



PATIENT

Nike Fayette

SPECIES

Canine

BREED

Lab Mix

SEX

Neutered Male

AGE

11 Years

WEIGHT

67 Pounds

INTERPRETED BY

Greg Kuhlman, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Julia Bakker, DVM

HOSPITAL NAME

Orange Blossom VI

REFERRING VET

Stephen Romero, DVM

INVOICE

35990

DATE

2/27/26

PRESENTING CLINICAL SIGNS

- Recent decreased appetite and jaundice with liver enzyme elevations
- History of low grade MCT
- FNA of liver taken today for cytology and culture
- Lepto PCR still pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder is moderately distended with anechoic urine. No uroliths are seen. The bladder wall is normal in appearance and thickness. No masses are seen. No urethral papilla is seen.

The prostate is normal in size, measuring 7.0 mm in width. It is symmetrical and has uniform echogenicity.

The right kidney presents normal size (7.7 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis. In the caudal pole of the right kidney there is a 6.2 cm x 5.6 cm hypoechoic cystic lesion present. This appears to be a benign renal cortical cyst. No evidence of neoplasia or infectious disease (i.e., abscess) are seen. The fluid appears to be clear and not flocculant.

The left kidney presents normal size (6.8 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis.

Adrenal Glands

The right adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The cranial pole measures 6.7 mm and the caudal pole measures 5.6 mm.

The left adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The cranial pole measures 6.2 mm and the caudal pole measures 5.9 mm.

Spleen

The spleen is normal in size, shape, margination and echogenicity. No masses are seen.

Liver

The liver is normal in size and shape. No specific liver lesions are seen. As compared to the spleen, the liver has a normal echogenicity. Overall, no obvious abnormalities are seen within the liver.

The gallbladder presents normal size with anechoic contents. Normal gallbladder wall. No evidence of bile duct distention or obstruction.

Gastrointestinal

The stomach and intestines have normal wall layering and thickness. Colon contains normal contents with normal wall thickness.



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Pancreas

The visible pancreas is normal in size with normal echogenic parenchyma and surrounded by normal peri-pancreatic mesentery.

Free Abdomen

There are no enlarged abdominal lymph nodes seen on this exam. No free abdominal fluid is seen.

ULTRASONOGRAPHIC FINDINGS

- Right kidney cyst (most likely benign)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

It is unlikely that the kidney cyst is the cause of the patient's decreased appetite in the report of jaundice and liver enzyme elevations. This is most likely a benign cyst.

I recommend monitoring periodically kidney values and ultrasound to determine if any changes occur with renal function, or if the cyst begins to enlarge, or the material becomes to become flocculant within the cyst, then consider draining it and submitting fluid for culture and cytology.

In regard to the patient's jaundice and liver enzyme elevation, the liver did not appear subjectively abnormal on this ultrasound.

It is reported that liver aspirates were taken today for cytology and culture. This is excellent. I recommend waiting for these results to be returned. If the results are negative, then if the enzyme elevation and jaundice persists, then recommend a liver biopsy. I would have recommended leptospirosis PCR testing, but that is reported to already be done. If positive, recommend treating with doxycycline at 5.0 mg/kg BID for 21 days, and should resolve hepatopathy if that is the cause of the hepatopathy.



