



## PATIENT

Harley Lang

## SPECIES

Canine

## BREED

Golden Retriever

## SEX

MN

## AGE

13Y

## WEIGHT

63.2

## INTERPRETED BY

Nele Eley (Ondreka),  
DVM Dr. med. vet.,  
DipECVDI

## IMAGING PERFORMED BY

Agnes E. Rupley, DVM

## HOSPITAL NAME

All Pets Medical  
Center

## REFERRING VET

Agnes E. Rupley, DVM

## INVOICE

74005

## DATE

3-2-26

## PRESENTING CLINICAL SIGNS

- Rads submitted for concern for mass caudal to the kidneys on lateral view.
- Hyporrhexia and chronic weight loss.
- History:
  1. Glaucoma/bilateral enucleation
  2. mitral valve thickened vegetative echo 9/10/25
  3. MRI and CT 10/3/2025 Conclusions:
    - a. L7-S1 intervertebral disc protrusion with suspected mild compression cauda equina and left foraminal stenosis
    - b. Multifocal chronic thoracolumbar disc degeneration and noncompressive
    - c. Hypointense splenic nodules
    - d. Mild bilateral sacroiliac and minimal hip osteoarthritis.
    - e. Mild internal iliac lymphadenopathy
  4. Microscopic hematuria - cystoscopy neg
  5. CKD 1/4
  6. Bilateral enucleation secondary to glaucoma
  7. Chronic hind limb weakness with loss of proprioception
  8. Atopic dermatitis
  9. Hypothyroidism
- Gallbladder inflammation noted on abdominal ultrasound today. Ultrasound guided aspiration of the gallbladder performed. Cytology revealed cocci in chains. Sample submitted for bacterial culture and susceptibility. AmoxiClav begun.
- MEDS: Gabapentin, Biomega, Immune Plus Provable, GlycoFlex, Immunotherapy, UC-II, Cerumene, Malaket with TrizEDTA & burrows solution weekly, Tramadol, Prednisone, Amantidine, Maropitant, Thyroxine, Entyce
- EXAM b/s 3/9. Normothermic. Pain on deep muscle palpation of lumbar spine and hips. Lacks proprioception and muscle atrophy in rear limbs.
- LABS: TLI, PLI, folate normal. Cobalamin low. ProBNP < 500. Normal CBC and chemistry / triglycerides 107. Urinalysis protein 100, rbc 10-15/hpf. PT and aPTT normal.

## RADIOGRAPHIC STUDY OF THE ABDOMEN

Lateral and ventrodorsal views of the abdomen totaling 4 images available for review.

## RADIOGRAPHIC FINDINGS

The patient is in thin body condition.

An ovoid, well defined, soft tissue opacity is noted in the mid abdomen in a retroperitoneal position on one lateral projection. This structure is not clearly visualized on other projections.

The kidneys appear generally normal on the available images.

No definitive other mass lesions emerging from the liver or spleen are seen.

Spondyloses are noted at L1 through L4 and L6/7 as well as L7/S1.

The abdominal serosal detail is maintained.



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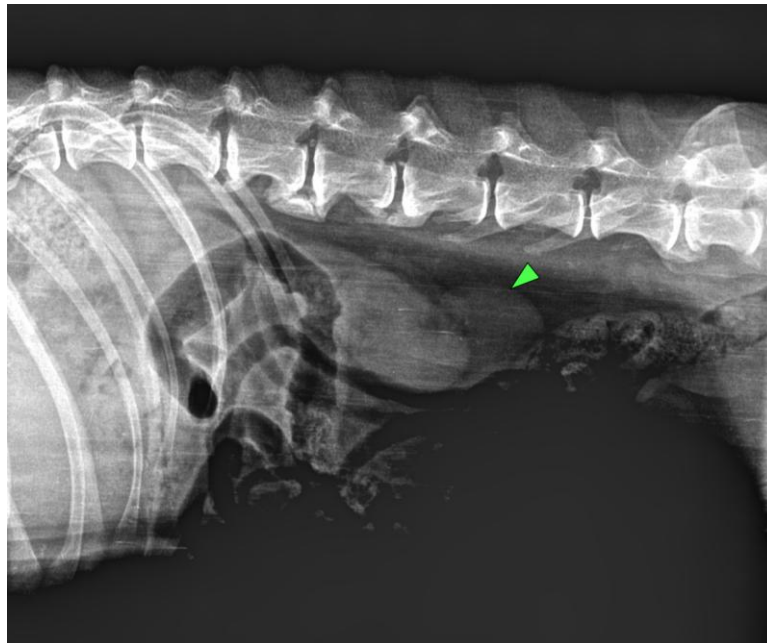
3-2-26

## RADIOGRAPHIC DIAGNOSIS

- Dorsal soft tissue opacity in mid abdomen on lateral view likely retroperitoneal in location.
- Chronic spondyloses L1-L4 and L6/7 and S1.

## INTERPRETATION OF FINDINGS & FURTHER RECOMMENDATIONS

The mid abdominal soft tissue opacity in a retroperitoneal location cannot be confidently identified. Differential includes caudally positioned kidney vs retroperitoneal lymph node or other soft tissue mass. Further imaging is recommended, preferably abdominal ultrasound. Repeat radiographs in additional projections if ultrasound is not immediately available could be considered as well. Consider CT of the abdomen with contrast if ultrasound is inconclusive.



The information and recommendations provided are based on the images presented by the referring veterinarian. 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.

**Nele Eley (Ondreka)**, DVM, Dr. med. vet., DipECVDI

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