



## PATIENT

Shadow Hughes

## SPECIES

Canine

## BREED

Labrador

## SEX

Spayed Female

## AGE

12 Years

## WEIGHT

22 kg

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Azizi

## HOSPITAL NAME

Eagleson Veterinary  
Clinic

## REFERRING VET

Dr. Heni

## INVOICE

16021

## DATE

05/09/26

## PRESENTING CLINICAL SIGNS

Elevated hepatic enzyme. Anemia. diarrhea anorexia

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

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

The kidneys were not visualized.

### Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. The left adrenal gland measured 2.29 cm length x 0.52 cm and 0.57 cm in width. The right adrenal gland was not visualized.

### Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident. The spleen measured 1.5 cm in width.

### Liver

Large, irregular, poorly defined, mottled echogenic mass in the left lobe, measuring approximately 4.0 cm x 8.0 cm in size. The rest of the liver is of normal size, maintaining a normal echogenic appearance, normal portal markings and a regular curvilinear capsule. No nodules or additional masses evident.

### Gallbladder

Not visualized.

### 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

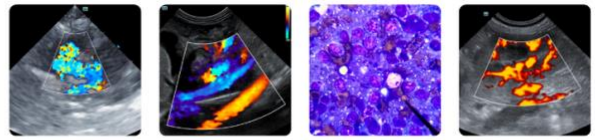
Not visualized.

### Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

## ULTRASONOGRAPHIC FINDINGS



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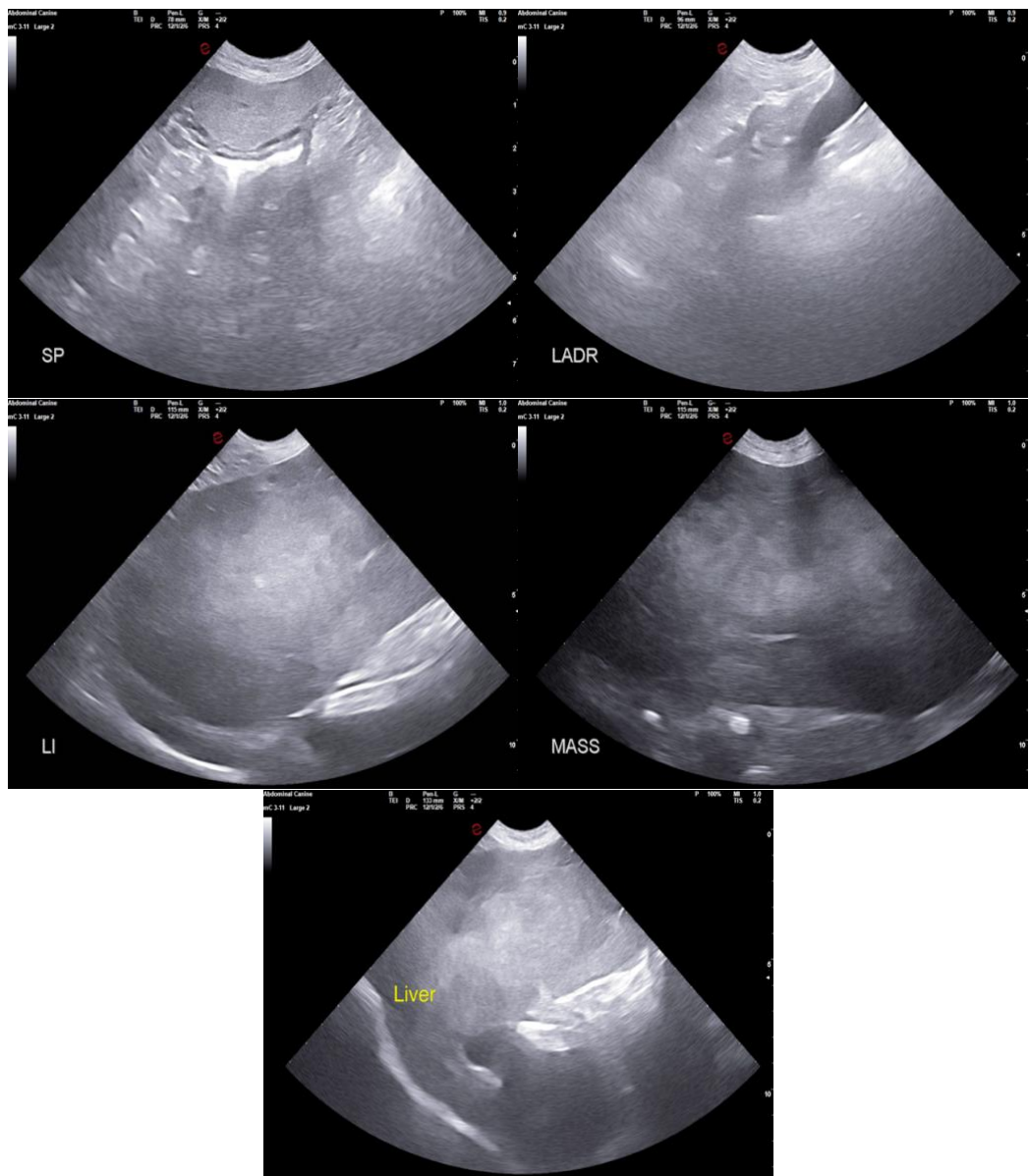
- Hepatic mass.

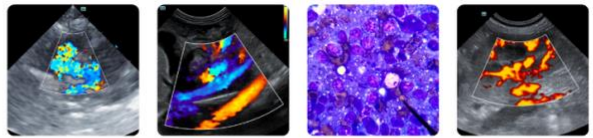
**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The most likely etiology for the hepatic mass would be neoplasia, such as primary hepatocellular carcinoma, with organized hematoma and granuloma less likely differential diagnoses.

Further assessment would be 3-view thoracic radiographs and FNA cytology of the mass, A Tru-Cut or wedge biopsy of the mass may, however, be required for a final etiological diagnosis.

If surgery is being contemplated for the hepatic mass, then a CT scan would be recommended.





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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)**

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