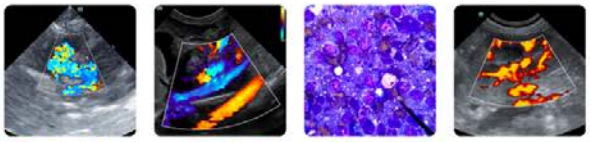


PATIENT

Teddy Miller

SPECIES

Canine

BREED

Poodle

SEX

Neutered Male

AGE

8 Years

WEIGHT

6.5 kg

INTERPRETED BY

Greg Kuhlman, DVM, DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Gira

HOSPITAL NAME

McKnight Veterinary Hospital

REFERRING VET

Dr. Gruffydd

INVOICE

75477

DATE

5/27/26

PRESENTING CLINICAL SIGNS

Weight loss, PU/PD, trying to determine if safe for anesthesia as pt needs dental. Recent diarrhea
Abnormal PE/Chem/CBC/UA Results: BW and urinalysis unremarkable

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Within the urinary bladder there is a hyperechoic urolith present that is non-shadowing, measuring 1.2 cm in length x 0.30 cm in width. There is also a moderate amount of urinary bladder debris present.

The prostate appears normal, measuring 0.10 cm in width. It is uniform in echogenicity and symmetrical in shape.

The right kidney presents normal size (4.8 cm) with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis.

The left kidney presents normal size (4.8 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 4.7 mm and the caudal pole measures 5.0 mm.

The left adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The cranial pole measures 5.4 mm and the caudal pole measures 4.9 mm.

Spleen

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

Liver

In the caudate lobe of the liver there is a 6.9 cm x 4.8 cm heterochoic mass lesion present. There are multifocal to coalescing lesions within the liver. These lesions have hypoechoic rims and the centers are hyperechoic, consistent with target lesions. A representative lesion measures 2.3 cm in width.

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

The area of the left and right pancreas is seen, no pathology noted.

PATIENT

Teddy Miller

SPECIES

Canine

BREED

Poodle

SEX

Neutered Male

AGE

8 Years

WEIGHT

6.5 kg

INTERPRETED BY

Greg Kuhlman, DVM, DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Gira

HOSPITAL NAME

McKnight Veterinary Hospital

REFERRING VET

Dr. Gruffydd

INVOICE

75477

DATE

5/27/26

Free Abdomen

A mildly enlarged medial iliac lymph node is noted measuring 4.4 mm in width and 7.6 mm in length. This is most likely reactive, less likely neoplastic.

Multiple prominent mesenteric lymph nodes are present. A representative node measures 2.7 mm in width and 7.8 mm in length. Most likely reactive, much less likely to be enlarged due to neoplasia.

A scant pocket of free fluid is noted caudal to the urinary bladder. This pocket of fluid appears too small to be able to easily obtain an ultrasound guided abdominocentesis of the fluid. No obvious cause for the fluid seen on this exam.

ULTRASONOGRAPHIC FINDINGS

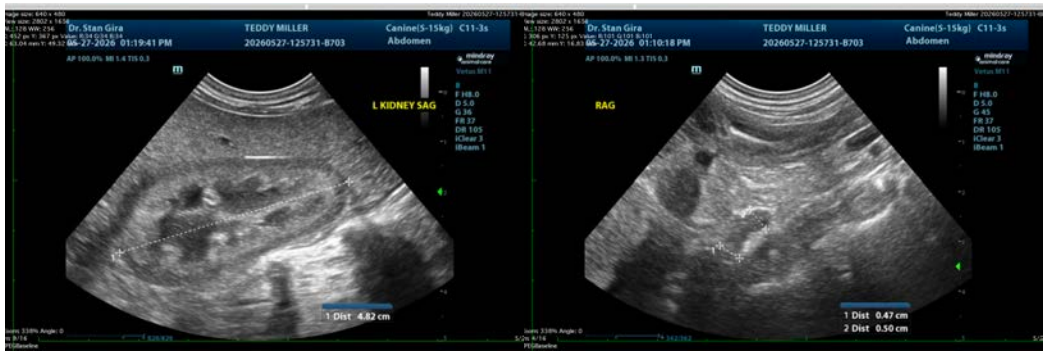
- Urinary bladder debris and urolith.
- Liver mass and target lesions.
- Gallbladder debris.
- Mildly enlarged medial iliac lymph node, likely reactive.
- Prominent mesenteric lymph nodes, likely reactive.
- Scant free fluid caudal to the urinary bladder.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mass present in the liver is most likely primary hepatobiliary neoplasia, hepatocellular carcinoma or cholangiocarcinoma. Recommend a fine needle aspirate. If non-diagnostic, recommend a CT scan of the abdomen as pre-surgical planning to determine resectability of the mass lesion. If the mass is deemed resectable, recommend surgery, submitting the mass for histopathology.

The appearance of the target lesions within the liver is consistent with malignant neoplasia, most likely metastatic. The mass in the caudate lobe of the liver may be the primary tumor.

Recommend starting a dissolution diet to determine if the stone in the urinary bladder can be dissolved over the next 4 weeks and recheck ultrasound at that time. If the urolith has not changed in size, recommend cystotomy and submission of the stone to the University of Minnesota Urolith Lab for diagnosis and treatment recommendations. Given the urinary bladder debris, recommend urinalysis and urine culture if not already performed.



