



**PATIENT**

Dobi Ryan

**SPECIES**

Canine

**BREED**

Boxer Mix

**SEX**

Spayed Female

**AGE**

9 Years

**WEIGHT**

78.1 Pounds

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Schanche

**HOSPITAL NAME**

Total Bond VH

**REFERRING VET**

Schanche

**INVOICE**

17433

**DATE**

9/23/22

**PRESENTING CLINICAL SIGNS**

History: 9 year old FS boxer mix presented for wellness exam and o has noticed on and off urinary incontinence over the summer at home. Eating well at home, normal drinking, possible increased urinating, energy great at home. Normal stools, no vomiting. Full blood work showed ALT 634 and USG 1.014. rest of blood work unremarkable on 9/19/2022. Has had a history of skin masses -histiocytoma and hemangiosarcoma of the skin.

**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 pelvic urethra was imaged 1.0 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 6.5 cm. The left kidney measured 5.7 cm.

**Adrenal Glands**

The regions of the **adrenal glands** were imaged and revealed no evidence of pathology.

**Spleen**

The **spleen** revealed an expansive echogenic parenchymal mass, measuring 6.0 cm, deriving from the mid caudal body. Other minor heterogeneous nodular changes were noted in the spleen.

**Liver**

The **liver** presented an expansive irregular mass with pericapsular inflammatory pattern, measuring approximately 6.0 cm in the left medial liver. The gallbladder and common bile duct were unremarkable.

**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 and hepatic masses



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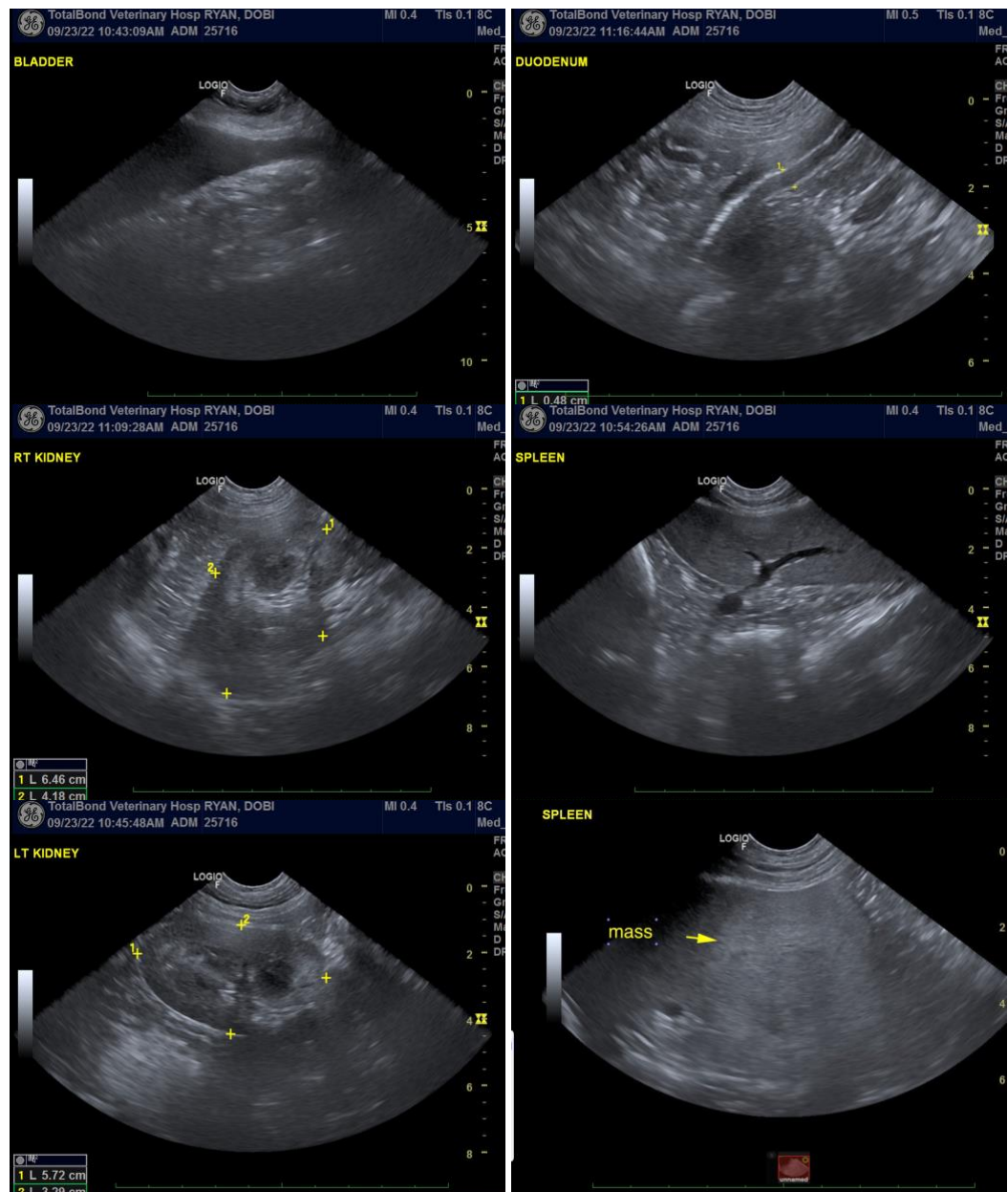
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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Primary splenic neoplasia, such as hemangiosarcoma, round cell neoplasia with metastatic mass to the liver possible, however, two separate pathologies with hepatocellular carcinoma in the liver is more likely. FNA of both lesions is indicated for further definition or exploratory surgery with expectations of full liver lobectomy. Surgical planning would be best served from CT standpoint with regards to the liver mass, as its exact position could not be completely ascertained.





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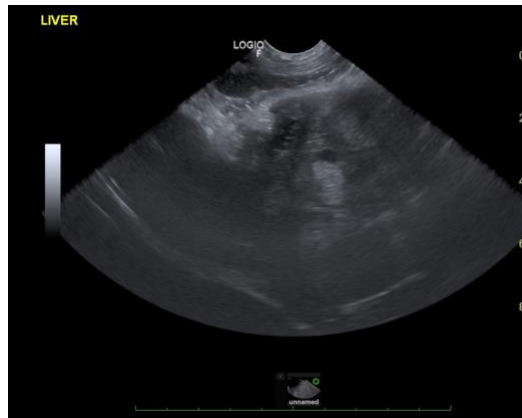
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**The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

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