



PATIENT

Beasley Paldi

SPECIES

Canine

BREED

Labradoodle

SEX

Spayed Female

AGE

14 Years

WEIGHT

12.6 lbs

INTERPRETED BY

Greg Kuhlman, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Laura Klaassen

HOSPITAL NAME

Animal Care Group of
Lake Oswego

REFERRING VET

Dr. Todd Inman

INVOICE

75991

DATE

6/17/26

PRESENTING CLINICAL SIGNS

Weight loss, normal lab work, history of IBD dx managed with budesonide in 2019

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.

Kidneys are overall normal in size and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased cortical echogenicity and mild loss of corticomedullary distinction, expected in this age patient. Mild renal pelvic dilation is noted in the left kidney with the surrounding renal pelvic tissue being mildly hyperechoic. The left renal pelvis measures 1.7 mm in width. There is no evidence of mineral or infarcts observed. Left kidney measured 3.4 cm. Right kidney measured 3.1 cm.

Adrenal Glands

The right adrenal gland was not clearly visualized on this exam.

The left adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The cranial pole measures 2.5 mm and the caudal pole measures 3.4 mm.

Spleen

Spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). Multifocal well-demarcated hyperechoic homogenous nodules are noted. Splenic vasculature appears normal.

Liver

Liver is relatively normal in size and contour. Parenchyma is mildly heterogenous and coarse with mild likely age-related parenchymal remodeling noted. Multifocal hypoechoic ill-defined, non-capsule displacing lesions are noted throughout the parenchyma. Visible vasculature and biliary tree appear normal without distension or congestion.

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



PATIENT

Beasley Paldi

SPECIES

Canine

BREED

Labradoodle

SEX

Spayed Female

AGE

14 Years

WEIGHT

12.6 lbs

INTERPRETED BY

Greg Kuhlman, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Laura Klaassen

HOSPITAL NAME

Animal Care Group of
Lake Oswego

REFERRING VET

Dr. Todd Inman

INVOICE

75991

DATE

6/17/26

Free Abdomen

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

ULTRASONOGRAPHIC FINDINGS

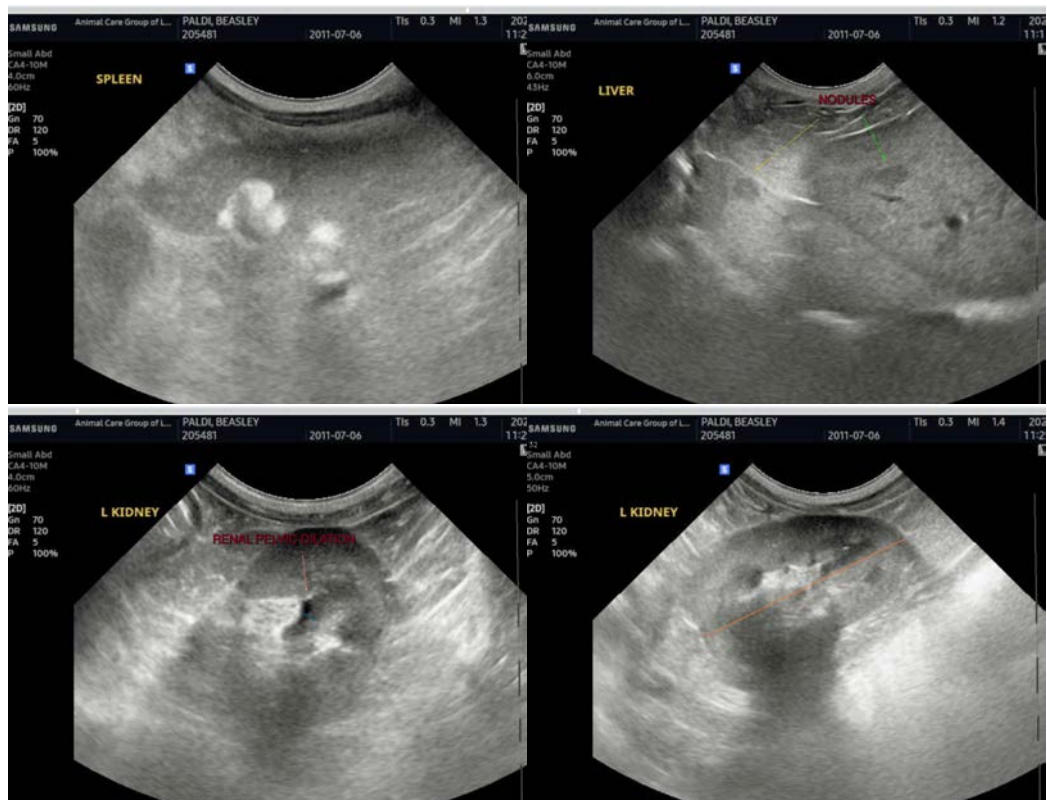
- Age related renal changes.
- Hyperechoic splenic nodules.
- Age related hepatic changes with gallbladder debris.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The hypochoic hepatic lesions are most consistent with benign regenerative nodules, much less likely metastatic neoplasia.

