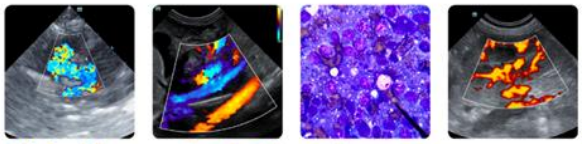


PATIENT

River Legerski

SPECIES

Canine

BREED

English Bulldog

SEX

FS

AGE

8yr

WEIGHT

41.6lb

INTERPRETED BY

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY

Dr. Ackmann

HOSPITAL NAME

Buffalo Veterinary Clinic

REFERRING VET

Big Goose Veterinary Clinic

INVOICE
24265

DATE
03/23/2026

PRESENTING CLINICAL SIGNS

Presented for wellness and DVM palpated abdominal mass on PE. Noted possible periodic "episodes" of acting off/painful after exercise. Weight loss noted; however, patient is on a weight loss diet. Currently on Rimadyl and Yunnan Bai Yao.

Abnormal PE/Chem/CBC/UA Results: PE: large mass in mid abdomen. Arads: large mid abdominal mass, suspect abdominal effusion, mineral within the left aspect of the liver is suspected to represent mineral within a displaced gallbladder, small amount of granular mineral intestinal foreign material. Trads: no pulmonary metastasis. CBC: non-regenerative anemia (RBC 4.11, HCT 29.5, HGB 10.4, retic-HGB 22.3, retic 64.9) chem: elevated glob (5.2)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN AND LIMITED CARDIAC

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 5.9 cm in length. The right kidney measured 6.0 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

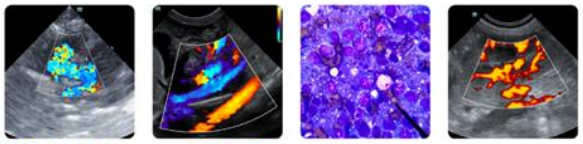
The area of the left adrenal gland was free of pathology. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.8 cm width at the caudal pole.

Spleen

A large mass involving the spleen with secondary asymmetrical capsule expansion and disruption was present. The splenic mass measured 14 - 15 cm in diameter, but possibly larger as the entire mass would not fit into a single viewing window. The parenchyma of the mass was heterogeneous to mixed echogenic with areas of cavitation. The non-affected spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Regional omental inflammation and minor effusion was present around the mass.

Liver/Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and mild non-organized debris. The cystic and common bile ducts were normal.



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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild non-shadowing ingesta sonographically suggestive of food echogenicity with no signs of obstruction or foreign material.

The visualized segments of the small intestine were sonographically normal.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

Free Abdomen/Cardiac

Associated mild perisplenic hyperechoic omentum and minor effusion.

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window. Subjective adequate LV systolic function and normal left and right chamber dimension. No overt arrhythmia.

ULTRASONOGRAPHIC FINDINGS

Primary

- Splenic mass
- Associated perisplenic hyperechoic omentum and minor effusion
- Sonographically normal liver
- Mild gallbladder debris
- Subjective normal cardiac structure / function

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The splenic mass is nonspecific with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other).

Obvious sonographic evidence of major organ or cardiac metastasis was not overtly evident. Non sonographically evident metastasis / micrometastasis cannot be definitively excluded. If no pathology on thoracic radiographs, splenectomy with gross inspection of the perisplenic omentum and abdominal cavity is warranted.

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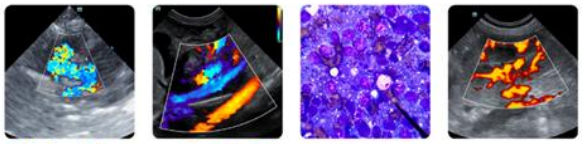

