



PATIENT

Zeus Geerders

SPECIES

Canine

BREED

Husky

SEX

Intact Male

AGE

6 Months

WEIGHT

26.39 kg

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Cypress Veterinary
Clinic

REFERRING VET

Laura Johnson, VMD

INVOICE

72946

DATE

2/12/26

PRESENTING CLINICAL SIGNS

AUS to further evaluate mild azotemia and monocytosis on pre-op bloodwork for neuter. Urine cystatin B elevated. Reported to being doing well at home, no urinary signs, E/D normally. Other dog in home, sibling, same age noted to have similar BW changes. Reported was the whole litter had elevated renal values. This was a rescued litter.

Meds: Simpirica Trio

Abnormal PE/Chem/CBC/UA Results: CBC: Hct 48.5%, Plts 368, Monos 1.041 H - Chem: SDMA 11-n, Cr 1.5 high-norm, BUN 34- mild H - 4DX: Neg x 4 - UA Free catch: USG 1.064, pH 6.0, Pro 1+, Bact marked cocci > 40/HPF, remainder NSF - Urine Cystatin B: 598 H (0-99)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is adequately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

Prostate is normal in size (1.9 cm thick at the transverse view) for a young, intact male. Parenchyma is diffusely homogenous and relatively hyperechoic. Normal distinct margins and symmetrical bilobed shape are maintained.

The right kidney is normal is size (6.1 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed. A very mild/subtle hyperechoic band parallel to the corticomedullary border is present.

The left kidney is normal is size (6.17 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed. A very mild/subtle hyperechoic band parallel to the corticomedullary border is present.

Adrenal Glands

The right adrenal gland is normal in size (0.74 cm at cranial pole and 0.38 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

The left adrenal gland is normal in size (0.33 cm at cranial pole and 0.39 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Spleen

The spleen is subjectively normal in size (2.3 cm thick at the hilus) with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

Liver

The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and



PATIENT

Zeus Geerders

SPECIES

Canine

BREED

Husky

SEX

Intact Male

AGE

6 Months

WEIGHT

26.39 kg

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Cypress Veterinary
Clinic

REFERRING VET

Laura Johnson, VMD

INVOICE

72946

DATE

2/12/26

homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

Gastrointestinal

The visible stomach wall is normal in thickness and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

The visible colon is normal in wall thickness (< 0.2 cm) and layering. It is mildly diffusely distended with soft stool.

Pancreas

The pancreas that is observed appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

Free Abdomen

There is no visible free peritoneal effusion noted in these images.

Mesenteric lymph nodes are prominent in size with swollen capsular contour. Normal elongated shape (length to width ratio) is maintained. There is no loss of parenchymal detail.

ULTRASONOGRAPHIC FINDINGS

- Very mild/subtle bilateral medullary rim sign - This finding is of unknown clinical significance and can be a normal variant, often idiopathic. Medullary rim sign can be present with renal disease including lymphoma, hypercalcemic nephropathy, Leptospirosis, tubular disease, other and should be interpreted in combination with other more specific indications of kidney disease such as isosthenuria, proteinuria, azotemia, etc. This is a common incidental finding in patients with diabetes mellitus.
- Suspect emerging soft stool or diarrhea, if not already present.
- Mildly to moderately reactive mesenteric lymph nodes - This finding could be in part normal patient variant in a young puppy. Infiltrative neoplastic disease cannot be ruled out but is considered less likely.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Early or emerging kidney disease can't be ruled out but is not definitive based on either the appearance of the kidneys or the provided laboratory results, especially the high urine specific gravity and possible concurrent urinary tract infection. Recommendations are to address any possible toxic or infectious history including a potential urinary tract infection and recheck/monitor kidney values upon resolution



