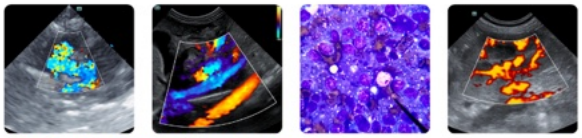


PATIENT

Kahn Inglese

SPECIES

Canine

BREED

American Bull Terrier

SEX

Neutered male

AGE

8 years

WEIGHT

90 lbs

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

IMAGING PERFORMED BY

Meghan Morse, LVT, CVT

HOSPITAL NAME

Walker Valley VH

REFERRING VET

Dr. Chlebowski

INVOICE

71453

DATE

2/10/26

PRESENTING CLINICAL SIGNS

- Staging for recently diagnosed seminoma (bilateral)- oncology recommended full AUS + inguinal aspirates
- 1/13/26 pt presented for enlarged L testicle. Pt neutered on 1/28. Histopath showed possible aggressive characteristics in L testicle.
- CK 237, rest WNL

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 was 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 left kidney measured 7.51 cm. The right kidney measured 7.96 cm.

Adrenal Glands

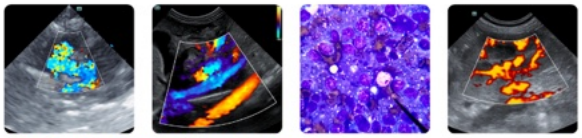
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 2.72 x 1.07 cm at the cranial pole and 0.43 cm at caudal pole. The left adrenal gland measured 1.8 x 0.42 cm at the caudal pole and 0.56 cm at the cranial pole.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

Liver

The **liver** revealed slightly increased portal markings and coarse architecture. The gallbladder and common bile duct were unremarkable.



PATIENT

Kahn Inglese

SPECIES

Canine

BREED

American Bull Terrier

SEX

Neutered male

AGE

8 years

WEIGHT

90 lbs

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

IMAGING PERFORMED BY

Meghan Morse, LVT, CVT

HOSPITAL NAME

Walker Valley VH

REFERRING VET

Dr. Chlebowski

INVOICE

71453

DATE

2/10/26

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.

Free Abdomen

The **prostate** was uniform and measured 2.1 cm.

The **iliac trifurcation** was unremarkable.

An **inguinal lymph node** was imaged and measured 1.4 cm with heterogenous, irregular parenchymal changes. The lymph node appears to be encapsulated with areas of mineralization.

ULTRASONOGRAPHIC FINDINGS

Minor hepatic remodeling.

Prominent residual prostate.

Otherwise, normal intraabdominal cavity.

Irregular, mineralized inguinal lymphadenopathy. The right lymph node measured 0.8 cm and the left lymph node measured 1.1 cm. Strong concern for metastatic disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend surgical removal of the left inguinal lymph node with removal of approximately 3.0 cm of excised tissue, which would include the lymph node. The depth of resection would suggest 1.8 cm to completely excise the pathological lymph node issue as well as obtain suggested adequate margins. Complete resection would be 1.8 cm in depth and 3.3 cm of width of the pathological left inguinal lymph node is recommended along with removal of the right inguinal lymph node. Ultrasoud-guided FNA was performed without complication. Even though the cytology samples were solid, I recommended obtaining a biopsy. This is not typical for seminoma metastatic pattern. Chronic inflammation can also cause mineralization. The irregular margins of the lymph node are concerning for entering into the regional fascial tissues.