The gallbladder debris appears clinically insignificant at this time.

No obvious cause for the patient's weight loss seen on this exam. Given the reported normal lab work, the changes on today's exam do not appear to be significant at this time. Consider submitting a GI panel include cPLI, TLI, cobalamin and folate to screen the patient for occult gastrointestinal disease that is potentially not being fully managed with Budesonide. If GI panel does confirm the presence of gastrointestinal disease, consider a diet trial with a hydrolyzed diet to treat the GI disease. If weight loss continues, consider submitting fecal pathogen PCR testing to rule out GI parasitism. If no identifiable cause is found for the patient's GI disease at that time, GI biopsies would be recommended.





PATIENT

Beasley Paldi

SPECIES

Canine

BREED

Labradoodle

SEX

Spayed Female

AGE

14 Years

WEIGHT

12.6 lbs

INTERPRETED BY

Greg Kuhlman, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Laura Klaassen

HOSPITAL NAME

Animal Care Group of
Lake Oswego

REFERRING VET

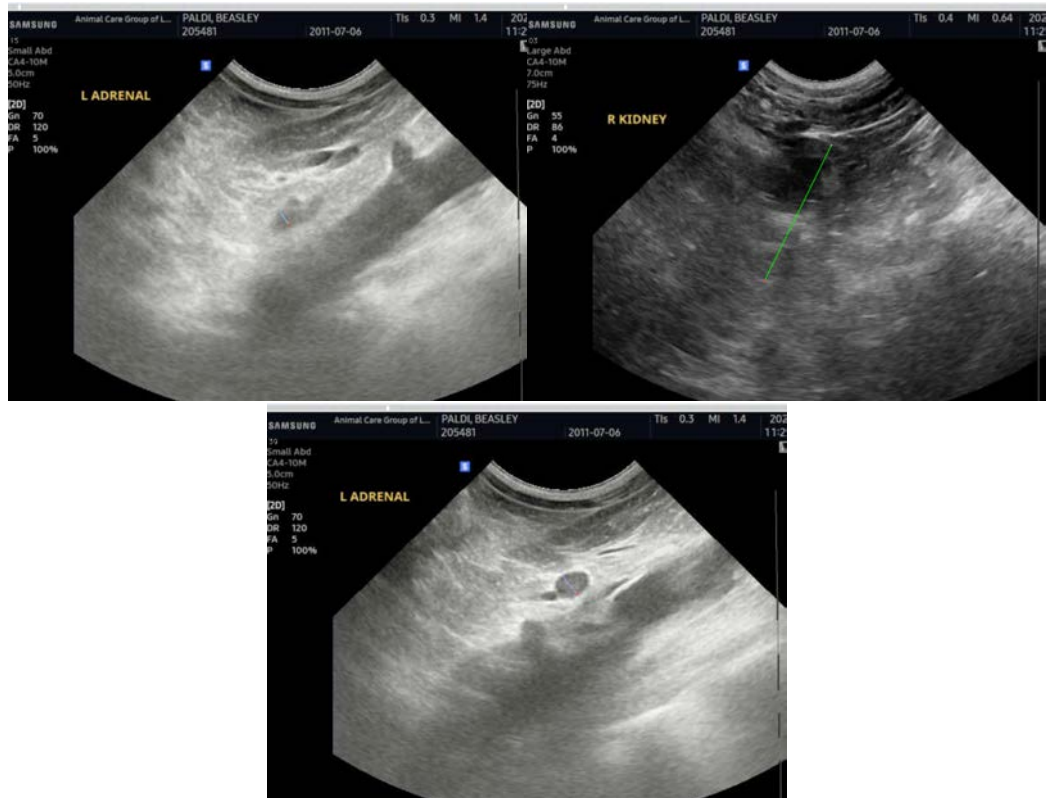
Dr. Todd Inman

INVOICE

75991

DATE

6/17/26



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