



PATIENT

Pepper Neubauer

SPECIES

Canine

BREED

Labrador Mix

SEX

Female

AGE

14 years

WEIGHT

23.2 kg

INTERPRETED BY

Remo Lobetti, BVSc,
MMedVet (Med),
PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Dr. Hennigan

HOSPITAL NAME

Mattydale AH

REFERRING VET

Dr. Leshkivich

INVOICE

73552

DATE

3/18/26

PRESENTING CLINICAL SIGNS

- Acute onset of lethargy 3/16/26
- PE 3/17/26 pale mm, distension of abdomen
- Rads show free abdominal fluid, single mass in thorax
- Abdominocentesis: non-clotting blood
- 3/17/26 - PCV 30% TP 7.6gm/dL

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is full with a normal thickness and smooth appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size (left measured 6.2 cm, right measured 6.1 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Normal color flow pattern is evident in both kidneys.

Adrenal Glands

The left adrenal gland had a rounded, hypoechogenic mass measuring 2.5 x 2.8 cm in size maintaining normal position and appearance of the visible periadrenal vasculature. The right adrenal gland was not visualized.

Spleen

The spleen revealed a large, irregular, mottled echogenic mass that measured 5.0 x 7.0 cm and originated in the head of the spleen. The rest of the spleen is of normal size (1.8 cm in width) with a normal echogenic appearance, smooth homogenous parenchyma and a regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident.

Liver

The liver is enlarged with a mottled echogenic, coarse and nodular appearance, decreased portal markings, and an irregular capsule. No overt masses evident. Normal appearance of the hepatic and portal vasculature.



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Gallbladder

The gallbladder is full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen.

Pancreas

The pancreas was not visualized.

Free Abdomen

Normal mesenteric lymph nodes.

A small amount of ascites present.

Hyperechogenic appearance of the mesentery surrounding the liver and the splenic mass.

ULTRASONOGRAPHIC FINDINGS

- Splenic mass.
- Nodular hepatopathy.
- Ascites.
- Left adrenal mass.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

With the splenic mass, the appearance of the liver and the presence of a thoracic mass, the most likely diagnosis would be metastatic neoplasia.

The ascites would be consistent with hemoabdomen as per the patient's history and can be ascribed as secondary to the splenic mass.

Etiologies for the left adrenal mass would be non-functional or functional carcinoma and possibly a pheochromocytoma.

A metastatic nodule would be a less likely differential diagnosis.

Further assessment that could be considered would be FNA cytology of the liver, splenic mass and left adrenal mass.

At this point palliative therapy is most likely indicated.



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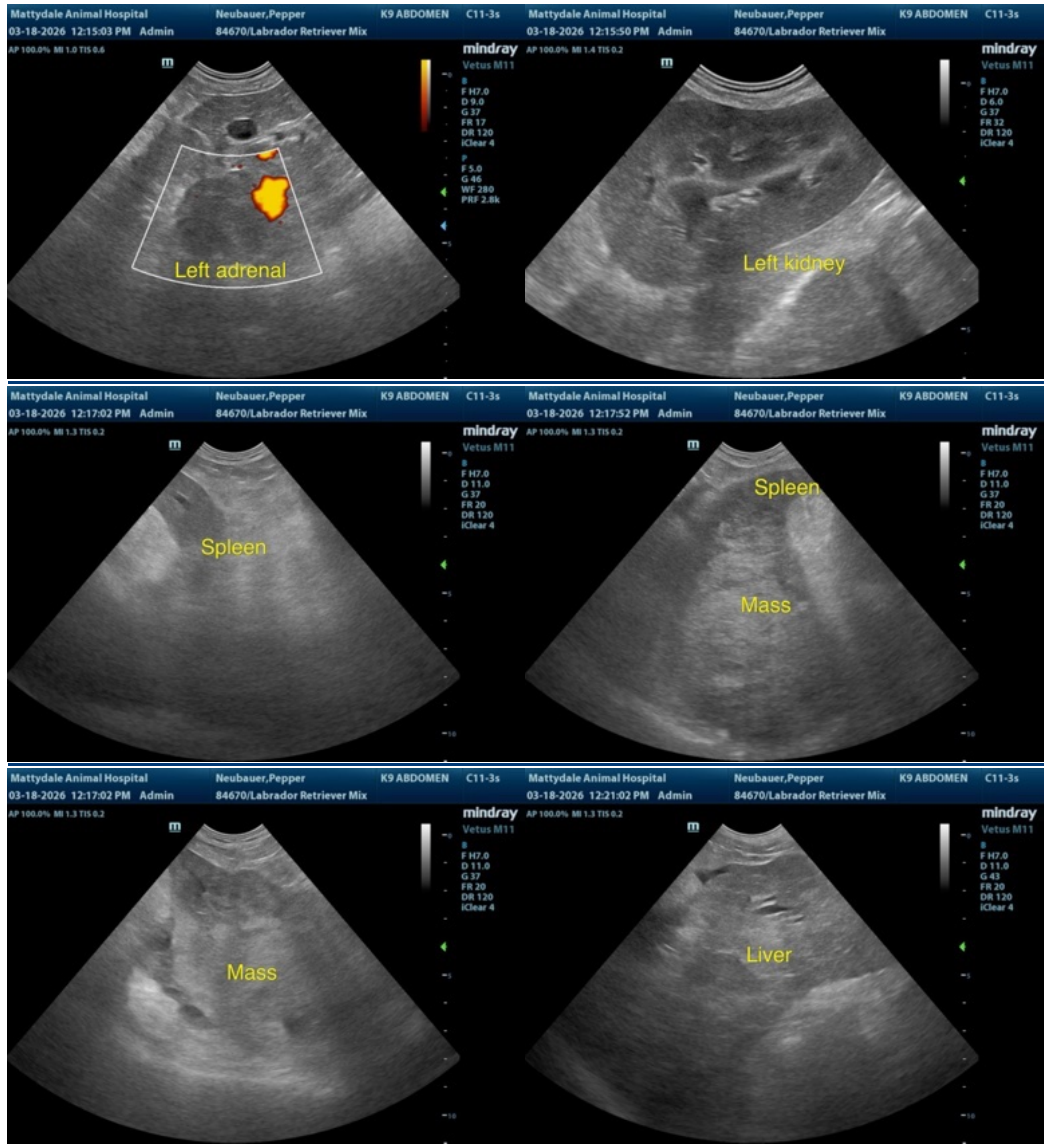
Dr. Leshkivich

