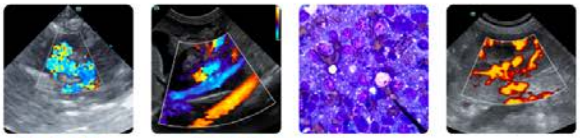

SonoPath www.thefocalzone.com info@thefocalzone.com 289.808.2608

PATIENT

Oliver Sammut

SPECIES

Canine

BREED

Bulldog x

SEX

Neutered Male

AGE

11 Years

WEIGHT

45.9 kg

INTERPRETED BY

Dr Brittany Sinclair, BVSc(hons), DACVECC

IMAGING PERFORMED BY

Amanda Stewart

HOSPITAL NAME

Graham Animal Hospital

REFERRING VET

Dr. Seager

INVOICE

74550

DATE

4/17/26

PRESENTING CLINICAL SIGNS

Hx of Equivocal DCM (Nutritional based now controlled), Degenerative MV Stage B1, and Ventricular Arrhythmia-occasional VPCs (Stress/Anxiety induced adrenaline based response so no tx needed) - goes to MOVH cardiologist. Hx of back pain (sees chiro), dermal/SQ masses, painful jaw, also pot belly -Senior wellness exam and bloodwork, assess pot belly - mild increase in ALP, poss mass effect on rads - but full large stomach, difficult to assess if merely stomach vs mass - liver vs stomach? no FF noted on afast. Clinically well otherwise. Current Medications: Gabapentin 800mg q8-12, Thyrotab 0.6mg 1 SID PO, Onsior 40mg; 1 1/2 SID PO

Abnormal PE/Chem/CBC/UA Results: Chronically low MCV/MCH (normal RBC/Hct), M1 increased ALP at 323 (ref 23-212) Radiographic Findings Will email. Primary Question to Be Answered in This Exam Cause of pot belly, liver/ALP rise, possible mass effect cranial abdomen??

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and visible pelvic urethra were of normal thickness. The ureters were not visible which is normal. There was normal wall layering with no masses, uroliths or abnormal thickening visualized. Urine was anechoic. No evidence of inflammatory or neoplastic changes were noted.

The kidneys were both normal size and structure, with smooth capsule and normal corticomedullary definition and ratio. Medullary structure differed distinctly from that of the cortex. No evidence of pelvic dilation was present.

The left kidney has a smooth capsule and with mild hazing of corticomedullary definition. No evidence of pelvic dilation was present. Hyperechoic, shadowing foci present in renal parenchyma and calyces consistent with nephrocalcinosis. Left kidney measures 8.17 cm. Right kidney measures 7.74 cm.

Adrenal Glands

The left adrenal gland is visualized and recognized as having normal shape, size, position and echogenicity for this breed and age. The visible phrenic vasculature was unremarkable. Left measures 2.85 cm in length x 0.54 cm at the caudal pole and 0.44 cm at the cranial pole.

The right adrenal gland is subjectively prominent and measures as somewhat enlarged. Echogenicity is hypoechoic. There are no specific masses or nodules visualized. Right measures 2.09 cm in length x 0.91 cm at the caudal pole and 0.78 cm at the cranial pole.

Spleen

The spleen was normal with age appropriate homogeneous parenchyma and a smooth capsule with normal splenic vasculature with no signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarct changes were noted.

Liver

The liver is subjectively normal in size with normal contours and structure. There is age appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion.

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Gall bladder is moderately distended with normal wall thickness and anechoic contents. Common bile duct is non-distended and tapers normally.

Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness of with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate. No masses or focal lesions were observed.

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. There were no focal lesions consistent with obstruction or a mass effect observed.

Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The area of the pancreas was isoechoic to surrounding tissue with no overt inflammation. Pancreatic tissue was not distinctly visualized which is common.

Free Abdomen

No clinically significant lymphadenopathy or abnormalities noted. No free fluid noted.

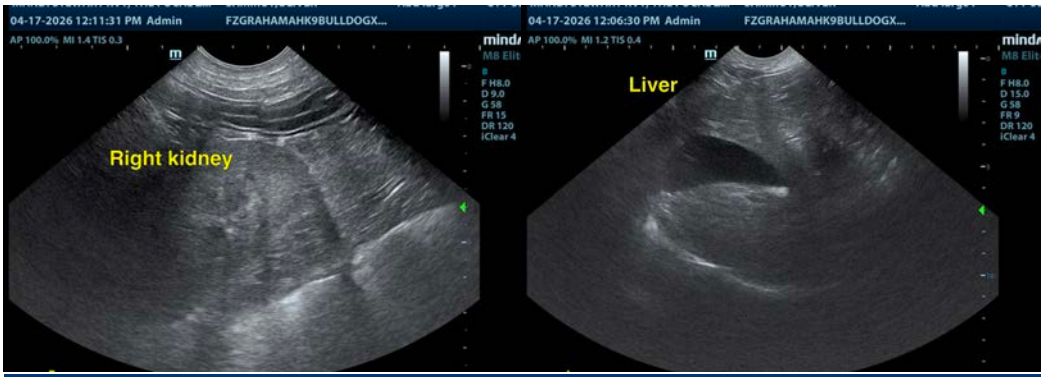
ULTRASONOGRAPHIC FINDINGS

- Prominent right adrenal gland.
- Aging renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No abdominal masses are visualized on abdominal ultrasound. The right adrenal gland is prominent compared to the left adrenal gland. Adrenal gland size is variable, and this may be a variation of normal for this patient. However, adrenal gland function testing should be considered, given the reported pot belly appearance.

