



PATIENT PRESENTING CLINICAL SIGNS

Aegon Popo History: 4/6/26- Presented due to acute osnet PU/PD x 3 days, self limiting anorexia and vomiting. Has since recovered with minimal PU/PD, client still noting dilute appearing urine. Currently has good energy levels with no C/S/V/D, good appetite.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: PE- Normal 4/6/26: Chem: IDEXX SDMA = 15 µg/dL (0-14), Creatinine = 1.7 mg/dL (0.5- 1.5), BUN = 34 mg/dL (9- 31), all other values WNL. UA (via cysto): U.S.G.= 1.010 , pH= 5.0, inactive sediment HW/L/E/A - Neg x4 Lepto panel to be performed tomorrow.

BREED

Standard Poodle

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Neutered Male

Urinary System

The urinary bladder wall is normal in thickness. The mucosal surface in the region of the apex is slightly irregular. The bladder is moderately distended. Luminal contents are mostly anechoic. No cystic calculi are observed. The region of the trigone is normal.

AGE

8

The region of the prostate is not visualized due to its pelvic location.

WEIGHT

72 lbs

The left kidney is normal in size (6.66 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal in size (7.08 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Desen Ertunc, DVM

Adrenal Glands

The left adrenal gland is normal in size (0.64 cm at cranial pole) (0.67 cm at caudal pole) with a normal shape and homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

The region of the right adrenal gland is evaluated. No obvious pathology is observed in this region.

HOSPITAL NAME

Humboldt VMG

Spleen

The spleen is normal in size (1.67 cm in width at the level of the hilus) with a normal capsular contour. The parenchyma is subtly mottled in appearance. No focal lesions are observed. Splenic vasculature is normal.

REFERRING VET

Jennifer Renner DVM

Liver

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen with minor changes consistent with age-related remodeling. No focal lesions are observed. Hepatic vasculature and biliary tracts are of normal volume with no evidence of congestion.

INVOICE

22861

The gallbladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are mostly anechoic. The cystic and common bile ducts are normal/not seen.

DATE

4-15-26

Gastrointestinal

The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is not dilated. The small intestinal wall is normal in thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is



PATIENT normal. There is no evidence of an obstructive pattern.

Aegon Popo **Pancreas**

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

SPECIES

Canine **Lymph Nodes**

The abdominal lymph nodes are normal/not visible.

BREED

Free Abdomen

Standard Poodle The peritoneal cavity is normal. There is no evidence of inflammation or effusion.

SEX

ULTRASONOGRAPHIC FINDINGS

Neutered Male

- Minor age-related hepatic parenchymal remodeling
- The splenic parenchymal changes are most consistent with a benign process such as lymphoid hyperplasia, extramedullary hematopoiesis, splenitis or antigenic stimulation with a lower possibility of infiltrative neoplasia (i.e., lymphoma, mast cell neoplasia).

AGE

8

WEIGHT

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

72 lbs

Given the patient's clinical history, consider the following:

INTERPRETED BY

1. Urine culture and sensitivity to assess for occult infection
2. A resting cortisol level to screen for hypoadrenocorticism. If resting cortisol level is < 2.0 mcg/dL, an ACTH stimulation test is recommended.
3. Pre- and postprandial serum bile acids to assess for an occult hepatopathy
4. Baseline blood pressure measurement
5. Depending on the results of the above diagnostics, further work-up may be indicated.

Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Desen Ertunc, DVM

HOSPITAL NAME

Humboldt VMG

REFERRING VET

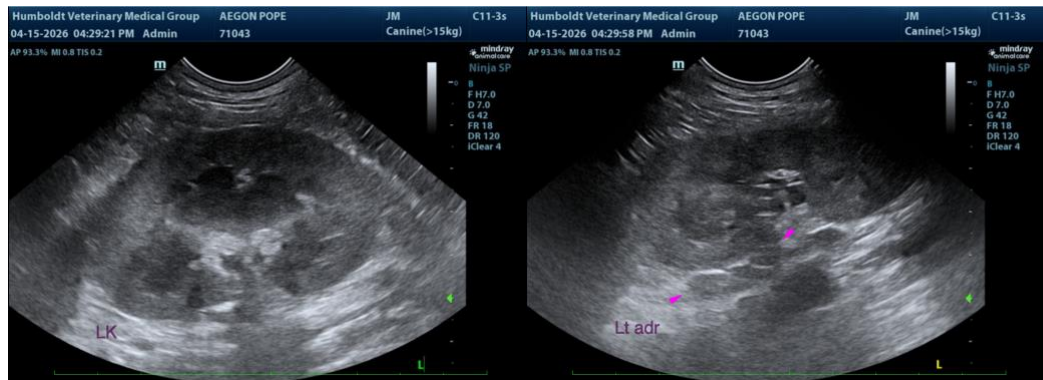
Jennifer Renner DVM

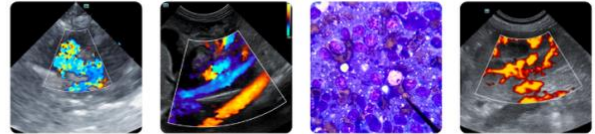
INVOICE

22861

DATE

4-15-26





PATIENT

Aegon Popo

SPECIES

Canine

BREED

Standard Poodle

SEX

Neutered Male

AGE

8

WEIGHT

72 lbs

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Desen Ertunc, DVM

HOSPITAL NAME

Humboldt VMG

REFERRING VET

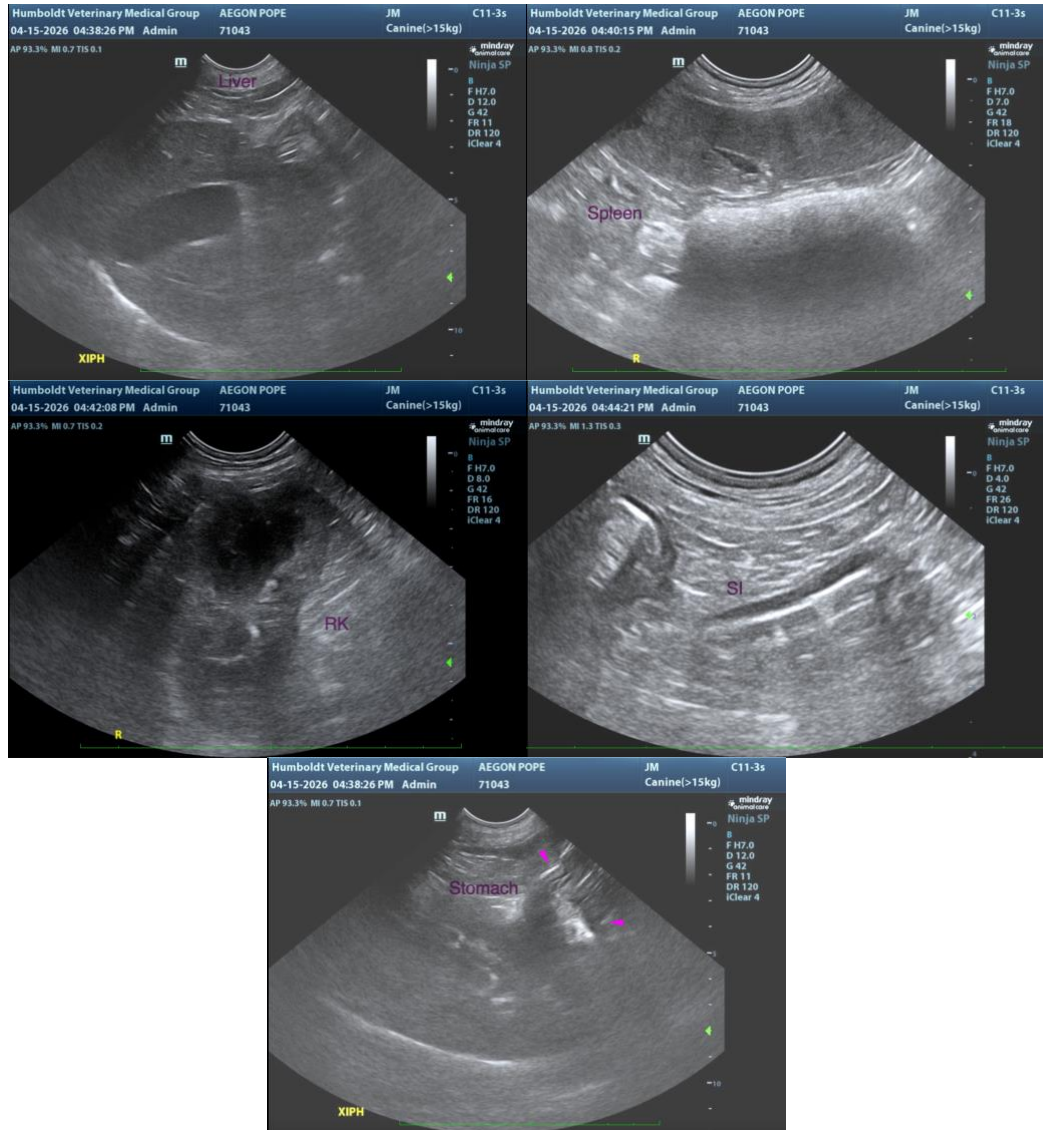
Jennifer Renner DVM

INVOICE

22861

DATE

4-15-26



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.

Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com