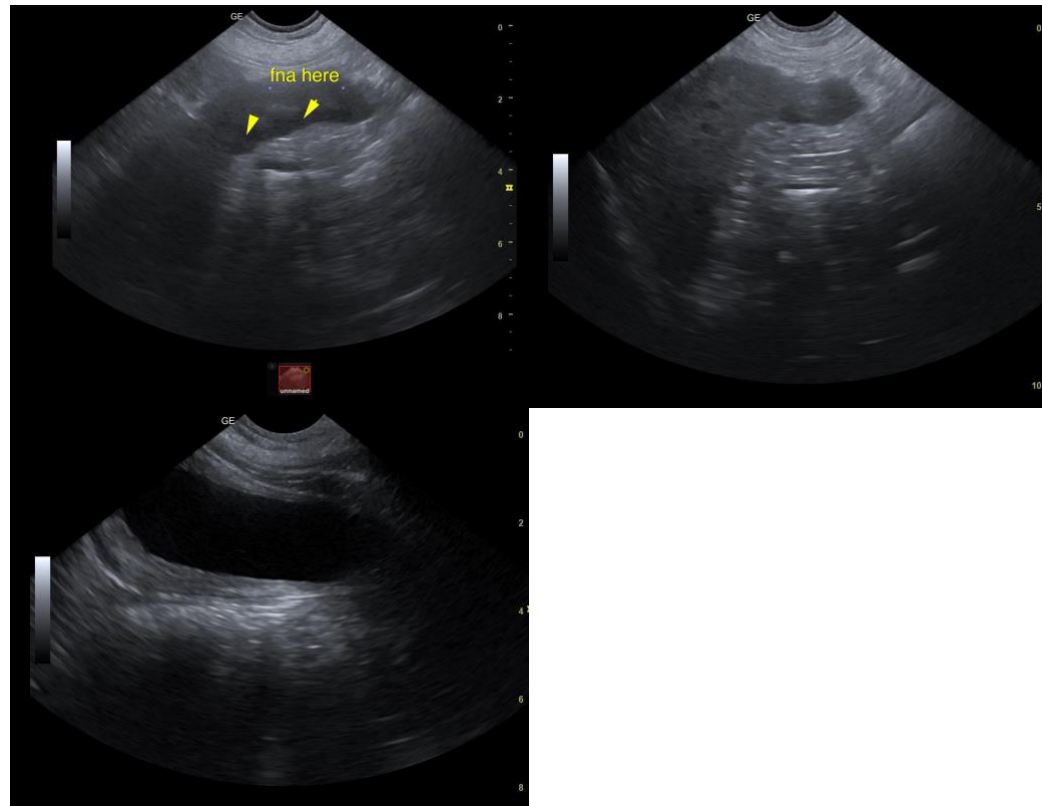
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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