PATIENT

Guy Schaublin

SPECIES

Canine

BREED

Mix

SEX

Neutered male

AGE

12 years

WEIGHT

65 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Chloe Lowe

HOSPITAL NAME

Advanced Vet Care

REFERRING VET

Dr. Voigt

INVOICE

74307

DATE

4/8/26

PRESENTING CLINICAL SIGNS

History: Elevated liver enzyme. Pet was muzzled for exam, but no apparent icterus on sclera. Abdomen was tense not able to palpate. Prednisone 10mg did for Lupus- diagnosed at seem specialist about a year ago.
ALT 376, ALP 1695, GGT 45, children 532, Amyl 334, lipase 278 UA protein 3+

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction and appeared normal. 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. A slight anechoic cyst was noted in the caudal pole of the left kidney and measured 1.16 x 0.8 cm. The left kidney measured 6.33 cm. The right kidney measured 6.83 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 left adrenal gland measured 2.7 x 0.9 cm at the cranial pole and 0.61 cm at the caudal pole. The right adrenal gland measured 2.75 x 1.18 cm at the cranial pole and 0.84 cm at the caudal pole.

Spleen

The **spleen** was largely smooth with subtle heterogeneous parenchymal changes while maintaining normal echogenic relationship to the liver and kidney. These changes are consistent with normal age-related alteration. The capsule was smooth without noticeable impingement from within the spleen or from pathology in the adjacent abdomen. Slight, hypoechoic nodule was noted and non-disruptive measuring 1.2 cm. This is likely hyperplasia or sinusoidal change. The splenic vasculature demonstrated normal volume without signs of congestion or significant contraction. No evidence of active acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

Liver

The left **liver** revealed a hepatomatous type expansive mass in the left caudal liver measuring 6.3 cm. Capsular expansion was noted. The mass was moderately vascular. A separate, right cranial liver nodule was noted and measured 4.4 cm. The gallbladder presented acceptably thin walls with primarily

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anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident.

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

Left caudal liver mass, parenchymal changes were noted.

Right cranial liver nodule.

Slight, splenic nodular change.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver mass appears potentially resectable. This is likely carcinoma versus hepatoma, adenoma, and less likely hemangiosarcoma. I recommend CT evaluation in this patient. Ultrasound-guided FNA of both right and left liver lesions are recommended if accessible under sedation. 25-gauge FNA of the spleen can also be considered at this time.

ABOUT SONOPATH CT SERVICES:
SonoPath CT Services are offered at the SonoPath Imaging and Veterinary Education Center, 141 Main St (rt 206), Andover, New Jersey, a 20-minute drive west on route 80/206 North from the route 80/287 interchange/Parsippany, New Jersey. More information can be found at https://sonopath.com/services/vetimaging/

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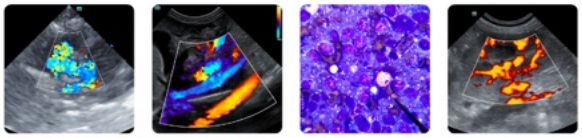

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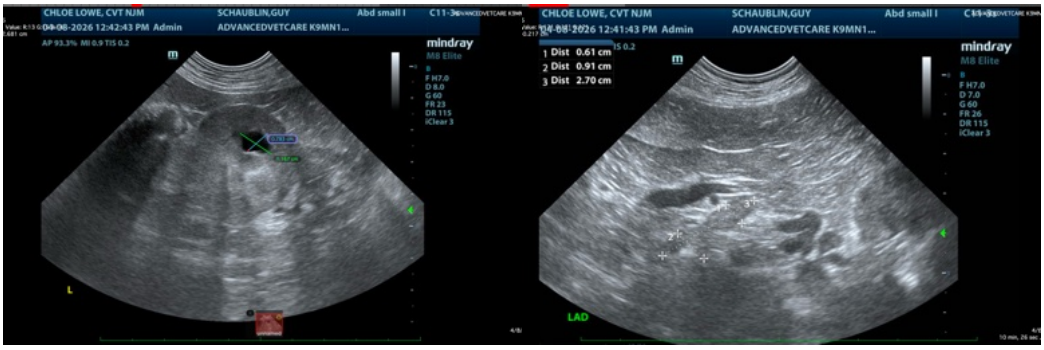

