

**PATIENT**

Sophie Blackwell

**SPECIES**

Canine

**BREED**

Havanese

**SEX**

SF

**AGE**

16 years

**WEIGHT**

10.8 lbs

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

Pamela Harrigan,  
RDCS

**HOSPITAL NAME**

Falmouth Animal  
Hospital

**REFERRING VET**

Dr. Lilian Hauser

**INVOICE**

11710

**DATE**

4/15/2026

**PRESENTING CLINICAL SIGNS**

Decreased appetite, lethargy; azotemia. Vomiting/diarrhea last week - vomiting has resolved, diarrhea (orange jelly-like consistency) persists. Approx 3 lb weight loss x 1 week. Had AUS at ER March 25, 2026: bilaeral renal cortical dystrophic mineral and small cortical cysts, non-specific hepatomegaly, hepatopathy, segmental intestinal fluid filling, possibly due to enteritis.

Worsening azotemia - bloodwork today: BUN 93, creat 4.0, phos 7.6 UA: USG 1.011. Continuing elevated liver values: ALT 236, ALP 468. On Demamarin, Proviabile \*Study limited to urinary system

**ULTRASONOGRAPHIC EXAMINATION OF THE 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.

Kidneys are overall normal in size and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased cortical echogenicity and mild loss of corticomedullary distinction, expected in this age patient. There is no evidence of pyelectasia, mineral or infarcts observed. Small, non-obstructive nephroliths are noted bilaterally. Additionally, several small cortical cysts are noted.

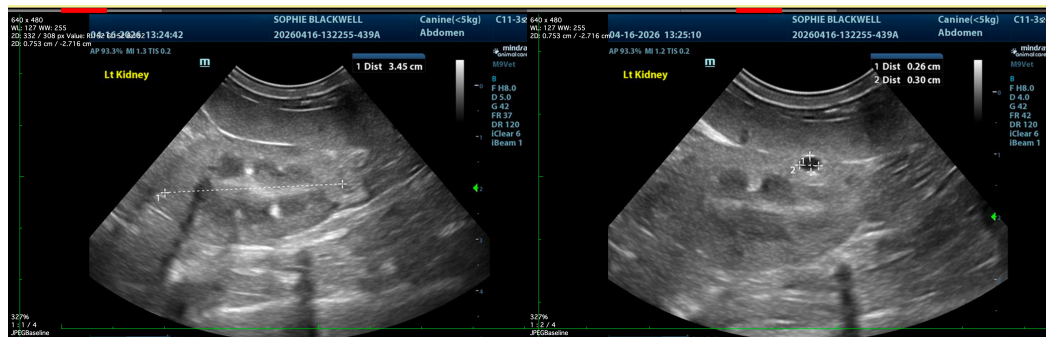
Left kidney measures 3.45 cm and the right kidney measures 4.27 cm.

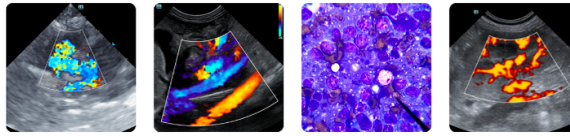
**ULTRASONOGRAPHIC FINDINGS**

- Mild to moderate bilateral age-related kidney changes with small non-obstructive nephroliths and cortical cysts noted bilaterally.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

There's not a definitive ultrasonographically visible intraabdominal explanation for patient's reported recent progression in azotemia. Recommendations include ruling out an acute/potentially acute on chronic insult such as a urinary tract infection, other infectious disease such as leptospirosis, toxic insult including potentially medications not well tolerated by the kidneys, etc. Otherwise, beginning and/or continuing supportive/symptomatic medical management of clinical signs and medical management of progressive chronic kidney disease is recommended.





**PATIENT**

Sophie Blackwell

**SPECIES**

Canine

**BREED**

Havanese

**SEX**

SF

**AGE**

16 years

**WEIGHT**

10.8 lbs

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

Pamela Harrigan,  
RDCS

**HOSPITAL NAME**

Falmouth Animal  
Hospital

**REFERRING VET**

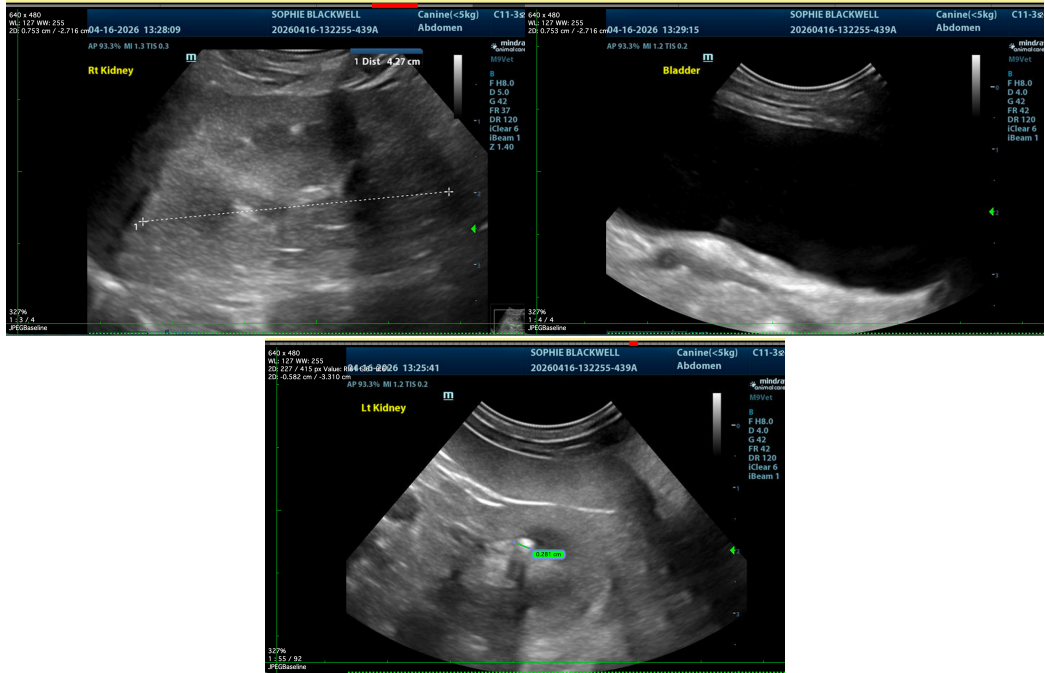
Dr. Lilian Hauser

**INVOICE**

11710

**DATE**

4/15/2026



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