



PATIENT

Mango Rodriguez

SPECIES

Avian

BREED

Lovebird

SEX

Female

AGE

8 years

WEIGHT

39 grams

INTERPRETED BY

Alicia Angosto
Guerrero, DMV,
PgDip, MSc.

IMAGING PERFORMED BY

Agnes E Rupley, DVM

HOSPITAL NAME

All Pets Medical Center

REFERRING VET

Dr. Rupley

INVOICE

78432

DATE

6/9/26

PRESENTING CLINICAL SIGNS

History: Mass suspected in middle and caudal right kidney lobes on rads. 9 year old lovebird 39g, thin with body score of 2-3/4. History of Macrorhabus infection that appears resolved. Self destructive causing wound on wing web that responded to silver sulfadiazine and fluoxetine, and enrofloxacin orally. On blood work 6/4/26 Chemistry panel revealed low albumin at 1.4 (up from <1.0 on 4/10/26), elevated AST and greatly elevated uric acid at >21.84 Decreased numbers of normal flora on choanal gram stain. Crop gram stain revealed gram negative rod bacteria 2/4. FEcal gram stain normal. CBC revealed normal counts however toxic heterophils are present. Mango was hospitalized and SC fluid therapy administered for 2 days then went home over the weekend. Lost 3.5g since 6/5/26. Chemistry panel revealed elevated phosphorus at 9.32, AST >650, and uric acid >21.84, with low potassium, albumin at 1.3, ck is normal. Chlamydia neg 2 months ago by pcr

ULTRASONOGRAPHIC EXAMINATION OF THE COELOM

Cloaca and Urinary System

The cloaca is not confidently visualized.

The kidneys are not reliably evaluated transcutaneously due to their retrocoelomic location and overlying air sac interference, which is expected in most avian patients and represents an inherent limitation of transcoelomic ultrasonography.

Reproductive System

No structures compatible with the reproductive tract are identified. No ultrasonographic evidence of egg retention or reproductive tract distension is observed.

Liver

The visible hepatic parenchyma is of limited diagnostic quality due to image resolution and patient size. Within these limitations, no overt hepatic abnormalities are identified.

A gallbladder is not visualized, consistent with the normal anatomy of this species.

Gastrointestinal tract

The ventriculus demonstrates a mural thickness of 0.98 mm and contains a small amount of ingesta within the lumen.

Visualized small intestinal segments measure approximately 0.51-0.69 mm in wall thickness, with preserved wall layering and a small amount of luminal fluid.

A heterogeneous soft tissue structure is identified adjacent to the intestinal loops within the caudal coelomic cavity. The structure contains multiple punctate hyperechoic foci and produces mild distal acoustic attenuation



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Coelomic cavity

A heterogeneous coelomic soft tissue structure of uncertain origin is identified between intestinal segments. Due to the patient's small size and the inherent limitations of avian ultrasonography, the anatomical origin of this structure cannot be determined with confidence.

The visualized cardiac silhouette appears subjectively unremarkable. No pericardial effusion is identified.

PRIMARY FINDINGS

- Heterogeneous coelomic soft tissue structure of uncertain origin containing multiple punctate hyperechoic foci.
- Small amount of SC fluid.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The avian kidneys cannot be adequately assessed using transcoelomic ultrasonography in this patient due to their normal anatomical location and the patient's small size. Although a renal mass has been raised as a diagnostic consideration, the available imaging findings are not sufficiently specific to confidently confirm this possibility. It should also be noted that renal neoplasms in birds commonly produce pelvic limb paresis or neurologic deficits secondary to compression of the lumbosacral nerve plexus; no such history has been provided in this case.

The heterogeneous coelomic structure identified adjacent to the intestinal tract is of uncertain origin. Given the marked clinicopathologic abnormalities, urate-associated change and secondary visceral gout are considered important differential diagnoses. However, chronic inflammatory or granulomatous tissue cannot be completely ruled out.

Subtle anechoic fluid bands are noted within the coelomic cavity. Their significance is uncertain and may be attributable to recent fluid therapy.

Overall, the findings are most supportive of severe chronic renal disease with secondary visceral gout. Renal neoplasia remains a differential diagnosis; however, the available imaging studies do not allow definitive characterization of the suspected renal abnormality.