PATIENT

Zeus Georders

SPECIES

Canine

BREED

Husky

SEX

Intact Male

AGE

6 Months

WEIGHT

26.39 kg

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Cypress Veterinary
Clinic

REFERRING VET

Laura Johnson, VMD

INVOICE

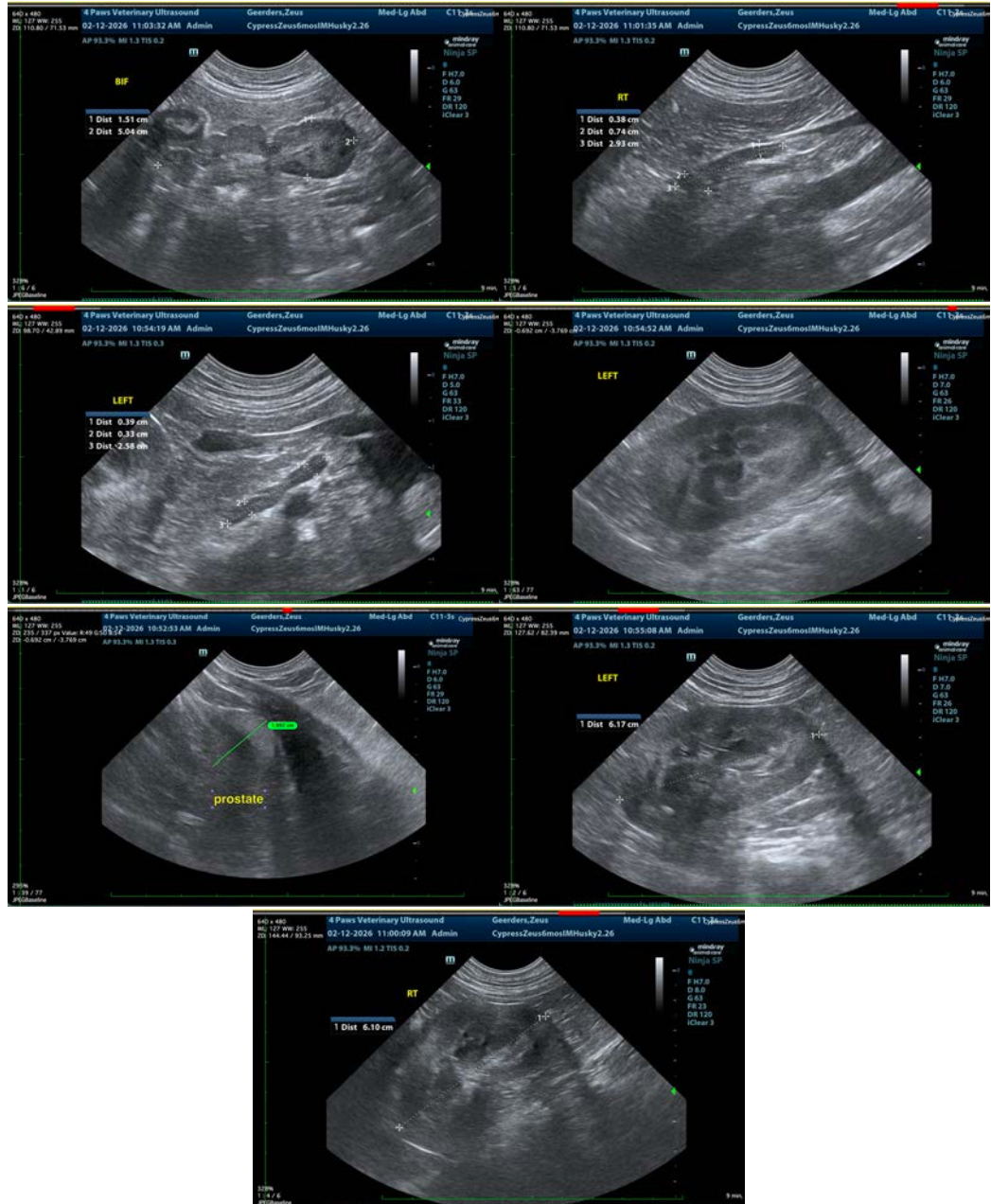
72946

DATE

2/12/26

of any compounding factors over time.

In the meantime, additional overall health maintenance including empirical parasitic treatment, deworming, etc. is recommended.





PATIENT

Zeus Geerders

SPECIES

Canine

BREED

Husky

SEX

Intact Male

AGE

6 Months

WEIGHT

26.39 kg

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Cypress Veterinary
Clinic

REFERRING VET

Laura Johnson, VMD

INVOICE

72946

DATE

2/12/26

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.

Beth Johnson, DVM, DACVIM
info@sonopath.com