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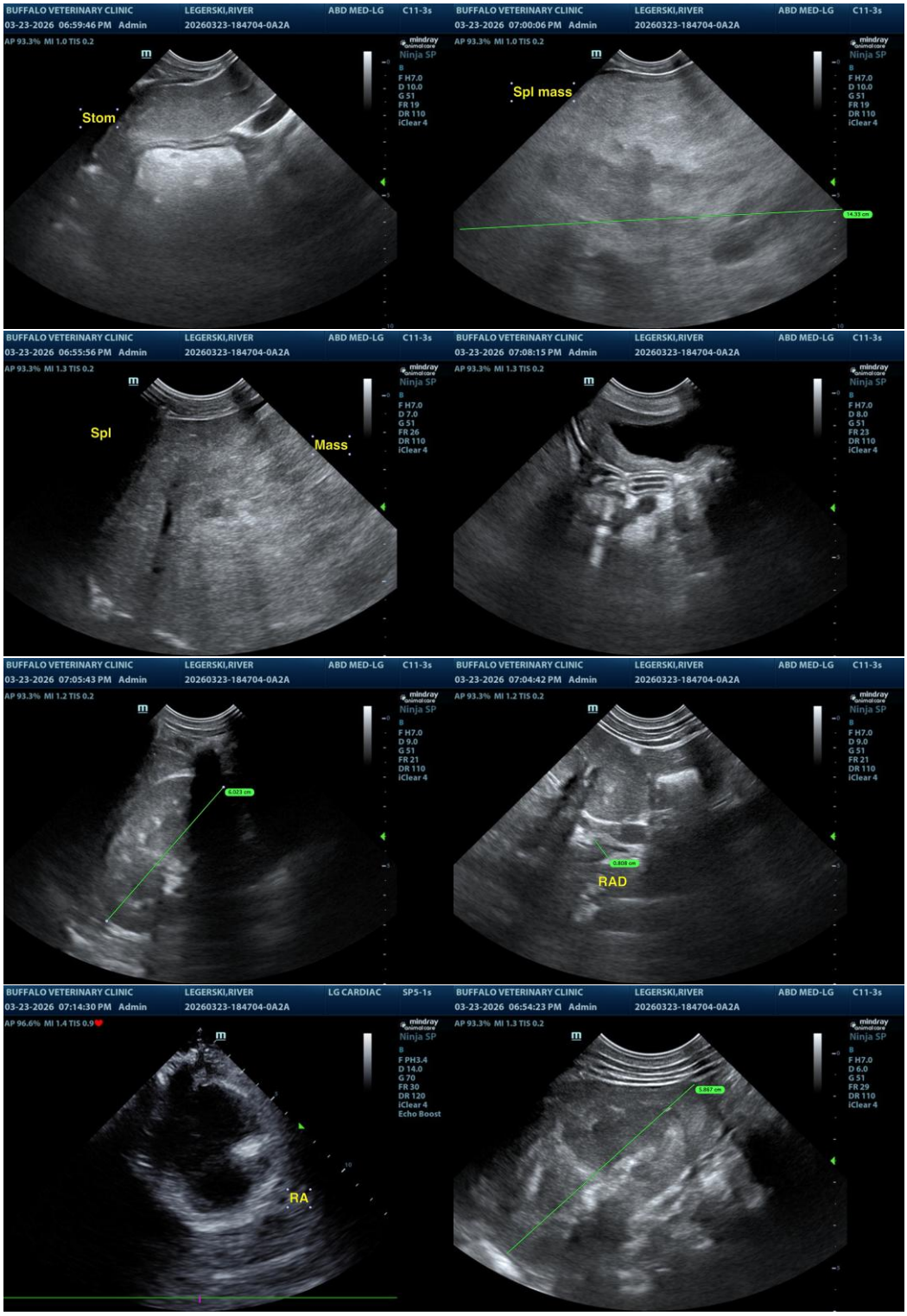

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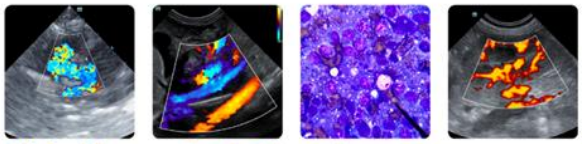

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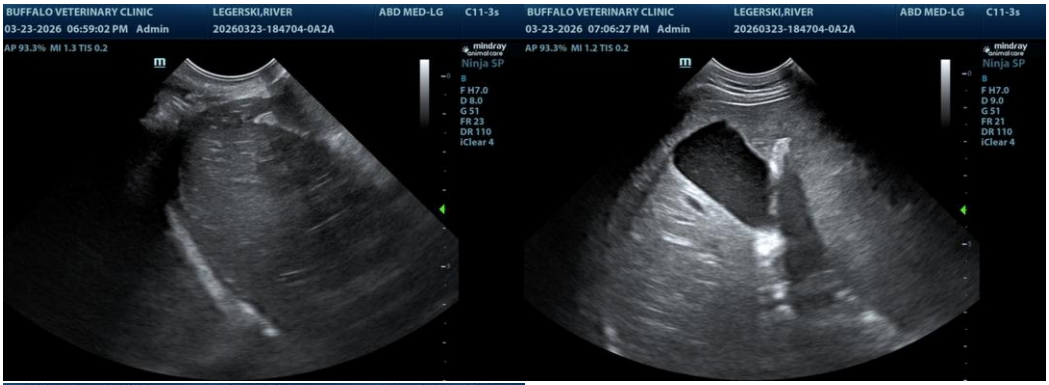

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@sonopath.com