



PATIENT

Eddie Belcher

SPECIES

Canine

BREED

Terrier x

SEX

Neutered Male

AGE

11 Years 11 Months

WEIGHT

26 lbs

INTERPRETED BY

Greg Kuhlman, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Milad Gendi

HOSPITAL NAME

Severn River Animal
Hospital

REFERRING VET

Dr. Milad Gendi

INVOICE

73833

DATE

3/19/26

PRESENTING CLINICAL SIGNS

Presented for sedated AUS. ATO, e/d/u/d normally; no v/d/c/s. Activity level is normal. O is concerned about the weight loss since winter which is why we are doing AUS, that and the liver issues. Last ate yesterday AM. 1/2 T 100mg trazodone given during check in. 0.3mL Torb IV given prior to ultrasound. Prevention: None Food: Raw Diet, Rabbit and Duck and Veggies 1/2 lb a day.

Current Medications: Denamarin Adv- 3 days ago, O is unsure of name. Joint supplement daily

Abnormal PE/Chem/CBC/UA Results: ALT (SGPT) 285 12-118 IU/L ALK PHOS 148 5-131 IU/L BUN 45 6-31 mg/dL BUN/CREAT RATIO 32 4-27 TRIGLYCERIDE 326 29-291 mg/dL HGB 22.7 12.1-20.3 g/dL HCT 63 36-60 % Sample Conditions - Hemolysis 2+, Lipemia 2+ No significant interference

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 papillae seen.

The right kidney presents normal size (4.2 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis.

The left kidney presents normal size (2.9 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis.

Adrenal Glands

The right adrenal gland is not seen on this exam.

The left adrenal gland is slightly small in size, measuring 2.4 mm at the caudal pole. The cranial pole is not seen.

Spleen

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

Liver

The liver presents normal size and shape with smooth lobar margins. The parenchyma has normal echogenicity with normal echotexture. No focal lesions are seen. Intrahepatic bile ducts are normal. Normal vascular pattern.

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

Eddie Belcher

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

SPECIES

Free Abdomen

Canine

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

BREED

ULTRASONOGRAPHIC FINDINGS

Terrier x

- Mildly small left adrenal gland.

SEX

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Neutered Male

Recommend submitting resting cortisol to rule out hypoadrenocorticism. If <2.0, then perform ACTH stimulation test to further evaluate for the possibility of hypoadrenocorticism.

AGE

No cause for the patient's mildly elevated liver values or reported weight loss seen on this exam. Given that the patient's triglycerides are elevated, consider hypertriglyceridemia and a mild lipid vacuolar hepatopathy as the cause for the mildly elevated liver values.

11 Years 11 Months

WEIGHT

Consider switching the patient to an ultras low-fat diet and rechecking triglycerides in 10-14 days to verify they are within the normal range. Periodically recheck liver values to determine if hypertriglyceridemia is the cause of the mildly elevated liver values.

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If hypertriglyceridemia is not the cause of the elevated liver values, then recommended submitting a Texas A&M GI panel to screen for occult pancreatic or gastrointestinal disease as a cause of the elevated liver values.

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Ultimately, if no secondary cause is identified for the mild hepatopathy and the liver enzyme remain persistently elevated or are increasing, then a liver biopsy would be recommended at that time to determine the underlying cause. If a biopsy is performed, recommend samples be submitted for histopathology, copper quantitation, and aerobic and anaerobic bacterial culture.

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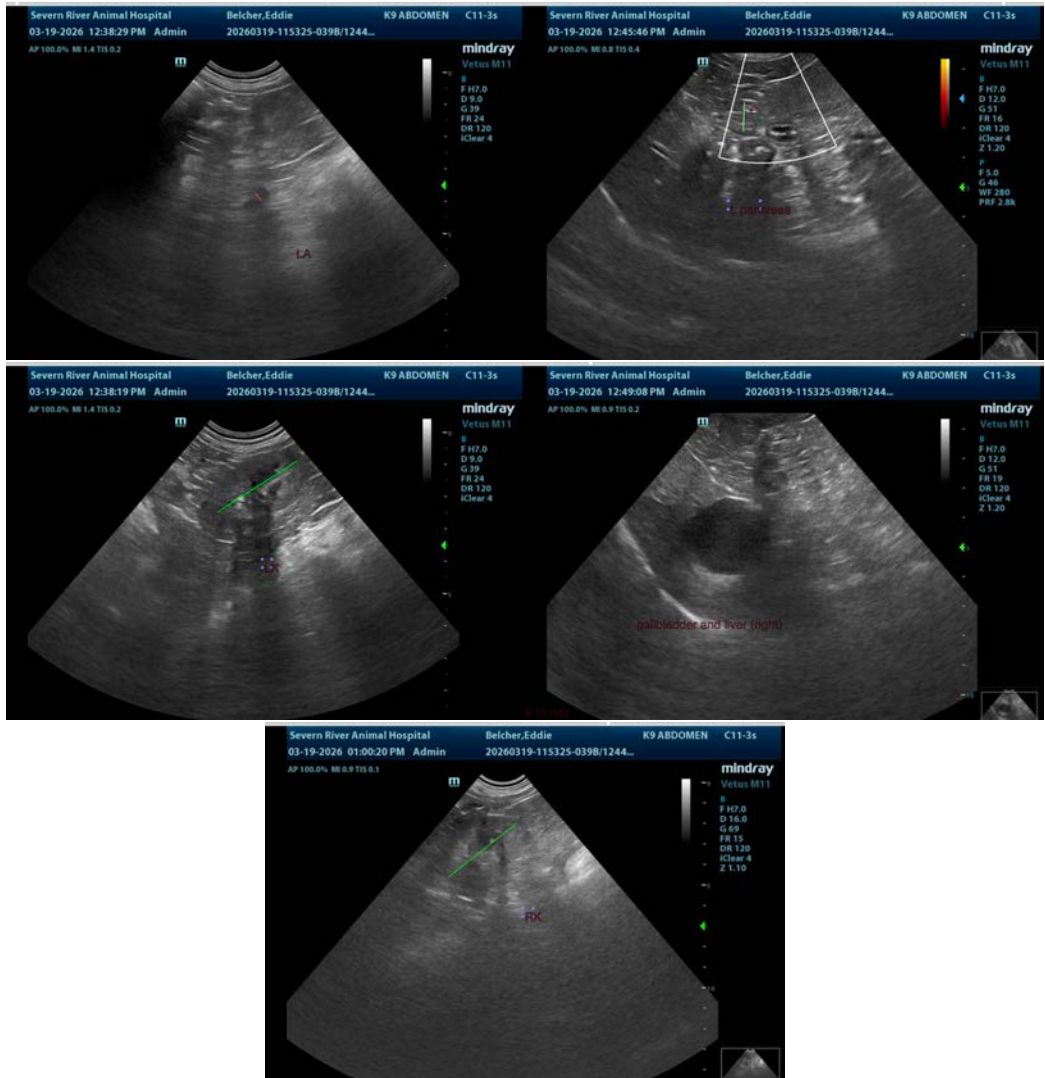
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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