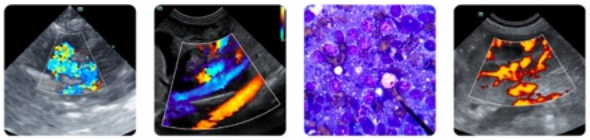


PATIENT

Ghost Rojas

SPECIES

Canine

BREED

German Shepherd

SEX

Neutered male

AGE

10 years

WEIGHT

61 lbs

INTERPRETED BY

Dr. Alicia Angosto Guerrero

IMAGING PERFORMED BY

Jessy Butcher

HOSPITAL NAME

Healing Paws

REFERRING VET

Dr. Key

INVOICE

73466

DATE

3/12/26

PRESENTING CLINICAL SIGNS

- Lab work showed mildly elevated creatinine (1.6) and BUN (33) in 3/2025 - Pet on raw food diet so owner was not concerned. 12/2025 no azotemia but USG 1.019 on first morning urine. Recheck 1 month later showed Creatinine back up to 1.6. It was recommended owner get u/s to ensure kidneys appeared normal.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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

The left kidney is normal in shape and size, measuring 6.32×3.10 cm, and the cortical thickness measures 0.73 cm in the sagittal plane. The cortex is isoechoic compared with the hepatic parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis. Color Doppler demonstrates a normal vascular pattern.

The right kidney is normal in shape and size, measuring 5.99×2.78 cm. The cortex is isoechoic compared with the hepatic parenchyma. The corticomedullary ratio is normal and corticomedullary definition is preserved. There is no evidence of pyelectasia, nephrolithiasis, or hydronephrosis. Color Doppler demonstrates a normal vascular pattern.

The prostate measures approximately 2.13×1.21 cm and appears homogeneous and hypoechoic, compatible with prostatic atrophy following orchiectomy.

Adrenal Glands

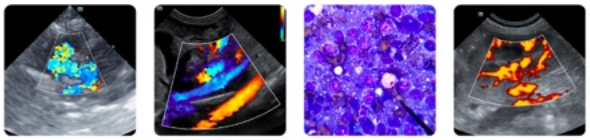
Both adrenal glands demonstrate normal shape and echogenicity. Dorsoventral diameters measured in the sagittal plane: the left adrenal gland measures 0.66 cm at the cranial pole and 0.61 cm at the caudal pole. Only a small portion of the caudal pole of the right adrenal gland could be visualized due to acoustic shadowing from colonic contents, measuring approximately 0.63 cm.

Spleen

Splenic thickness measures 2.46 cm. The parenchyma demonstrates normal echogenicity and a fine homogeneous echotexture without diffuse abnormalities. A few hypoechoic foci are present, the largest measuring 1.03×1.19 cm. The splenic capsule is smooth and regular.

Liver

The liver is subjectively normal in size, with sharp edges and a regular contour. The hepatic parenchyma appears uniform and isoechoic compared with the falciform fat, with a normal echotexture. No hepatic lymphadenopathy is observed.



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The gallbladder lumen is normally distended. The wall is thin and the contents are primarily anechoic with a small amount of biliary sludge. No dilation of the cystic duct or common bile duct is observed.

Gastrointestinal

The stomach is relatively empty with only small amounts of digested ingesta within the lumen, with mural thickness measuring 2.23 mm and preserved wall layering. The pylorus measures 5.91 mm. The duodenum measures 3.65 mm. The jejunum measures 3.76 mm with normal wall layering. No sonographic evidence of inflammation, ileus, or foreign material is identified.

The colon measures 0.86 mm, with normal fecal material present within the lumen.

Pancreas

The evaluated pancreatic regions do not demonstrate sonographic evidence of overt inflammation or neoplastic disease.

Peritoneal Cavity

No sonographic evidence of abdominal effusion, peritonitis, or lymphadenomegaly is identified. The iliac trifurcation region appears normal.

