



## PATIENT

Greyson Powell

## SPECIES

Canine

## BREED

English Setter

## SEX

Male

## AGE

9 Years

## WEIGHT

63

## INTERPRETED BY

Greg Kuhlman, DVM,  
DACVIM (SAIM)

## IMAGING PERFORMED BY

Dr. Casper

## HOSPITAL NAME

Hometown Animal  
Hospital Florida

## REFERRING VET

Dr. Gavin Casper

## INVOICE

15063

## DATE

04/13/26

## PRESENTING CLINICAL SIGNS

No clinical signs. Hypothyroid managed on 0.4mg thyrotabs Q12. R/o changes noted on recent bloodwork panel + wellness screen

Abnormal PE/Chem/CBC/UA Results: Elevated cholesterol (421), precisionPSL (460) T4 panel - t4 (2.1), ft4 (1.03), t3 (6.1), free t3 (1.5), t4/ft4 (2.04)

## 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.

The bilateral testicles appear normal.

The left kidney presents normal size with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis. The left kidney measured 7.3 cm in length.

The right kidney presents normal size with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis. The right kidney measured 7.8 cm in length.

### *Adrenal Glands*

The left and right adrenal gland were not seen.

### *Spleen*

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

### *Liver*

The liver presents normal in size and shape. There are several hyperechoic ill-defined foci throughout the parenchyma of the liver. These are consistent with benign regenerative nodules. One in the mid-liver measures 4.8 mm in width. A second more cranial measures 3.4 mm in width. Much less likely, these lesions would be due to neoplasia such as lymphoma or mast cell disease and less likely these lesions would represent metastatic neoplasia.

Gallbladder is moderately distended with anechoic bile as well as suspended and gravity dependent echogenic debris. The wall is smooth without visible thickening. There is no evidence of cystic or CBD dilation. There is no evidence of effusion or inflammation.

### *Gastrointestinal*

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

### *Pancreas*



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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**

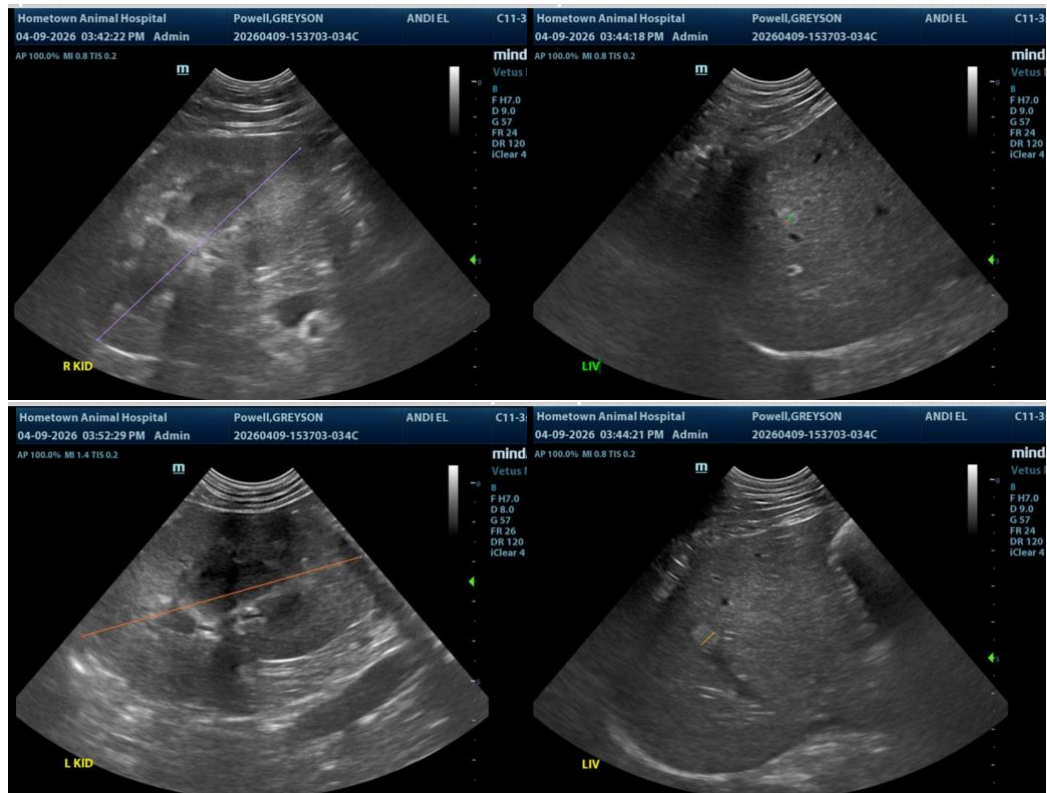
- Hypoechoic liver lesions.
- Gallbladder debris.

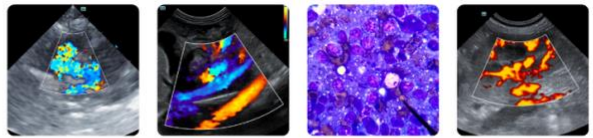
**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Recommend rechecking liver ultrasound in six to eight weeks to evaluate for any changes in the hypoechoic lesions.

No cause for the patient's mild elevated cholesterol or elevated precision PSL is seen on this exam. It is possible that the elevated cholesterol might potentially be due to patient's hypothyroidism. Consider increasing the patient's levothyroxine dose to achieve a 2-4 hour post-pill T4 value that is in the upper end of the normal range or possibly mildly increased over the top end of the reference range.

In regard to the elevated precision PSL, consider submitting a cPLI to verify that pancreatic inflammation is indeed present. If pancreatic inflammation is confirmed, consider switching patient to an ultra-low-fat diet and rechecking this value after 30 days.





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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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