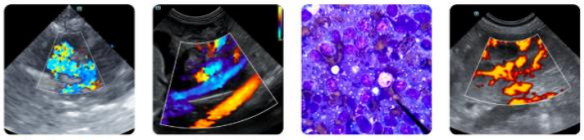

PATIENT

Huckleberry Nelson

SPECIES

Canine

BREED

French Bulldog

SEX

Spayed Female

AGE

4 Years 10 Months

WEIGHT

16.4

INTERPRETED BY

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS

IMAGING PERFORMED BY

Dr. Amelie Thibaudeau

HOSPITAL NAME

MojoVet

REFERRING VET

Dr. Amelie Thibaudeau

INVOICE

13440

DATE

01/28/26

PRESENTING CLINICAL SIGNS

- History of unexplained weight loss in the last 1-2 months, feeding the exact same (we are checking calorie intake once owner sends me the full list of foods she is giving daily), same attitude and energy, no V/D/C/S. On Royal Canin HP diet for at least 3 years but gets a lot of treats. History of intermittent utis, skin allergies and ear infections. Went from 20.6lbs 6-2024, to 18lbs December 2025, to 16.4lbs this week. owner assures me she did not switch food, she feels like she is always hungry right now.

Abnormal PE/Chem/CBC/UA Results: very thin, difficult to evaluate without sedation but sedated exam normal except for thinness. cbc/chem normal, 4dx neg, fecal neg, GI panel normal, chest rads and scout body rads, chest clear, some expected abnormal findings of spine for a frenchie, large amount of gas in descending colon, no bone abnormality. cancer DX, nuQ cancer, baseline cortisol pending.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized, and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The left kidney measured 3.8 cm in length. The right kidney measured 3.8 cm in length.

Adrenal Glands

The **left adrenal gland** was visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.50 cm width.

The **right adrenal gland** was visualized obliquely measuring 0.60 cm width.

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably

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thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

Gastrointestinal

Some retention of ingesta was noted in the **stomach**. Mild pyloric hypertrophy was noted. The small intestine and colon were unremarkable.

Pancreas

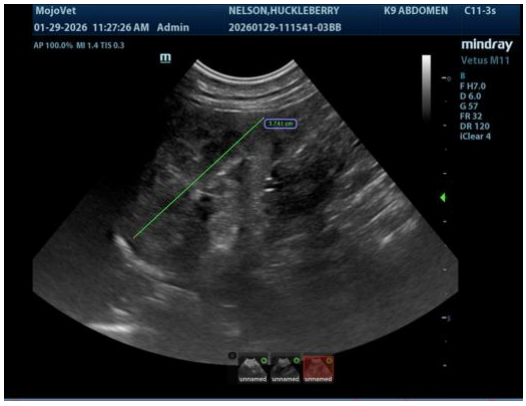
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

- Pyloric hypertrophy.
- Unremarkable abdomen otherwise.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt cause of the weight loss. Maldigestion panel, three view chest radiographs and full CNS examination is recommended to examine for occult disease that could be responsible for the weight loss. Evaluation for competitive eating environments should also be considered.



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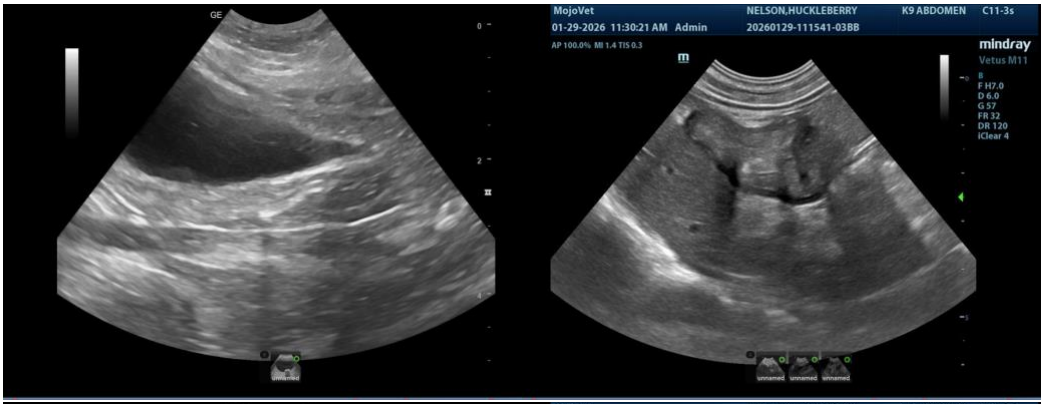

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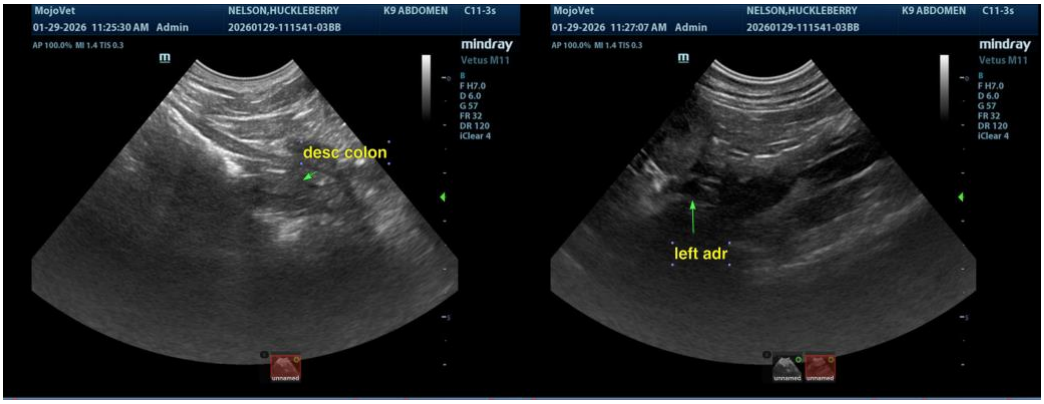

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP(CFM), Cert. IVUSS,

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info@SonoPath.com