PATIENT

Teddy Miller

SPECIES

Canine

BREED

Poodle

SEX

Neutered Male

AGE

8 Years

WEIGHT

6.5 kg

INTERPRETED BY

Greg Kuhlman, DVM, DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Gira

HOSPITAL NAME

McKnight Veterinary Hospital

REFERRING VET

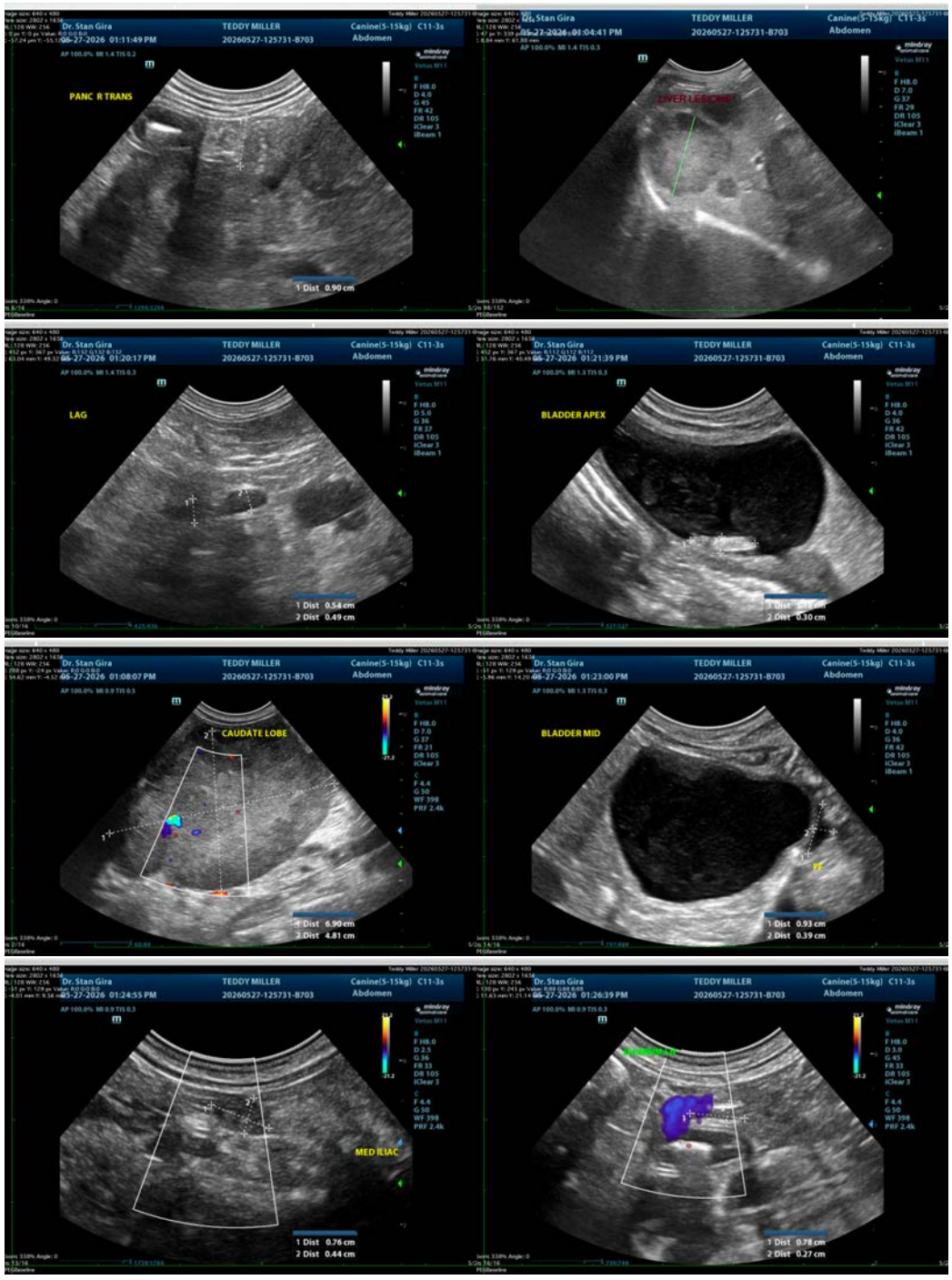
Dr. Gruffydd

INVOICE

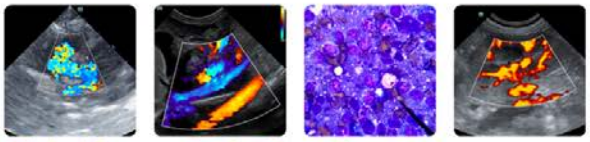
75477

DATE

5/27/26



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Teddy Miller

SPECIES

Canine

BREED

Poodle

SEX

Neutered Male

AGE

8 Years

WEIGHT

6.5 kg

INTERPRETED BY

Greg Kuhlman, DVM, DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Gira

HOSPITAL NAME

McKnight Veterinary Hospital

REFERRING VET

Dr. Gruffydd

INVOICE

75477

DATE

5/27/26

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
info@SonoPath.com