PATIENT

Kahn Inglese

SPECIES

Canine

BREED

American Bull Terrier

SEX

Neutered male

AGE

8 years

WEIGHT

90 lbs

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

IMAGING PERFORMED BY

Meghan Morse, LVT, CVT

HOSPITAL NAME

Walker Valley VH

REFERRING VET

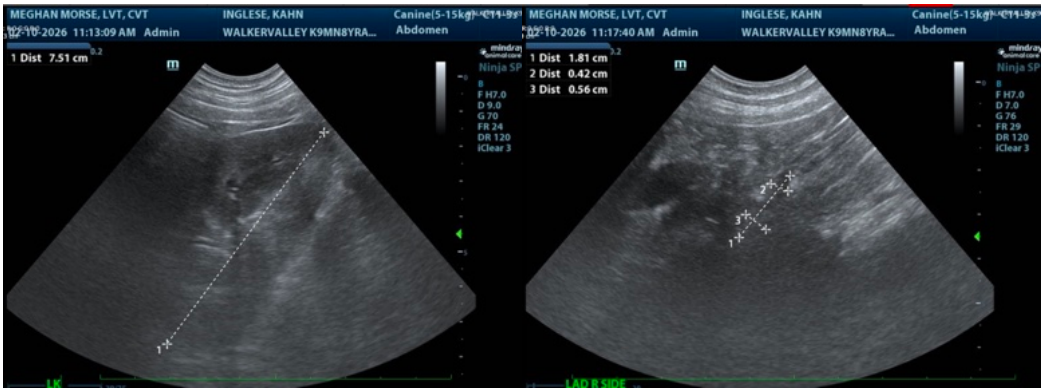
Dr. Chlebowski

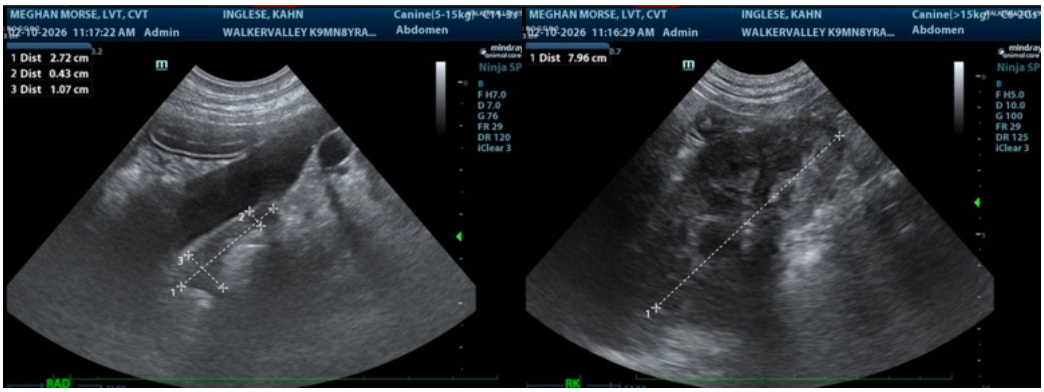
INVOICE

71453

DATE

2/10/26





PATIENT

Kahn Inglese

SPECIES

Canine

BREED

American Bull Terrier

SEX

Neutered male

AGE

8 years

WEIGHT

90 lbs

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

IMAGING PERFORMED BY

Meghan Morse, LVT, CVT

HOSPITAL NAME

Walker Valley VH

REFERRING VET