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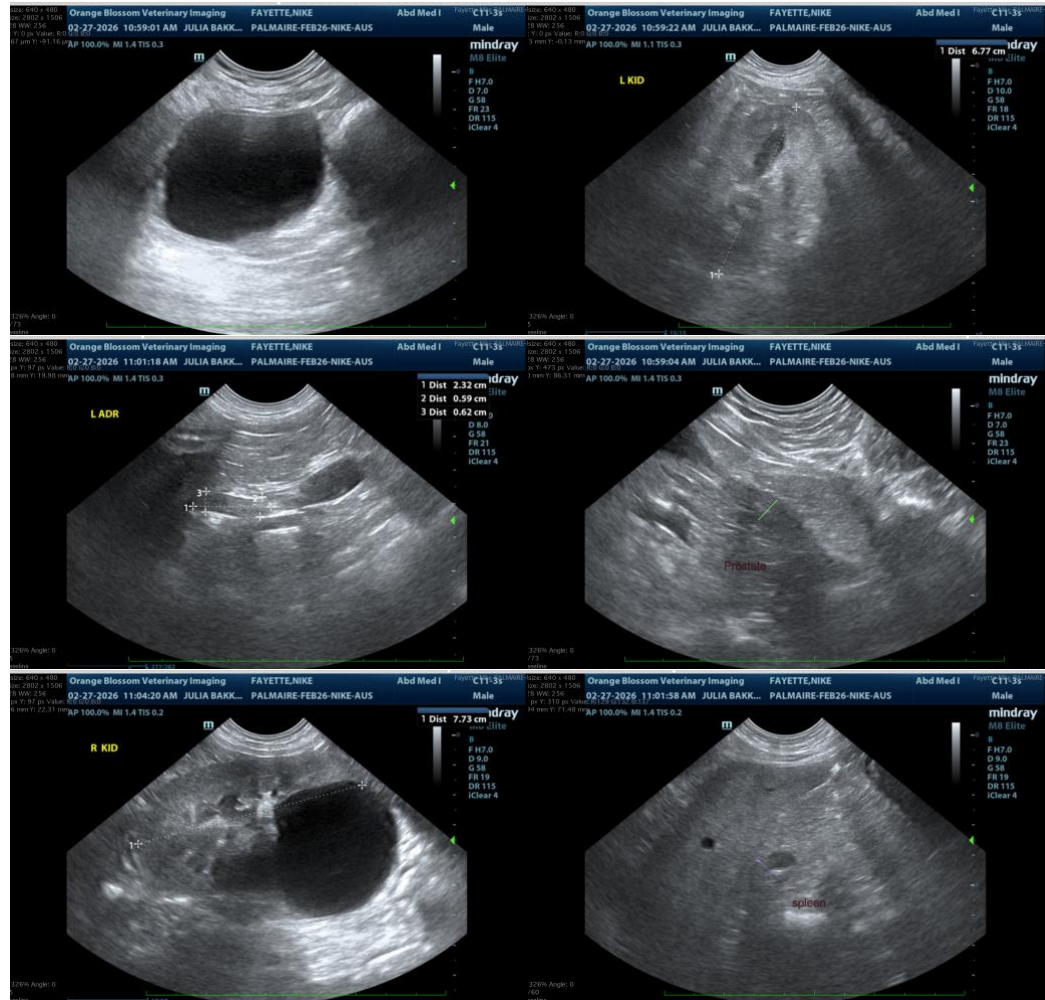
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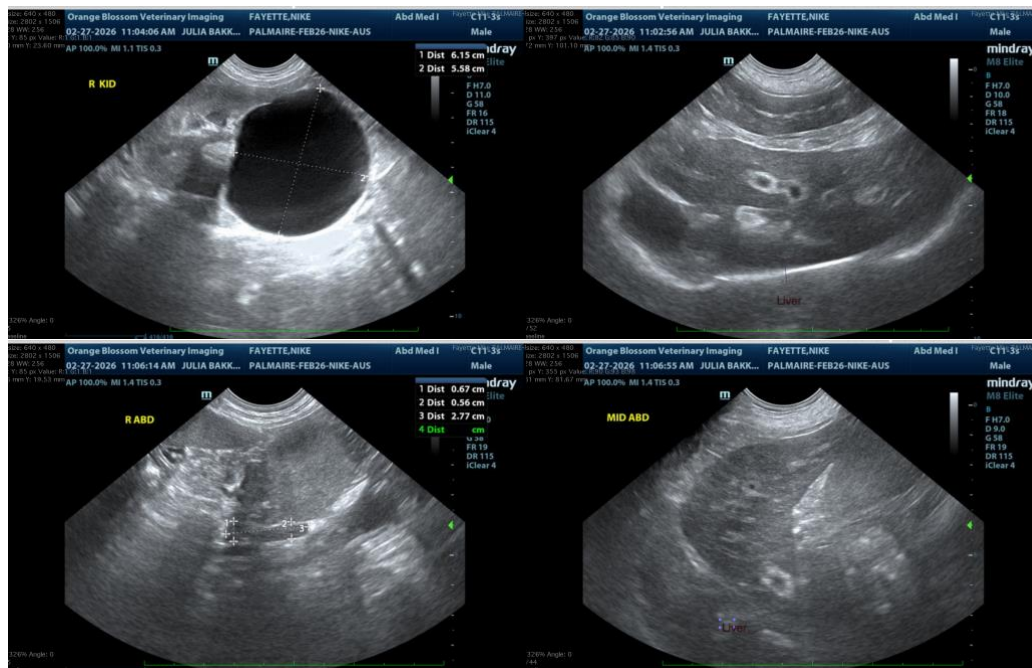
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Greg Kuhlman, DVM, DACVIM (SAIM)

Veterinary Internal Medicine Specialist
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