

**PATIENT**

Gunner SanGiorgio

**PRESENTING CLINICAL SIGNS**

History: Chronic diarrhea, inappetence for 3 days. R/O Sublumbar LN enlargement

**SPECIES**

Canine

**BREED**

German Shepherd

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder** and visible pelvic urethra were unremarkable for the level of repletion presented. The urine, however, did present some mildly echogenic debris consistent with mucous, exfoliated cells from renal or bladder origin, and/or blood clots as these echogenic changes can all present similarly. This is often related to urinary tract infection but may represent simple evidence of exfoliated debris or sterile inflammation. Cystocentesis, urinalysis, +/- culture would be recommended to rule out and define any UTI.

**SEX**

Neutered male

**AGE**

7 years

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The right kidney measured 7.22 cm. The left kidney measured 8.5 cm.

**WEIGHT**

86.8 lbs

**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 2.47 x 1.43 cm at the cranial pole and 0.7 cm at the caudal pole. The left adrenal gland measured 2.22 x 0.57 cm at the cranial pole and 0.47 cm at the caudal pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Diane McFadden, RVT

**Spleen**

The **spleen** was folded upon itself and was uniform.

**HOSPITAL NAME**

Newton VH

**Liver**

The left **liver** revealed a large cystic mass that measured 10+ cm with peripheral inflammation. This is consistent with biliary cyst with possible concurrent infection. The cystic lesion appeared to be somewhat precarious and is at risk for rupture. The cranial liver appeared unremarkable. The gallbladder presented acceptably thin walls with primarily anechoic content.

**REFERRING VET**

Dr. Kim

**INVOICE**

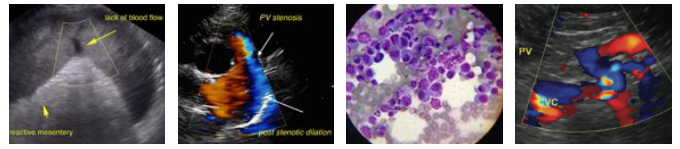
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**Gastrointestinal**

**DATE**

1/24/23

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.



**PATIENT** *Pancreas*

Gunner SanGiorgio

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.

**SPECIES**

Canine

*Free Abdomen*

**BREED**

German Shepherd

An iliac lymph node mass was noted and measured approximately 10.0 cm with areas of mineralization. This appeared to be solitary.

**SEX**

Neutered male

**ULTRASONOGRAPHIC FINDINGS**

Iliac/pelvic mass, likely of lymph node origin.

Complex liver cyst, potentially resectable.

**AGE**

7 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

CT of the abdomen and chest is recommended to assess for potential surgical planning +/- ultrasound-guided sampling given the precarious position of the mass as well as assess the thorax for metastatic disease. Ultrasound-guided drainage of the liver mass was performed without complication.

**WEIGHT**

86.8 lbs

**ABOUT SONOPATH CT SERVICES:**

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**SonoPath CT Services** are offered at the [Blairstown Animal Hospital](#). Blairstown animal hospital is just a 30-minute drive west on route 80 from the route 80/287 interchange/Parsippany, New Jersey. More information can be found at

<https://sonopath.com/resources/sonopaths-teleconsultation-services-and-sdep-certification/sonopath-ct-services>

