



PATIENT

Pym Rose

SPECIES

Canine

BREED

Samoyed

SEX

Spayed Female

AGE

4 Years 7 Months

WEIGHT

39.4 pounds

INTERPRETED BY

Greg Kuhlman, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Kevin Moon DVM

HOSPITAL NAME

Shiloh Veterinary
Hospital

REFERRING VET

Dr. David Schneider
DVM

INVOICE

14883

DATE

04/06/26

PRESENTING CLINICAL SIGNS

Has history of seizures/epilepsy. Was on phenobarbital and keppra but ALT went up. Now on keppra and zonisamide for seizures. Chronic struggle maintaining weight- young, but low BCS (4/9). On hypoallergenic diet and Budesonide

Abnormal PE/Chem/CBC/UA Results: Cobalamin Fasting: (251-908 ng/L) 245 ng/L Alk Phosphatase 185IU/L (5-131)

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 papilla was 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 4.0 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 4.7 cm in length.

Adrenal Glands

The left and right adrenal glands were not clearly visualized.

Spleen

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

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.

Pancreas

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

Free Abdomen



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

ULTRASONOGRAPHIC FINDINGS

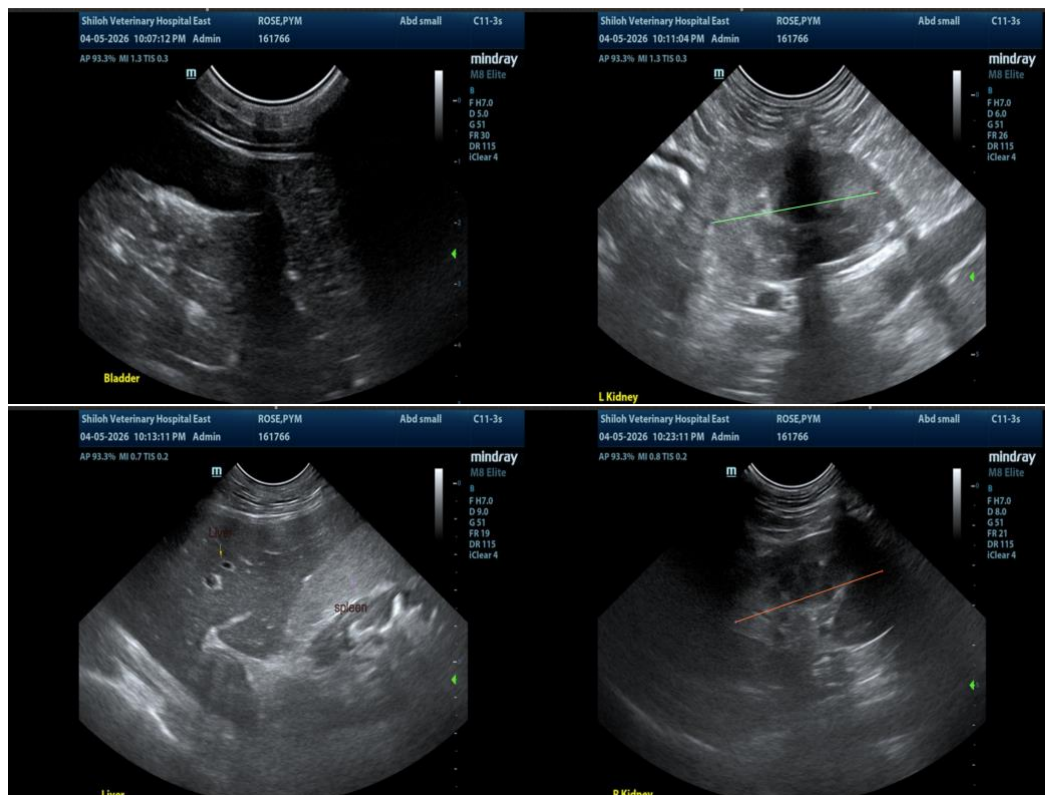
- Structurally normal abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No cause for the patient's low cobalamin identified on this exam. No cause for the patient's difficulties maintaining their body weight seen on this exam. Given subnormal cobalamin of 245 nanograms per liter, recommend cobalamin supplementation. Recheck cobalamin in three months after starting supplementation.

No cause for the patient's elevated alkaline phosphatase seen on this exam. There is a small subset of patients that will develop an elevated alkaline phosphatase while taking budesonide. Consider this as a possibility. Recommend screening for GI parasitism via a fecal pathogen PCR. If no secondary cause is identified for the patient's low cobalamin, then ultimately GI biopsies either surgically or endoscopically would be recommended.

Prior to performing GI biopsies, discontinue budesonide for at least one week. Submit a resting cortisol prior to biopsy to definitively rule out hypoadrenocorticism as a cause of patient's poor weight gain. If resting cortisol is normal, then proceed with GI biopsies if no other cause is identified for patient's inappropriate weight gain.





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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.

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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.

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Veterinary Internal Medicine Specialist

info@SonoPath.com

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