



PATIENT

Riot Alexander

SPECIES

Canine

BREED

Pitbull

SEX

Spayed female

AGE

8 years

WEIGHT

55 lbs

INTERPRETED BY

Dr. Alicia Angosto
Guerrero

IMAGING PERFORMED BY

Catherine Alexander,
LVT

HOSPITAL NAME

North Star VS

REFERRING VET

Dr. Harberson

INVOICE

71068

DATE

1/29/26

PRESENTING CLINICAL SIGNS

- Preemptive general screening
- History of dietary indiscretion
- no current clinical signs or concerns

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder lumen is normally distended. The urinary bladder wall is thin and smooth. The urine is anechoic. The bladder neck and proximal urethra have a normal 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 6.22×3.18 cm. Cortical thickness is 0.40 cm in the sagittal plane. The renal cortex is isoechoic relative to the hepatic parenchyma. The corticomedullary ratio is within normal limits, and corticomedullary definition is preserved. No pyelectasia, nephroliths, or hydronephrosis are identified.

The right kidney is normal in shape and size, measuring 6.11×2.95 cm. Cortical thickness is 0.39 cm in the sagittal plane. The renal cortex is isoechoic relative to the hepatic parenchyma. The corticomedullary ratio is within normal limits, and corticomedullary definition is preserved. No pyelectasia, nephroliths, or hydronephrosis are identified.

Adrenal Glands

Both adrenal glands have a normal shape and echogenicity. The left adrenal gland measures 0.49 cm at the cranial pole and 0.49 cm at the caudal pole. The right adrenal gland measures 0.35 cm at the cranial pole and 0.44 cm at the caudal pole.

Spleen

Splenic thickness measures 2.11 cm. The splenic parenchyma has normal echogenicity and a fine homogeneous echotexture, with a small focal hypoechoic foci, the largest measuring 2.17×4.59 mm. The splenic capsule is smooth and regular. Splenic vasculature appears normal.

Liver

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

The gallbladder lumen is normally distended. The gallbladder wall is thin. The contents are primarily anechoic. No dilation of the cystic duct or common bile duct is identified.



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Gastrointestinal

The stomach is filled with ingesta. Gastric wall thickness measures 2.41 mm, with preserved wall layering. The pylorus measures 4.18 mm.

Duodenal wall thickness measures 3.72 mm. Jejunal wall thickness ranges from 3.98–4.11 mm. Ileal wall thickness measures 1.77 mm. Wall layering is preserved throughout, with no hyperechoic mucosal stippling, mucosal striations, or other abnormalities identified.

The colonic wall measures 0.98 mm, with formed fecal material present within the descending colon.

Pancreas

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

Peritoneal Cavity

A very small amount of apparent free fluid is noted between the hepatic lobes on a single video clip; this may be artifactual or incidental, and no additional sites of free fluid are identified. Cranial mesenteric lymph nodes measure up to 7.77 mm and 9.3 mm in thickness and have normal shape and echogenicity. The iliac trifurcation appears normal.

ULTRASONOGRAPHIC FINDINGS

PRIMARY FINDINGS

- Cranial mesenteric lymph nodes visible, with normal size and preserved morphology.

SECONDARY FINDINGS

- Small splenic hypoechoic foci, likely incidental.
- Questionable trace perihepatic free fluid seen on a single clip only.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This abdominal ultrasound is largely unremarkable and appropriate for a screening examination in a clinically normal dog.

All gastrointestinal segments evaluated demonstrate wall thickness measurements within the expected reference ranges for a dog of similar size, with preserved mural layering.