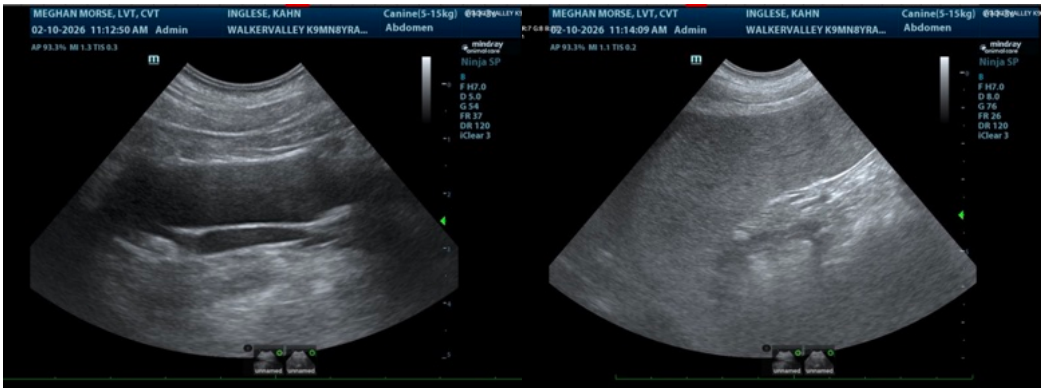
Dr. Chlebowski

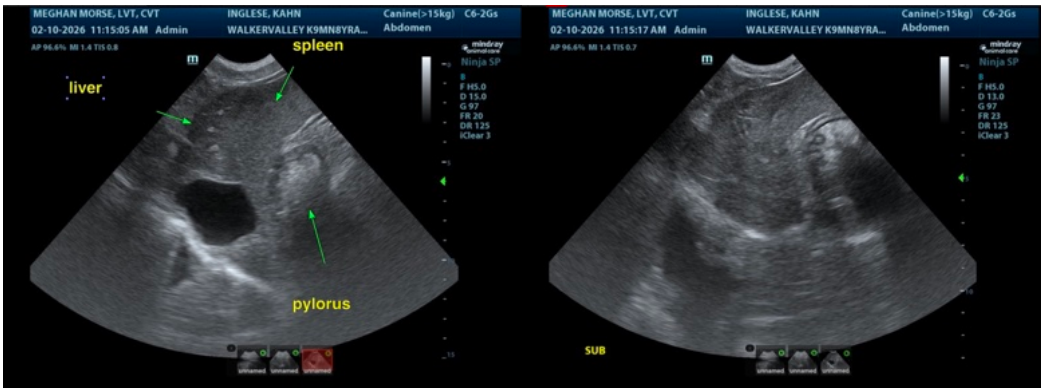
INVOICE

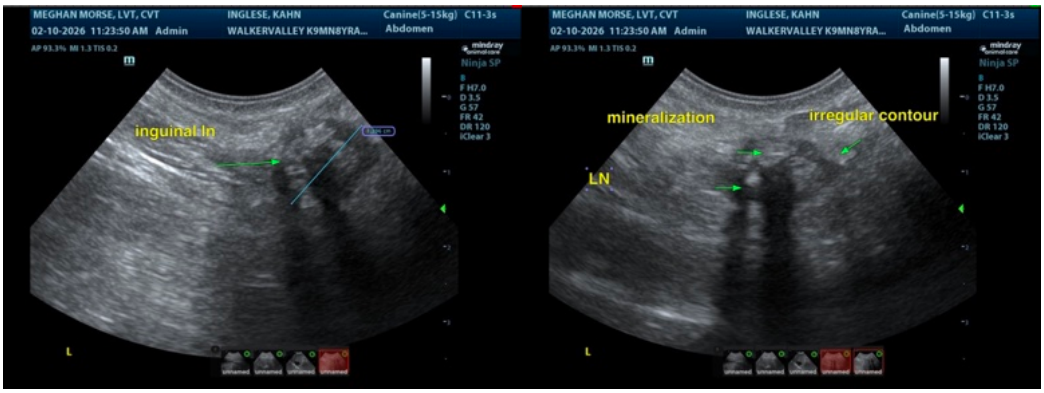
71453

DATE

2/10/26







PATIENT

Kahn Inglese

SPECIES

Canine

BREED

American Bull Terrier

SEX

Neutered male

AGE

8 years

WEIGHT

90 lbs

INTERPRETED BY

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

IMAGING PERFORMED BY

Meghan Morse, LVT, CVT

HOSPITAL NAME

Walker Valley VH

REFERRING VET

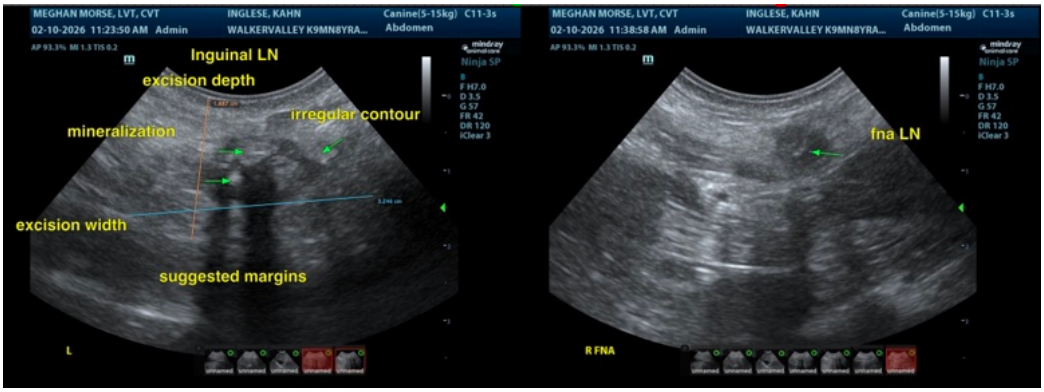
Dr. Chlebowski

INVOICE

71453

DATE

2/10/26



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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com

Info@SonoPath.com