ULTRASONOGRAPHIC FINDINGS

- Few small hypoechoic splenic foci, the largest measuring 1.03×1.19 cm.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Both kidneys appear normal in size, architecture, and echogenicity, with preserved corticomedullary definition and no evidence of pyelectasia, nephrolithiasis, or hydronephrosis. These findings are reassuring; however, they do not exclude early renal dysfunction, particularly in the context of the patient's borderline creatinine elevation and decreased urine specific gravity (1.019). Early or mild renal disease may be present without detectable structural abnormalities on ultrasound.

A few small hypoechoic splenic foci are identified. In geriatric dogs, these are most commonly associated with benign splenic nodular hyperplasia or other incidental splenic changes, although ultrasound alone cannot definitively characterize them.

The remainder of the abdominal examination is unremarkable.

Recommendations

- Correlation with renal biomarkers and urine studies is recommended, as early renal disease may not produce ultrasonographic abnormalities. Monitoring of creatinine, SDMA, and urine specific gravity may be helpful.

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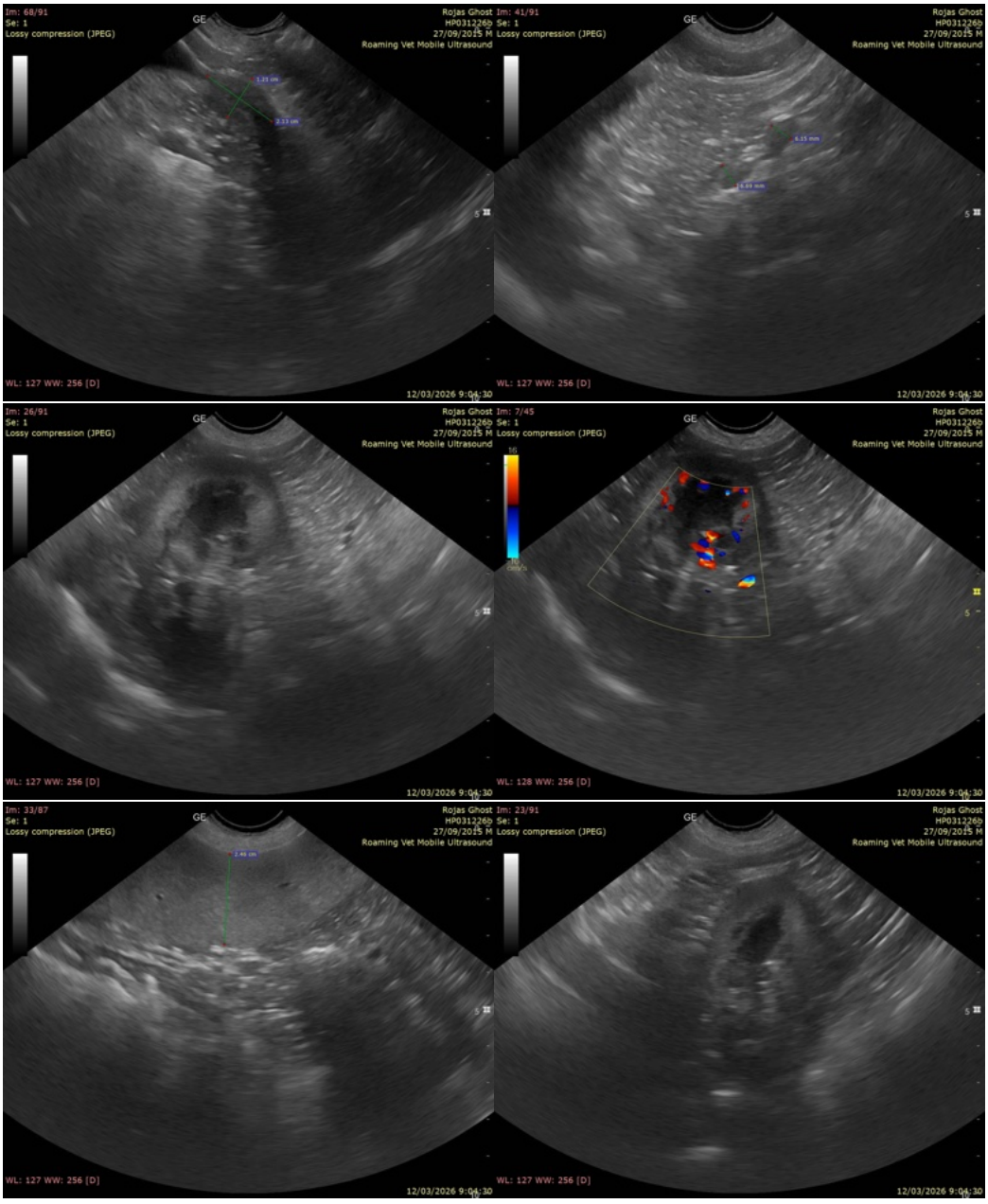
- Measurement of urine protein-to-creatinine ratio and systemic blood pressure may be considered to further evaluate for early renal disease, as these abnormalities may be present even when renal ultrasonographic appearance is normal.
- Periodic monitoring of the small splenic nodules may be considered.