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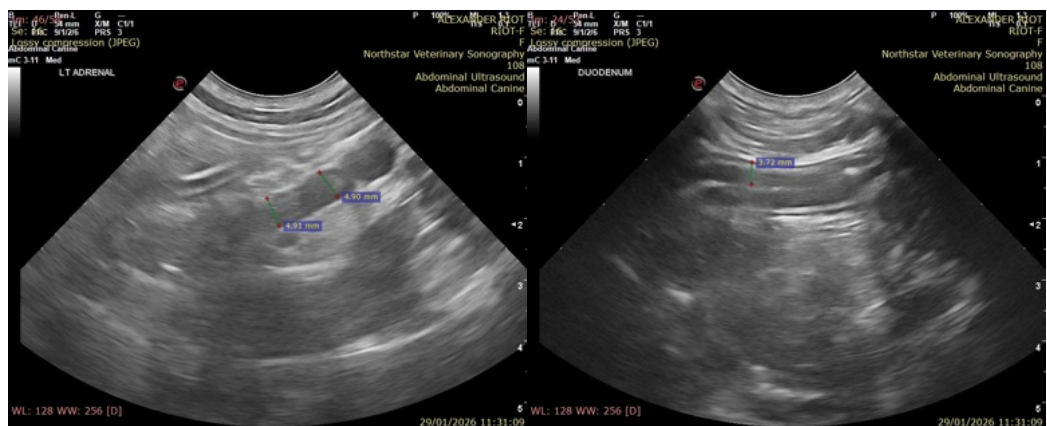
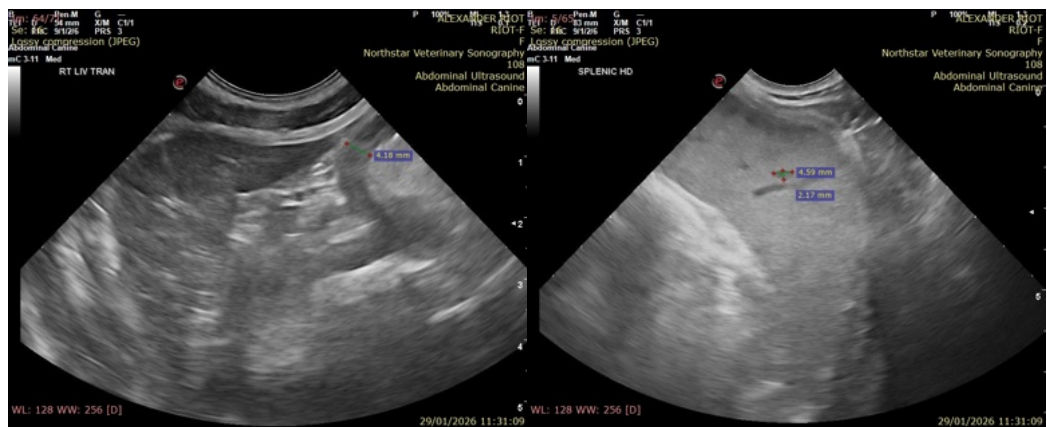
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Cranial mesenteric lymph nodes are within expected size limits (up to 10-12 mm) for a dog of this size and maintain normal shape and echogenicity. Their visibility may reflect mild physiologic antigenic stimulation related to intermittent gastrointestinal activity or dietary indiscretion.

The focal hypoechoic splenic foci is nonspecific and most consistent with benign incidental splenic change, such as focal lymphoid hyperplasia.

A trace amount of suspected perihepatic free fluid is noted on a single clip only and may represent artifact or incidental physiologic fluid. In the absence of additional sites of effusion or clinical concern, this finding is of uncertain but likely minimal clinical relevance.

Recommend clinical monitoring.





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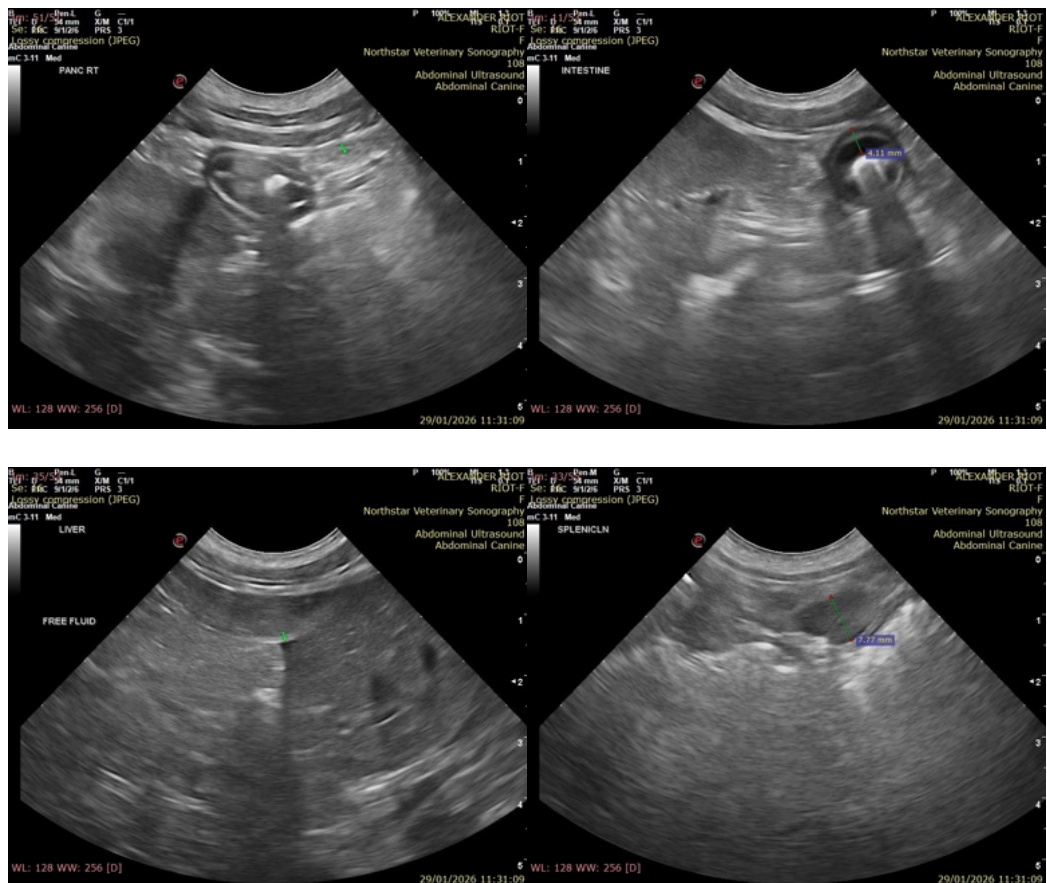
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

MV Esp Ultrasound in Domestic and Wild Animals

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