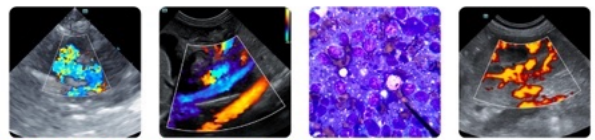
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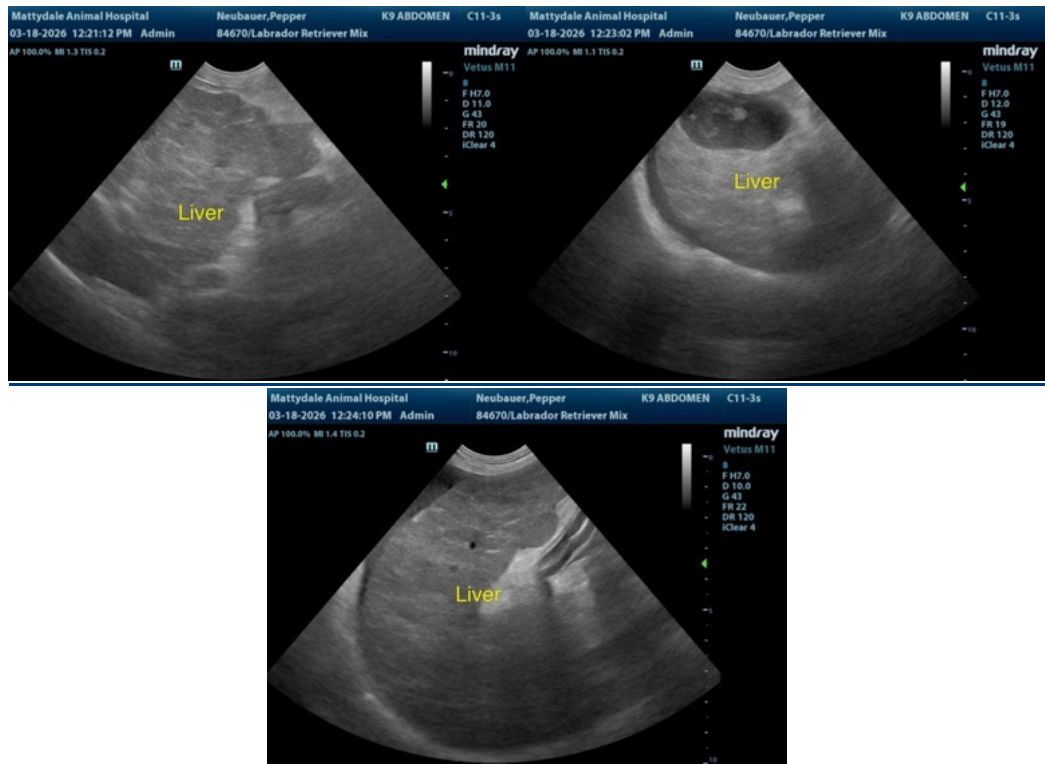
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)

info@sonopath.com