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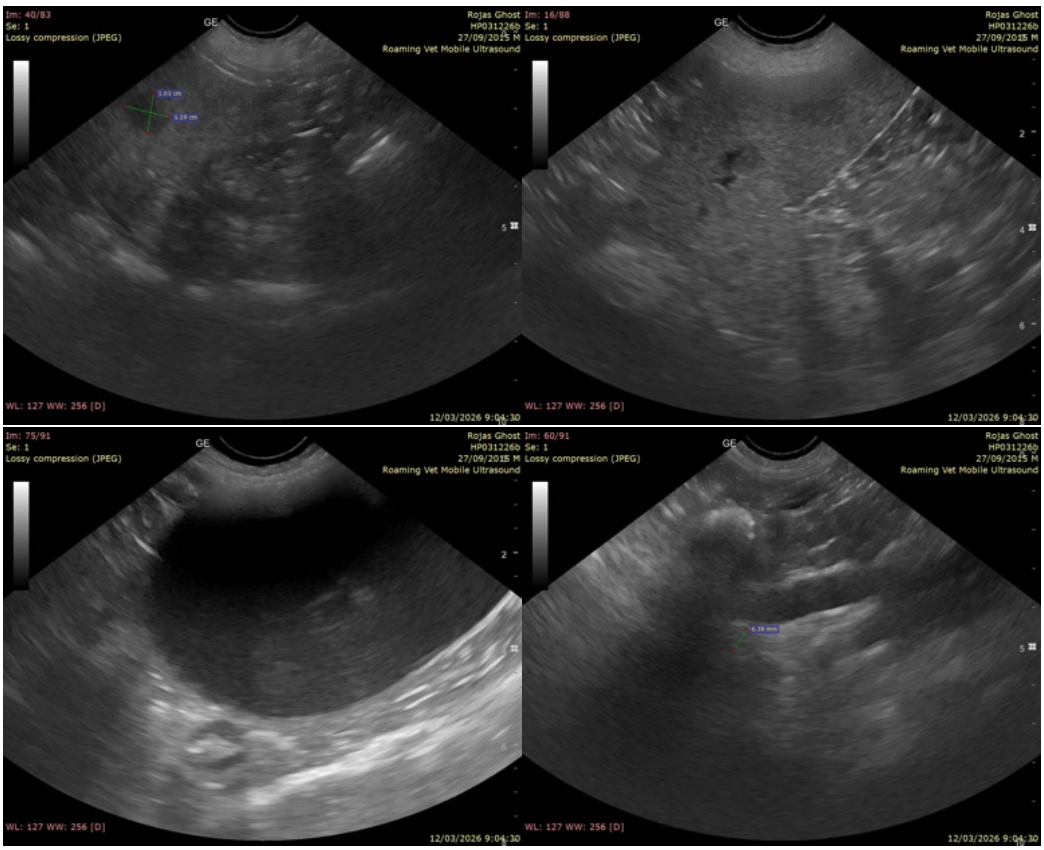

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

info@SonoPath.com