



PATIENT

Sam Wardenski

SPECIES

Canine

BREED

Shiba Inu

SEX

Neutered Male

AGE

11 Years

WEIGHT

37 lbs

INTERPRETED BY

Alicia Angosto
Guerrero, DMV,
PgDip, MSc.

IMAGING PERFORMED BY

Amanda Hockenbrock

HOSPITAL NAME

Lewisburg Veterinary
Hospital

REFERRING VET

Dr. Meghan Facer

INVOICE

72420

DATE

1/23/26

PRESENTING CLINICAL SIGNS

Patient PE WNL. Owner requests ultrasound due to losing other pet to splenic mass. Owner not having any concerns with patient.

Abnormal PE/Chem/CBC/UA Results: WNL

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder lumen is normally distended. The bladder wall appears thin and smooth. The urine is anechoic. The bladder neck and proximal urethra have a normal ultrasonographic appearance. No uroliths are identified, and there is no ultrasonographic evidence of inflammatory or neoplastic changes.

The left kidney is normal in shape and size, measuring 4.71×2.34 cm. Cortical thickness measures 0.51 cm in the sagittal plane. The renal cortex is isoechoic relative to the liver parenchyma. The corticomedullary ratio is within normal limits, and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis. Color Doppler evaluation demonstrates a normal vascular pattern.

The right kidney is normal in shape and size, measuring 4.65×2.51 cm. Cortical thickness is not recorded. The renal cortex is isoechoic relative to the liver parenchyma. The corticomedullary ratio is within normal limits, and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis. Color Doppler evaluation demonstrates a normal vascular pattern.

The prostate measures 2.08×1.45 cm, is small in size, and appears hypoechoic, findings compatible with prostatic atrophy in a neutered male dog.

Adrenal Glands

The left adrenal gland measures 0.51 cm at the cranial pole and 0.58 cm at the caudal pole. The right adrenal gland is not visualized.

Spleen

Splenic thickness measures 1.17 cm. The splenic parenchyma demonstrates normal echogenicity with a fine, homogeneous echotexture and no focal parenchymal abnormalities. The splenic capsule is smooth and regular.

Liver

The liver is subjectively normal in size, with sharp margins and a smooth, regular contour. The hepatic parenchyma is uniform and isoechoic relative to the falciform fat, with a normal echotexture. No hepatic lymphadenopathy is identified.

The gallbladder lumen is normally distended. The gallbladder wall is thin, and the contents are anechoic. There is no ultrasonographic evidence of dilation of the cystic duct or common bile duct.

Gastrointestinal

The stomach is empty and folded, with intraluminal gas, preserved wall layering, and a mural thickness of 2.07 mm. The pylorus measures 4.77 mm.



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Duodenum: mural thickness 3.41 mm.
Jejunum: mural thickness 2.59 mm, with preserved wall layering.

No ultrasonographic evidence of gastrointestinal inflammation, ileus, or foreign material is identified. The colon wall measures 0.77 mm, with formed fecal material present in the descending colon.

Pancreas

The evaluated portions of the pancreas do not show ultrasonographic evidence of overt inflammation.

Free Abdomen

No abdominal effusion or sonographic evidence of peritonitis is identified. Cranial mesenteric and ileocecal lymph nodes are not visualized, and the surrounding regions appear unremarkable. Medial iliac lymph nodes measure 4.62–4.69 mm and have normal shape and echogenicity. The iliac trifurcation has a normal appearance.

PRIMARY FINDINGS

- None identified.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This abdominal ultrasound examination is unremarkable, with preservation of normal organ size, architecture, and echogenicity throughout the abdomen. No focal masses or parenchymal abnormalities are identified.

The spleen is normal in size and echotexture, with no sonographic features suggestive of nodular disease or mass formation. Given the owner’s concern due to a history of splenic disease in another pet, it is important to note that no ultrasonographic evidence of splenic pathology is present on this study.

Overall, this study does not reveal any ultrasonographic abnormalities to explain clinical disease, and in the context of an asymptomatic patient, the findings are consistent with a normal screening abdominal ultrasound.

