



**PATIENT**

**PRESENTING CLINICAL SIGNS**

Titus Hearn

History: 7/28/22 Titus presented today for v/d on and off x3 weeks. O states it started July 2nd, then he would have an episode of either vomiting and/or diarrhea every other day or so. Still has appetite but doesn't always keep food down. Not one to typically get into things other than eating grass. O thought pt was better because he had not had any episodes for 8 or 9 days until yesterday when he threw up his lunch, then was lethargic and couldn't keep water down. Pt is on dasuquin, no other meds or supplements.

**SPECIES**

Canine

**BREED**

Bulldog

**SEX**

MN

**AGE**

10

**WEIGHT**

69lb

Abnormal PE/Chem/CBC/UA Results: 7/28 In house BW - CBC mild regenerative anemia, chemistry Mild decrease in chloride all else WNL. Snap Cpl normal. Abdominal rads: CONCLUSIONS/IMPRESSIONS 1. No evidence of a mechanical intestinal obstruction. 2. Small splenic tail mass with associated effusion and/or steatitis. Both benign and malignant etiologies are possible. 3. Bilateral hip dysplasia with moderate secondary osteoarthritis. Mild stifle osteoarthritis. Congenital thoracic hemivertebrae. Disseminated idiopathic skeletal hyperostosis (DISH)

**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 were noted. Ureteral papillae were normal.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**Adrenal Glands**

The left and right adrenal glands were not definitively visualized.

**IMAGING PERFORMED BY**

Dr. Gallick

**Spleen**

The spleen revealed a cavitated expansive mass with regional inflammation measuring approximately 6 cm.

**HOSPITAL NAME**

Magnolia Springs  
Veterinary Center

**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.

**REFERRING VET**

Dr. Duppler

**INVOICE**

11265ag

**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.

**DATE**

08/03/2022



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**Pancreas**

Titus Hearn

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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**Free Abdomen**

No free fluid was noted at the time of the sonogram.

**BREED**

Bulldog

**ULTRASONOGRAPHIC FINDINGS**

- Inflamed cystic splenic mass-may be histopathologically benign, hemangiosarcoma, abscessation, necrosis are all possible.

**SEX**

MN

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

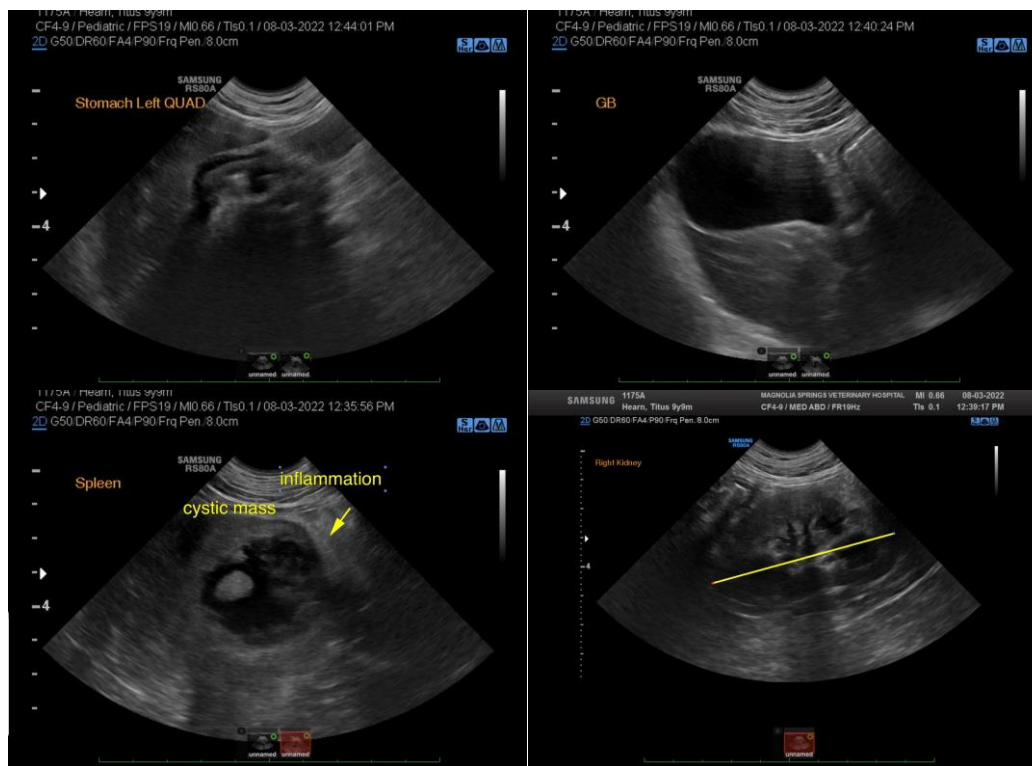
**AGE**

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Three view chest radiographs and a rapid echocardiogram are indicated if not already done to assess for pericardial effusion or masses followed by splenectomy.

**WEIGHT**

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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.

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