Recommendations

- Continued medical management of the suspected severe renal disease and associated hyperuricemia is recommended, with treatment adjustments based on the patient's clinical response and serial laboratory findings.
- Supportive care should be directed toward maintaining hydration, nutritional status, and overall quality of life.
- Ongoing assessment of appetite, activity level, comfort, and ability to maintain body weight, is recommended when discussing long-term management goals and prognosis with the owner.



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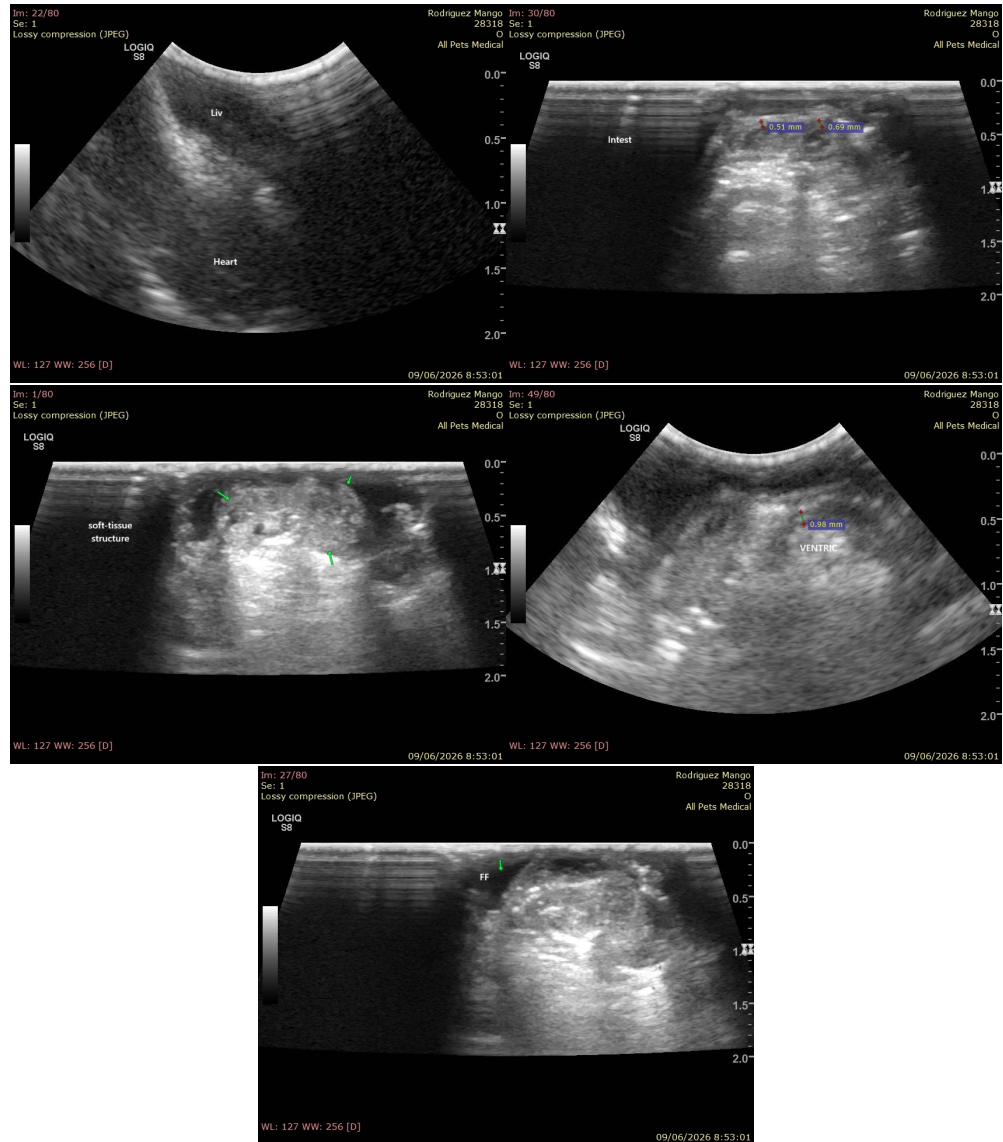
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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