



PATIENT

Marvin Delotto

SPECIES

Canine

BREED

Pug

SEX

Neutered male

AGE

11 years

WEIGHT

23 lbs

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jessica Miller, RDMS

HOSPITAL NAME

Millburn VH

REFERRING VET

Dr. Turowsky

INVOICE

39531

DATE

9/21/22

PRESENTING CLINICAL SIGNS

History: 6 month follow up scan to monitor splenic and hepatic nodules, P asymptomatic. Current meds: Galliprant

Abnormal PE/Chem/CBC/UA Results: 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 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 4.0 cm. The left kidney measured 3.93 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 1.92 x 0.38 cm at the caudal pole and 0.48 cm at the cranial pole. The right adrenal gland measured 1.54 x 1.07 cm at the cranial pole and 0.57 cm at the caudal pole.

Spleen

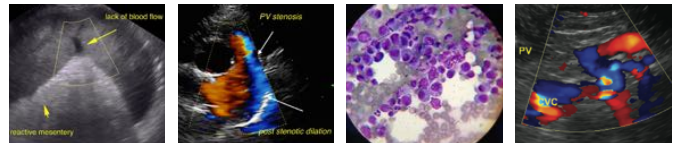
The **spleen** revealed a hypoechoic nodule that measured 0.9 x 0.63 cm.

Liver

The **liver** revealed a hyperechoic nodule that measured 1.9 cm in the right cranial liver adjacent to the diaphragm. The remainder of the liver presented mildly increased portal markings. 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



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

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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.

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ULTRASONOGRAPHIC FINDINGS

Stable hepatic nodule essentially. Likely nodular hyperplasia with a mild potential for underlying emerging carcinoma in the right cranial liver.

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Stable splenic nodule, hyperplasia, round cell neoplasia and emerging sarcoma is possible.

AGE

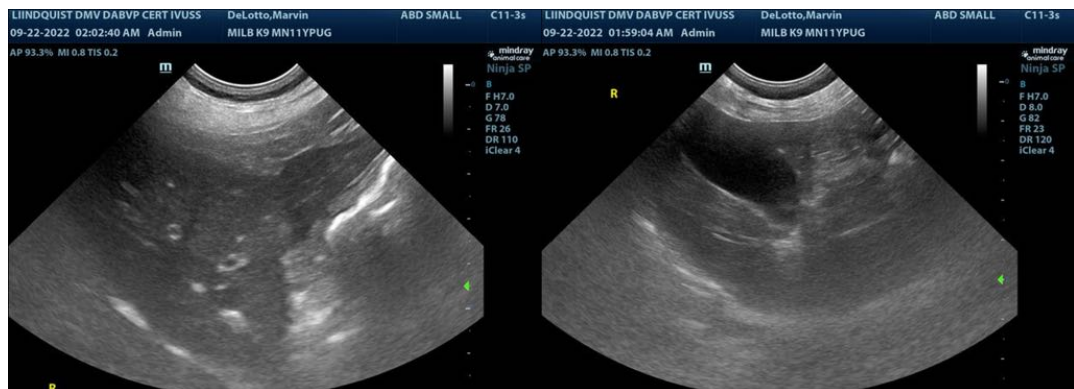
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The hepatic nodule should be monitored and if any growth occurs then FNA is indicated. Resection would be difficult in this region. Given that the nodules have not progressed they are likely benign.

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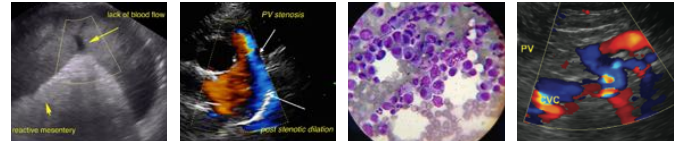
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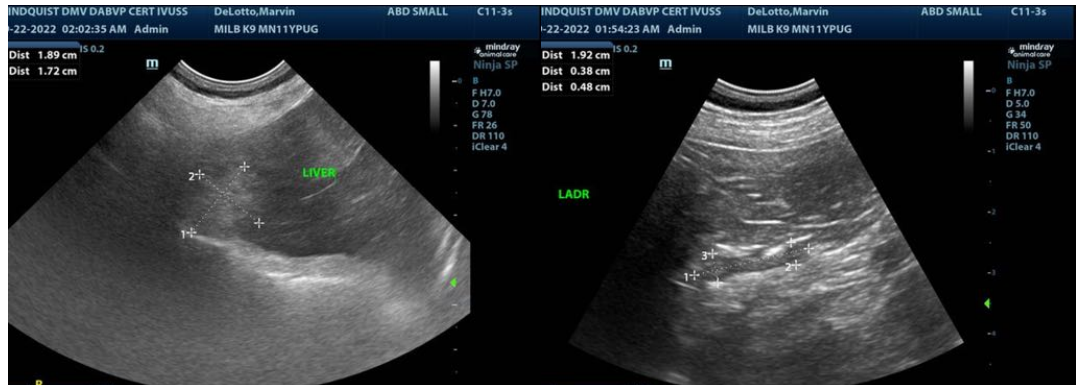
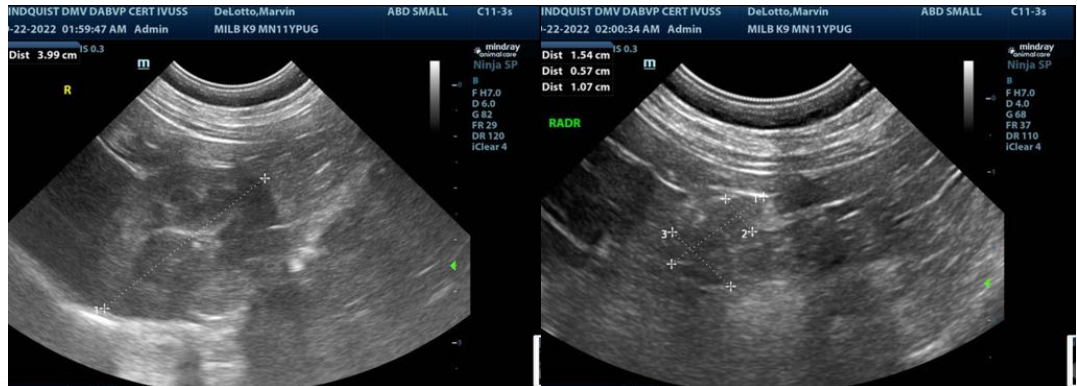
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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