Recommendations:

Continued reassurance of the owner is appropriate, as no evidence of splenic or abdominal pathology is identified on this examination.





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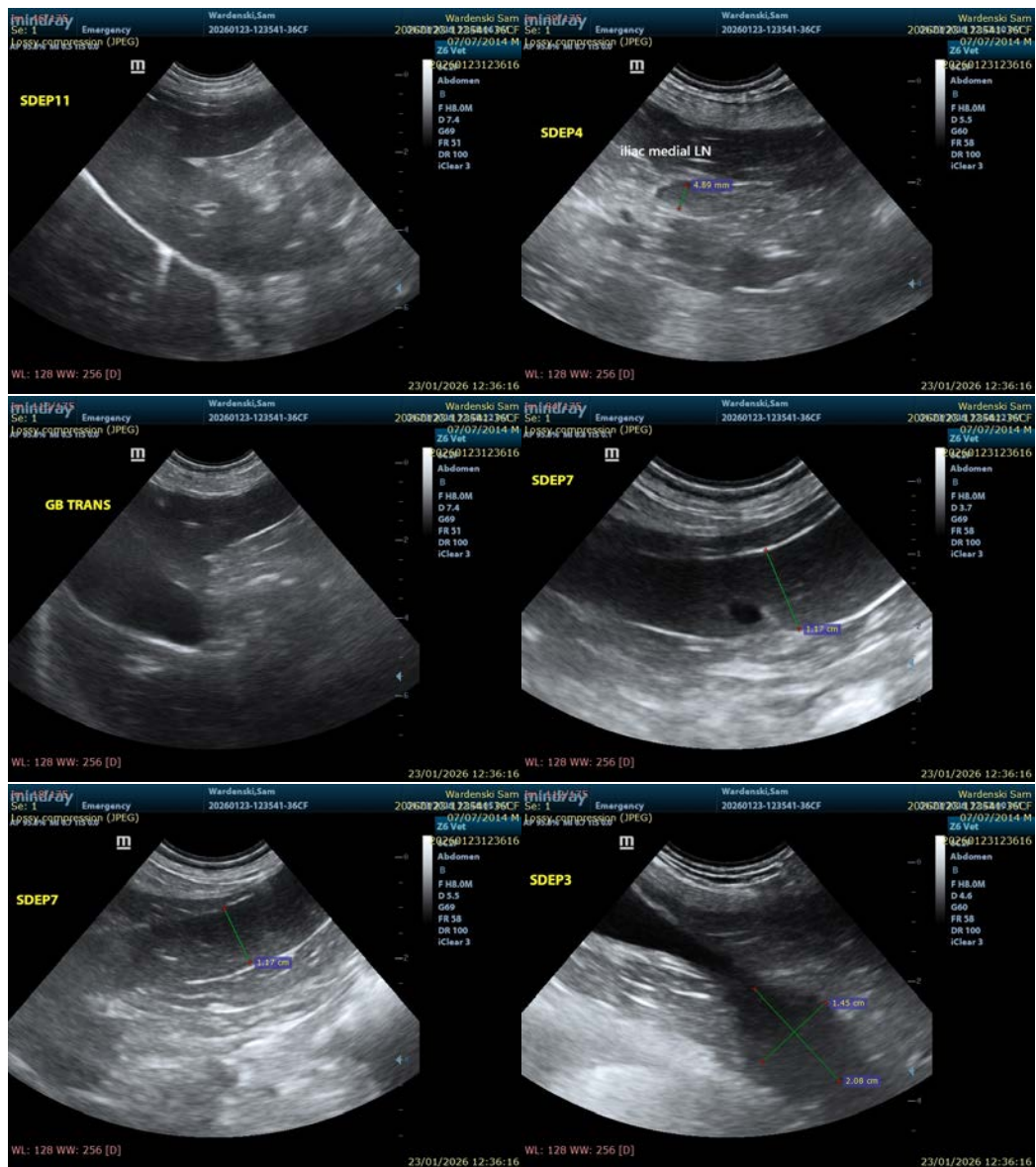
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Alicia Angosto Guerrero, DMV, PgDip, MSc.

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