



PATIENT

Banjo Mannas

SPECIES

Canine

BREED

Springer Spaniel

SEX

Neutered Male

AGE

9 Years

WEIGHT

24.4 kg

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

**IMAGING
PERFORMED BY**

Dr. Sarah Barthelemy

HOSPITAL NAME

Crowchild Trail VC

REFERRING VET

Dr. Rondot

INVOICE

17332

DATE

9/16/22

PRESENTING CLINICAL SIGNS

History: Abdominal mass palpated on routine exam. Mild regenerative anemia. Spherocytes present on blood smear.

Abnormal PE/Chem/CBC/UA Results: Mild regen anemia with spherocytes visible on smear.

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.

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 6.23 cm. The left 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. The left adrenal gland measured 0.48 cm.

Spleen

The **spleen** revealed an expansive mixed echogenic complex 11.0 cm mass with other nodular changes noted throughout the spleen. Scalloping contour and disrupted architecture was noted, consistent with round cell neoplasia pattern with secondary mass formation.

Liver

The **liver** revealed lobar biliary mineralizations. Subtle hypoechoic nodular changes were noted in the liver, this may represent a metastatic disease primarily in the caudate process. FNA is warranted or biopsy at surgery.

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



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- Infiltrative splenic pattern
- Subtle nodular hepatic changes and lobar biliary mineralization

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Screening FNA of the spleen and liver recommended or direct splenectomy with liver biopsy if chest radiographs reveal no evidence of metastatic disease. Significant inflammation was noted associated with the splenic mass. Surgical or medical urgency is warranted. No other evidence of potential metastatic disease is noted. A rapid echocardiogram is warranted to ensure no metastatic disease is present to the right auricle or pericardium.

