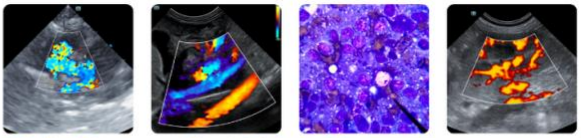


PATIENT

Gabby Salvatore

SPECIES

Canine

BREED

Maltese

SEX

Neutered Male

AGE

16 Years

WEIGHT

7.8 Pounds

INTERPRETED BY

Beth Johnson, DVM DACVIM

IMAGING PERFORMED BY

Rebecca Hamilton

HOSPITAL NAME

Animal General Hudson

REFERRING VET

Dr Lang

INVOICE

35672

DATE

2/2/26

PRESENTING CLINICAL SIGNS

- Thorough check up on geriatric pet.
- Doing well, some eye issues
- Meds: eye meds, tacrolimus and optimmune

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Urinary bladder is only mildly distended/largely empty. Visible contents are anechoic, except for some mineral/sand density throughout the lumen and some appearing to be embedded within the ventral wall. Otherwise, the urinary bladder wall is unable to be fully assessed for pathology without further distention. No visible masses or definitive sizeable cystoliths are observed, but cystoliths can't be ruled out. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

Prostate is normal in size, echotexture and echogenicity for a neutered male.

The kidneys are irregular and diffusely echogenic with decreased corticomedullary distinction and poor visualization of internal architecture. No mineral is observed. The left kidney is small in size. The left kidney measures 2.81 cm. The right kidney is small/normal in size. The right kidney measures 3.24 cm. Mild to moderate pyelectasia is noted bilaterally.

Adrenal Glands

Left adrenal gland is normal in size (0.5 cm at cranial pole and 0.39 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Right adrenal gland is normal in size (0.58 cm at cranial pole and 0.5 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Spleen

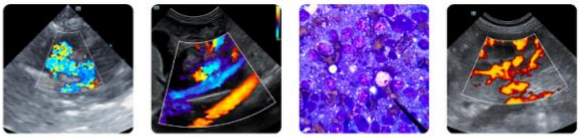
Spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

Liver

Liver is relatively normal in size and contour. Parenchyma is mildly heterogenous and coarse with mild likely age-related parenchymal remodeling noted. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

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

Gastrointestinal



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The visible stomach wall is normal in thickness and layering. The lumen of the stomach is mildly distended with a small to moderate amount of echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is 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 mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta/chyme. There is no evidence of obstruction, foreign material or infiltrative disease.

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

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.

There is no apparent pathologic lymphadenopathy noted in these images.

ULTRASONOGRAPHIC FINDINGS

- Moderate chronic kidney disease changes with mild to moderate pyelectasia bilaterally
- Mineral/sand debris within the urinary bladder and small cystoliths unable to be definitively ruled out
- Otherwise, this is a largely unremarkable structural senior exam

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A full general metabolic health screen is recommended, if not recently evaluated, to include CBC, chemistry panel, electrocytes, and urinalysis, and if indicated based on urinalysis results, urine culture is recommended. If protein is present in an otherwise quiet sediment, protein quantification with a urine protein to creatinine ration is recommended. Additionally, a blood pressure could be considered.

New Jersey Mobile
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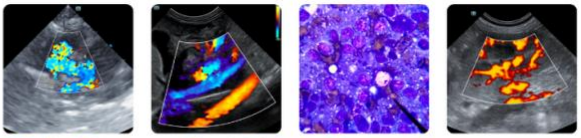

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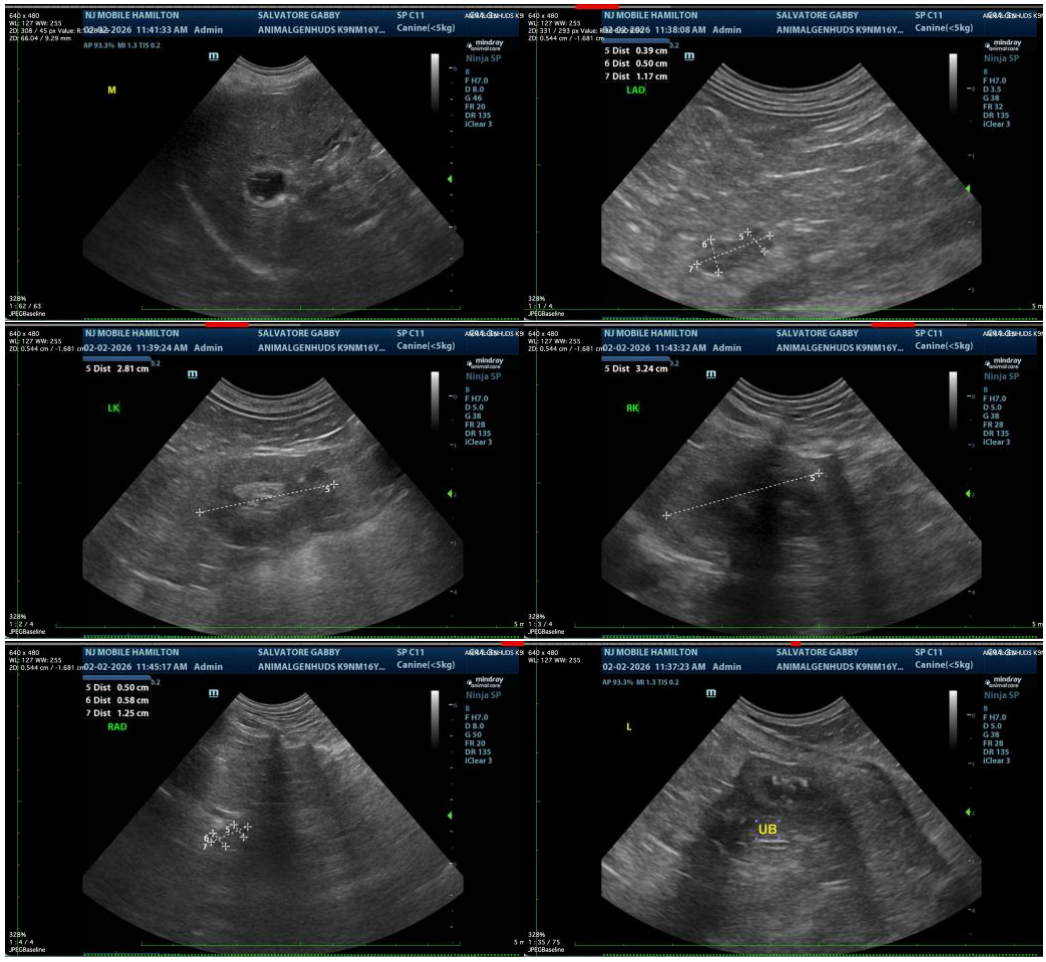

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Beth Johnson, DVM DACVIM

info@sonopath.com