



PATIENT

Lily Bolick

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Spayed female

AGE

10 years

WEIGHT

12.3 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Ginny Dodd, DVM

HOSPITAL NAME

Ironton AH

REFERRING VET

Dr. Creech

INVOICE

71267

DATE

2/5/26

PRESENTING CLINICAL SIGNS

- Seen for dental concerns when a cranial abdominal mass was palpated, 1/6 heart murmur ausculted
- CBC- >MCV, ^plt CHEM- ALT 621, AST 70, ALP 8187, GGT 47, chol 418, Creatine Kinase 294 Coag- PT and PTT wnl, fibrogen ^ 418
- Abd rads- L and R lat abd- hepatomegaly, stomach displaced dorsally and on VD it is displaced laterally and mass extends caudal to the stomach

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is small 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 4.1 cm, right measured 4.6 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

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 1.15 cm in length x 0.28 cm and 0.43 cm in width. The right adrenal gland measured 0.52 cm and 0.52 cm in width.

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 1.6 cm in width.

Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. Large, irregular, mottled echogenic, infiltrative mass in the left lobe measuring 5.0 x 8.0 cm in size. Few, hypoechogenic non-vascularized, parenchymal nodules measuring 1.0 cm in size. Normal appearance of the hepatic and portal vasculature. An FNA was obtained of the mass.



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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 visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Hepatic mass.
- Hepatic nodules.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The most likely etiology for the hepatic mass would be neoplasia with granulomatous disease a less likely differential diagnosis.

Etiologies for the hepatic nodules would be incidental nodular hyperplasia, granulomatous disease and possibly metastatic neoplasia.

Further assessment would be based on the pending cytology results.

If surgery is being contemplated then a CT scan would be recommended.



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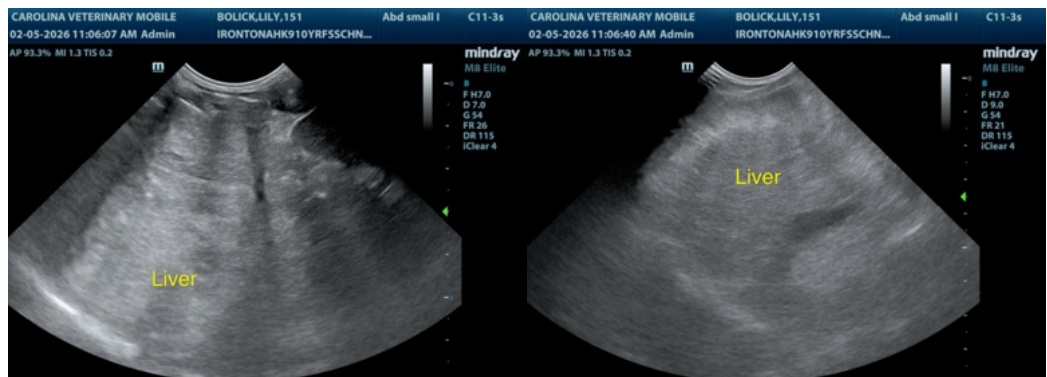
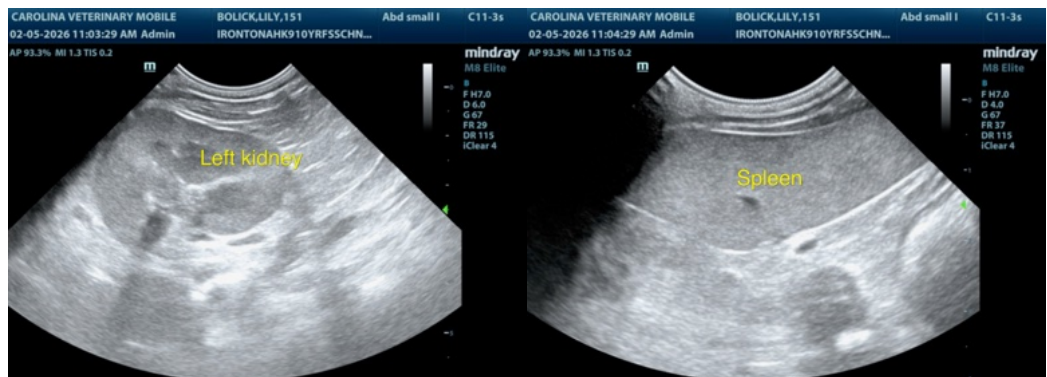
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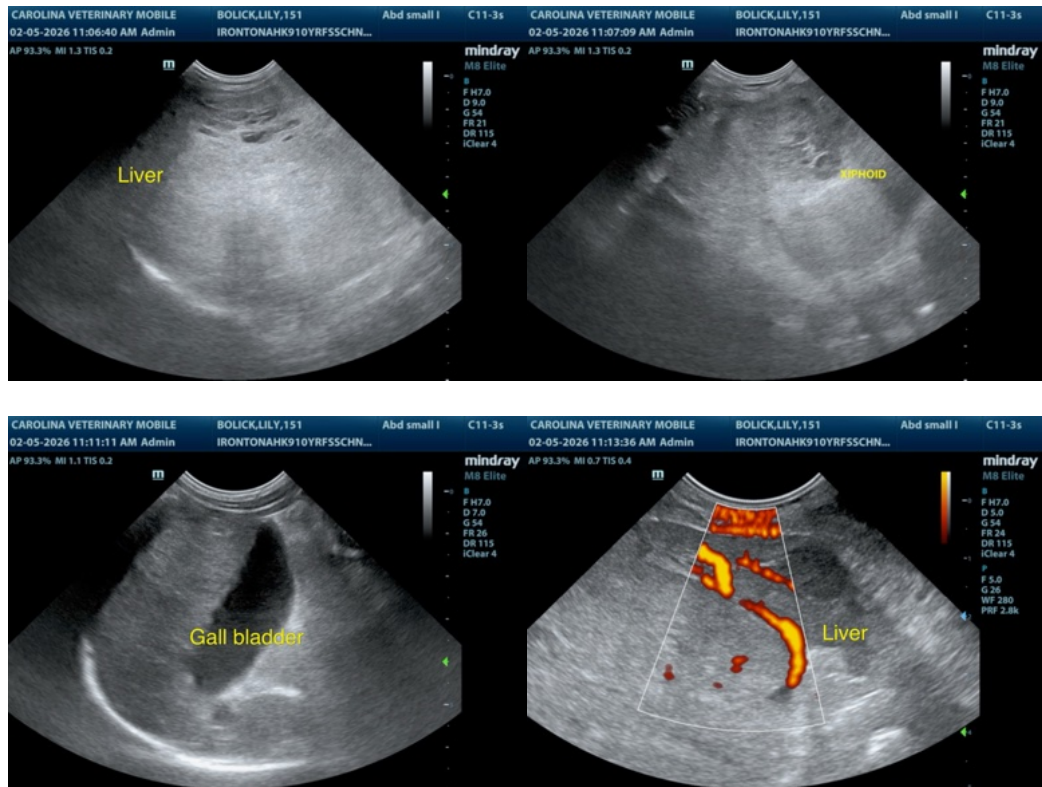
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

info@sonopath.com