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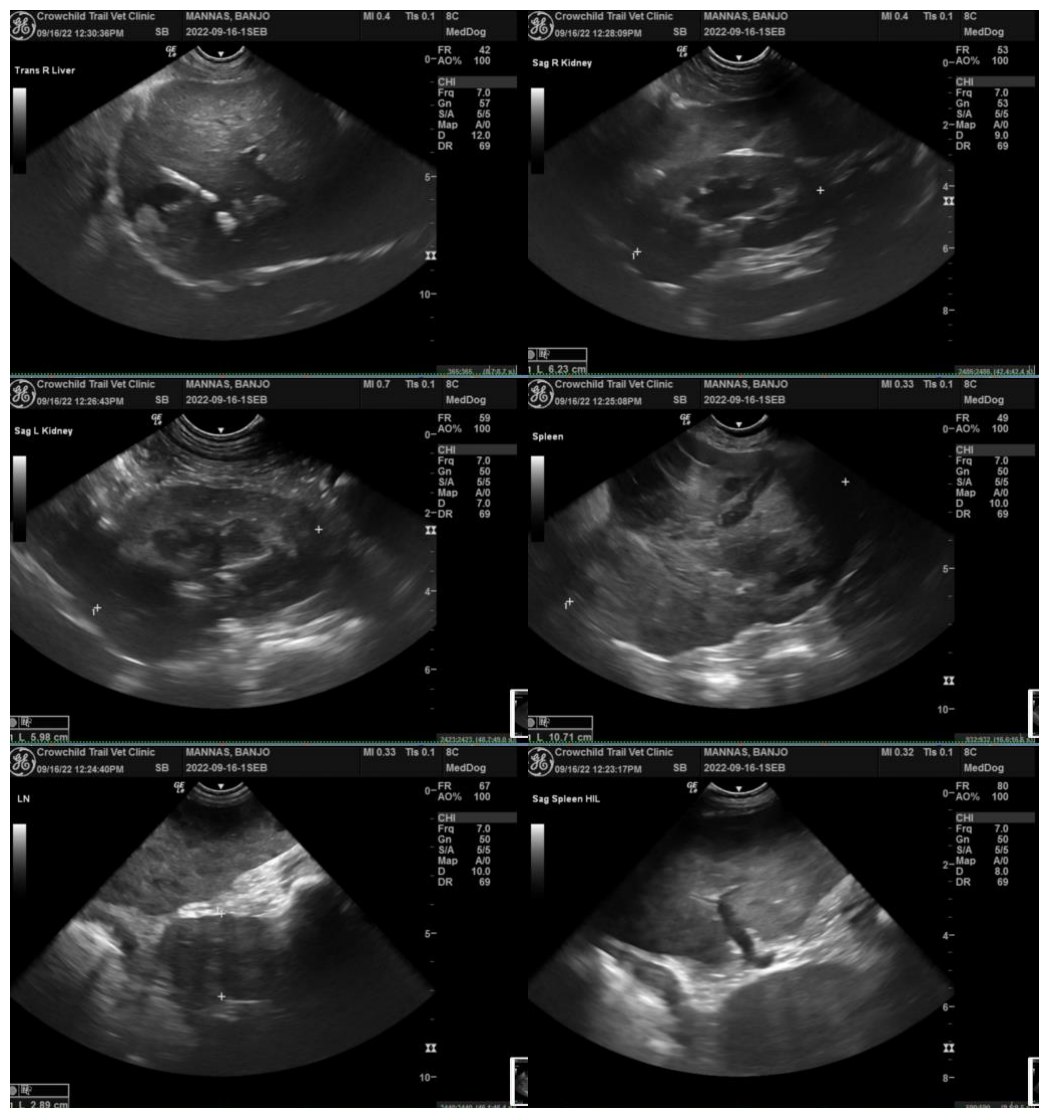
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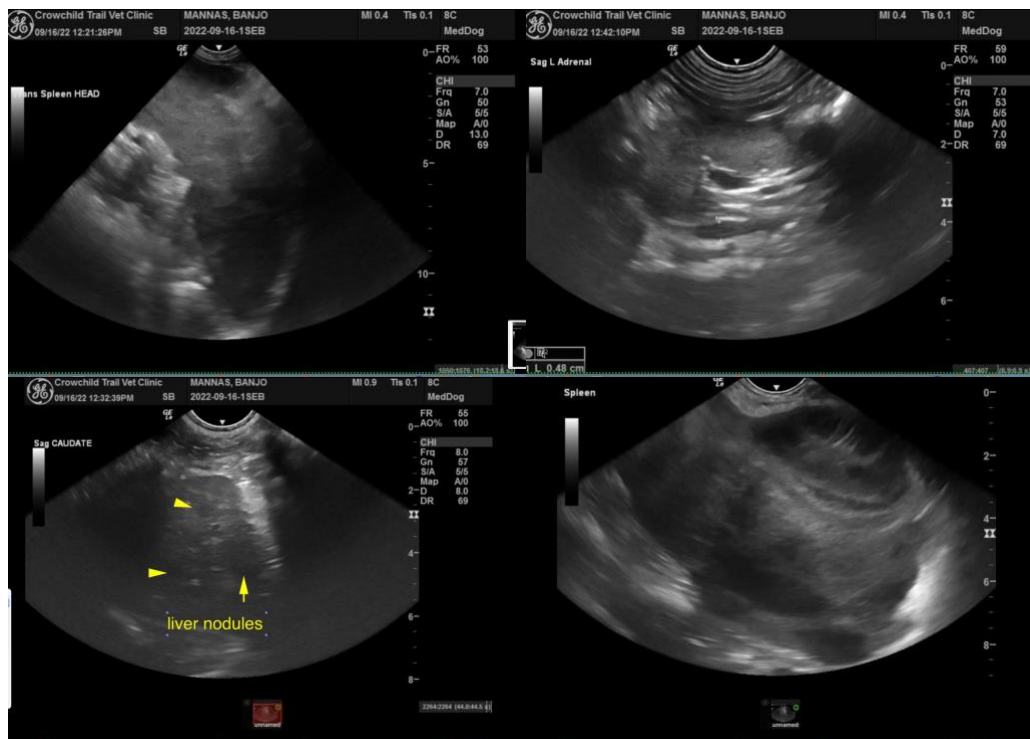
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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