



PATIENT

Stella Lucht

SPECIES

Canine

BREED

Pit Bull x

SEX

Spayed Female

AGE

10 Years

WEIGHT

63.8 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Tatum Stephens, LVT

HOSPITAL NAME

Rochester Veterinary
Hospital

REFERRING VET

Kelly Totin-Basye,
DVM

INVOICE

71738

DATE

11/12/25

PRESENTING CLINICAL SIGNS

Asymptomatic on presentation for PE on 5/21/25

Abnormal PE/Chem/CBC/UA Results: Elevated ALP at 711 (May 2025), up from 184 in 2023 (966 on 11/6/25 BW) Normal LDDST in June 2025 Urine normal with USG 1.053 in June 2025, 1.052 on urine ran today

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

The left kidney appears normal in size and shape, measuring 6.85 cm. No focal lesions are discerned, and there is no evidence of significant pyelectasia. Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney appears normal in size and shape, measuring 6.66 cm. No focal lesions are discerned, and there is no evidence of significant pyelectasia. Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is not visualized.

The right adrenal gland is not visualized.

Spleen

The spleen is large and irregular. The blood flow through the hilus and splenic parenchyma appears normal. There is a slightly mixed echogenicity mass effect visualized in the mid body of the spleen measuring 5.36 cm x 5.31 cm. Cranially it is difficult to discern if there is a poorly visualized mixed echogenicity mass effect in the mid cranial abdomen arising from possibly the liver or spleen, measuring approximately 8.52 cm x 5.18 cm.

Liver

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are mild and likely incidental at this time. The cystic and common bile ducts are normal/not visible.



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Gastrointestinal

The stomach is visualized and has a moderate amount of intraluminal gas, with gas artifact preventing full evaluation of the stomach and some areas of the cranial abdomen.

Some of the visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. Duodenum wall measures 0.46 cm. Jejunum wall measures 0.30 cm. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The area of the pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

ULTRASONOGRAPHIC FINDINGS

- Large, irregular spleen with a mixed echogenicity mid body mass effect – A focal solid mixed echogenicity mass is visualized associate with the spleen. This mass distorts the splenic capsule. Differentials include : benign lesions (lymphoid hyperplasia, hemangioma etc..) or cancerous lesions (hemangiosarcoma, lymphoma, histiocytic sarcoma etc..)
- Suspect mid abdominal mass effect. Poor resolution makes this difficult to discern. This could represent a splenic or hepatic lesion or other.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The spleen appears large and irregular with a mixed echogenicity mid abdominal mass lesion. In the cranial to mid abdomen there is the appearance of abnormal mixed echogenicity tissue. Poor resolution in this area makes it difficult to discern the origins and nature of this tissue. The visible areas of liver appear relatively normal, but a hepatic mass lesion cannot be ruled out. Recommend a contrast CT scan to further evaluate and to determine if surgical evaluation is warranted. A fine needle aspirate of the mid body splenic mass lesion could be considered.

Recommend three view thoracic radiographs to evaluate for possible concurrent thoracic disease/involvement (disregard if this has already been done).



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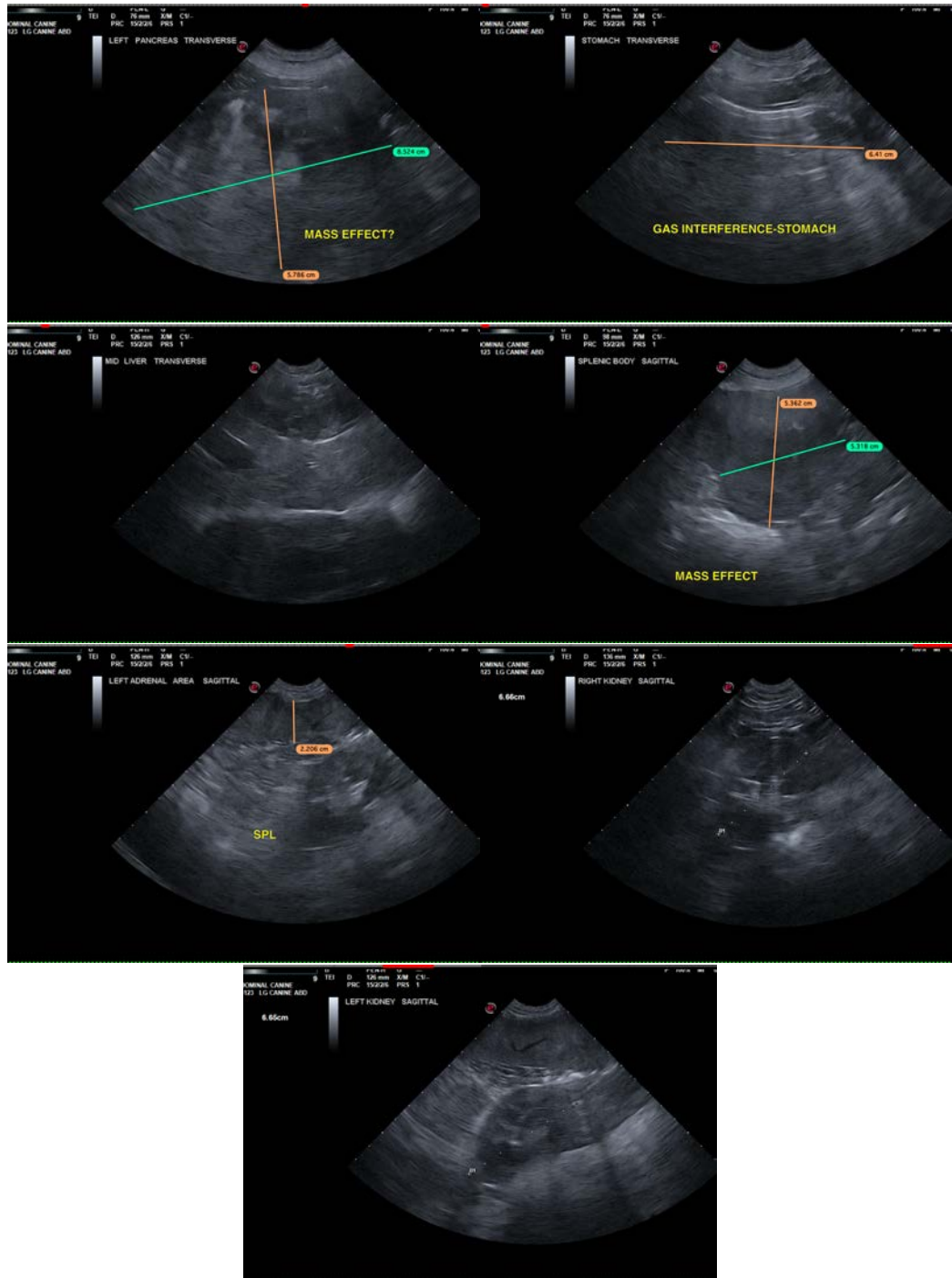
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

info@sonopath.com