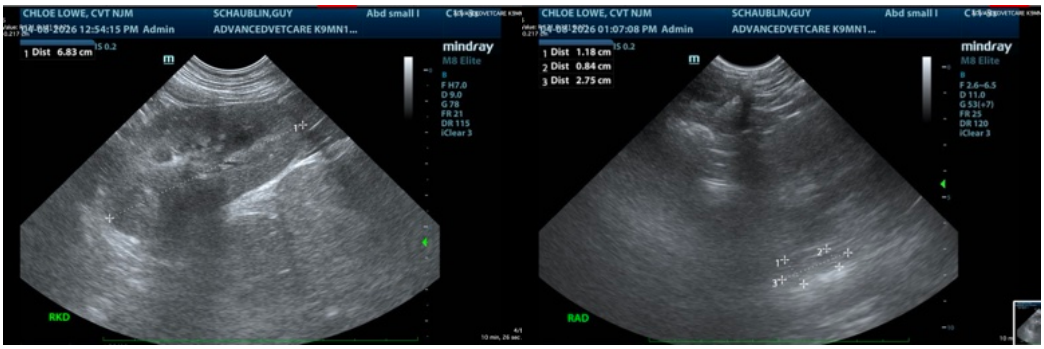

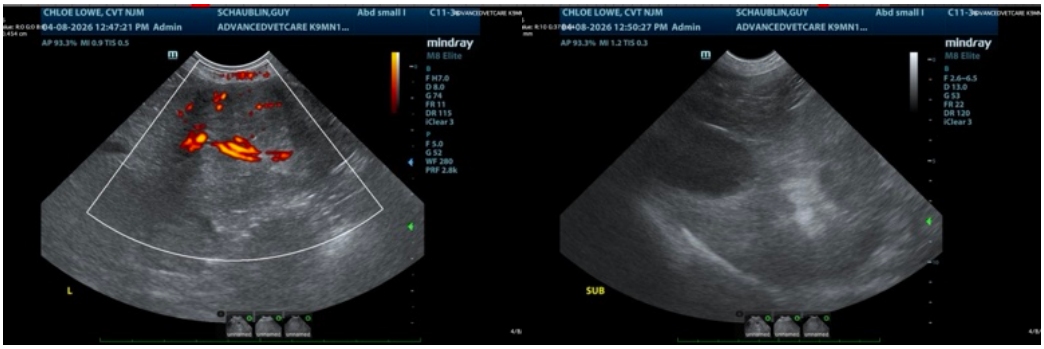

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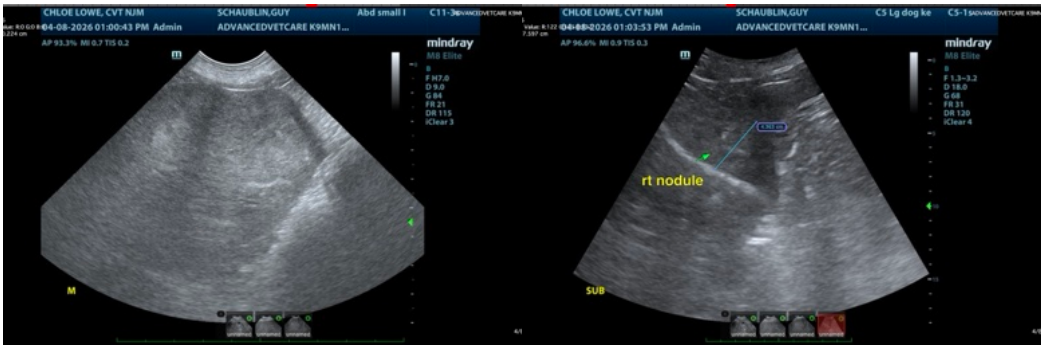

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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 (CFM), Cert. IVUSS, CEO of SonoPath.com

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