Renal changes are likely age related degeneration. Correlate clinical significance with semi-annual blood work/urinalysis findings and clinical signs.



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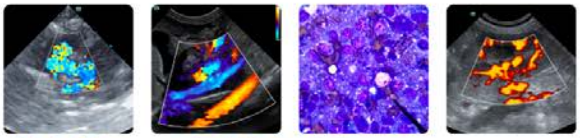

Clinical Sonography & Telecytology
Educational Teleconsultation Services™

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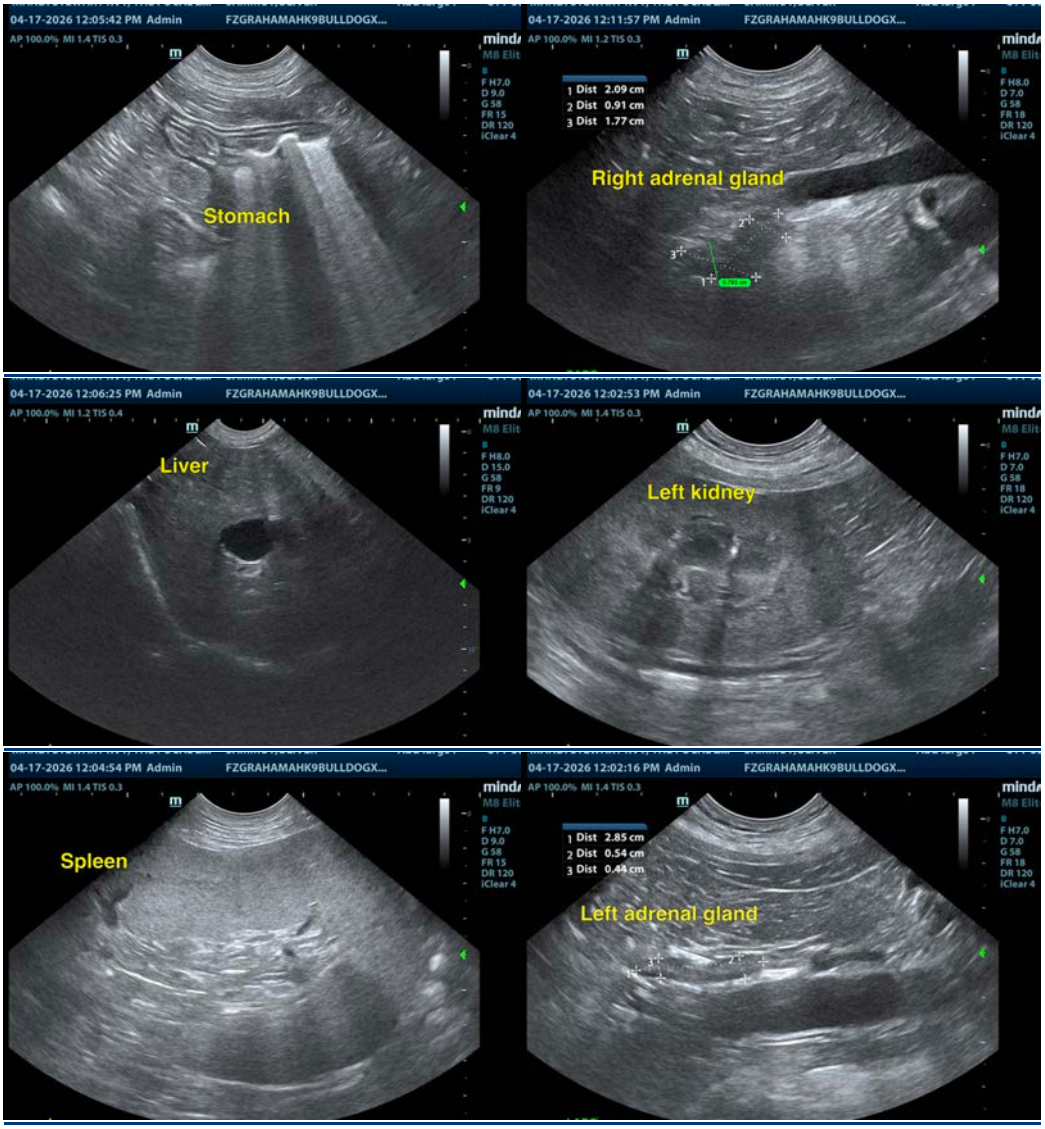

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Dr Brittany Sinclair, BVSc(hons), DACVECC

info@SonoPath.com