



**PATIENT PRESENTING CLINICAL SIGNS**

Albi Kajian Panting, blood in stool increased ALT

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine **Urinary System**

**BREED** 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 were noted. Ureteral papillae were normal.

**SEX** 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. Slight pinpoint mineralizations noted. The right kidney measured 5.07 cm. The left kidney measured 5.5 cm.

Spayed Female

**AGE**

10

**WEIGHT**

45

**Adrenal Glands**

The **adrenal glands** were not visualized.

**Spleen**

The **spleen** presented minor heterogeneous parenchymal changes with a focal hypoechoic nodule noted measuring 1.5 cm. Similar echotexture to the larger colonic mass.

**INTERPRETED BY**

Eric Lindquist, DMV

DABVP, Cert. IVUSS

**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. No evidence of metastatic disease.

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Maniar

**Gastrointestinal**

The upper **gastrointestinal tract** was unremarkable. The stomach was full. A 3.12 cm hypoechoic parenchymal mass was noted that appeared to be deriving from the wall of the descending colon. Ultrasound guided FNA indicated. The mass does appear resectable with subtotal colectomy. The mass is cranial to the urinary bladder and is partially obstructive.

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**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.



**PATIENT**

Albi Kajian

**SPECIES**

Canine

**BREED**

Poodle

**SEX**

Spayed Female

**AGE**

10

**WEIGHT**

45

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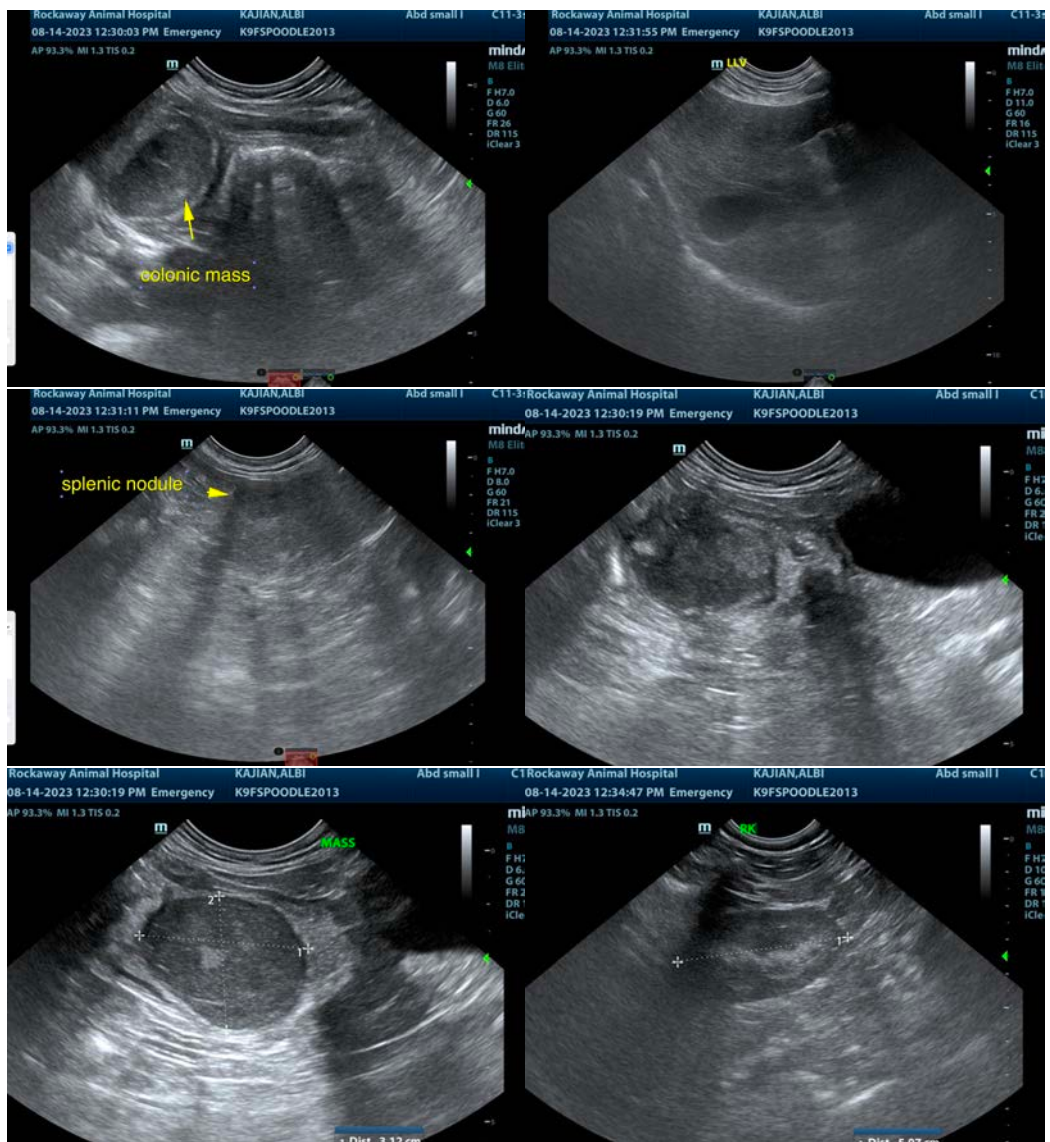
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**ULTRASONOGRAPHIC FINDINGS**

- Descending colonic mass
- Nodular splenic changes
- Age related renal and hepatic changes

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recommend chest radiographs and echocardiogram to screen for metastatic disease followed by subtotal colectomy and splenectomy in this patient.





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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.

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