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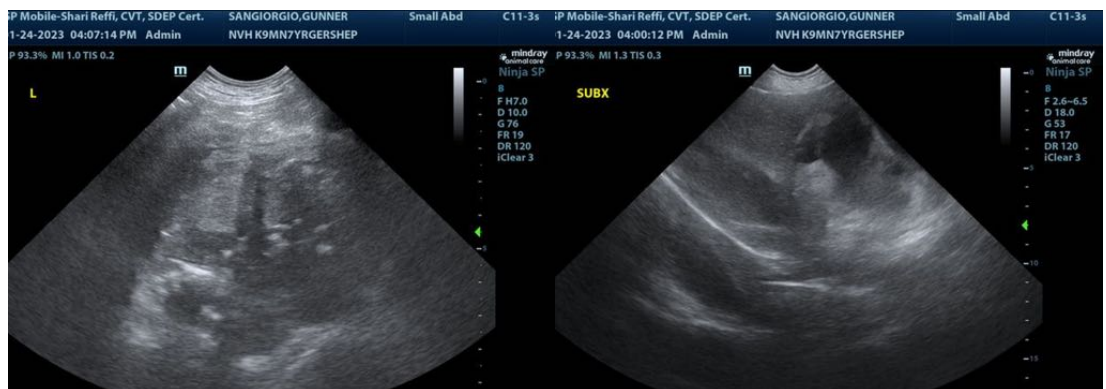
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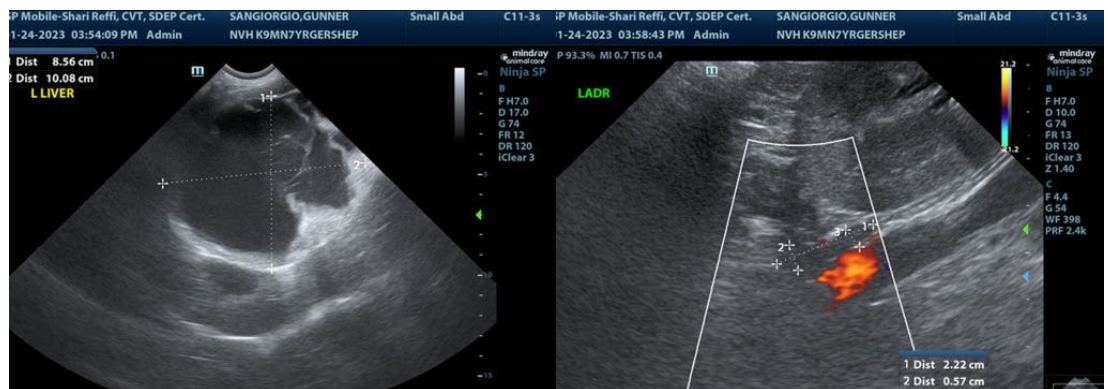
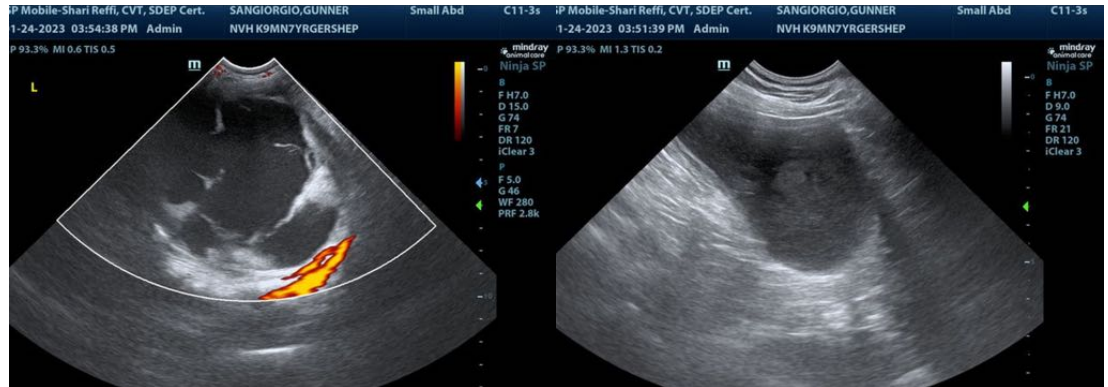
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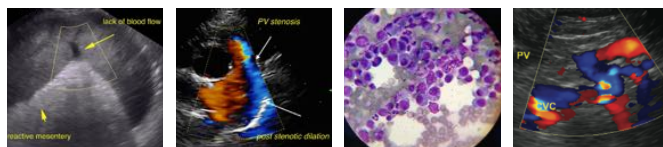
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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, Cert. IVUSS, CEO of SonoPath.com  
Info@SonoPath.com