



PATIENT

Tommy Sen

SPECIES

Canine

BREED

Shorkie

SEX

Neutered Male

AGE

9 Years 9 Months

WEIGHT

16 lbs

INTERPRETED BY

Greg Kuhlman, DVM,
DACVIM (SAIM)

IMAGING PERFORMED BY

Dr. Melissa Rosen

HOSPITAL NAME

South Bellmore
Veterinary Group

REFERRING VET

Dr. Melissa Rosen

INVOICE

16460

DATE

06/08/26

PRESENTING CLINICAL SIGNS

Pet has been losing weight and is PU/PD over the last few months. Eating well. No C/S/V/D. Shivering. Back legs are unstable. Unable to jump on couch. Tripping over back legs

Abnormal PE/Chem/CBC/UA Results: pain with back palpation, mild ALP 592 chol 516 TT4 0.6 UA with UPC pending full thyroid panel pending

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 prostate is normal and measures 6.2 mm width.

The left kidney presents normal size with normal shape and architecture. Normal corticomedullary distinction. No pyelectasia, ureteral dilation or nephrolithiasis. The left kidney measured 4.8 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 4.5 cm in length.

Adrenal Glands

The left adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The cranial pole measures 5.1 mm and the caudal pole measures 6.0 mm.

The right adrenal gland presents normal shape and homogenous parenchyma. The phrenic vasculature is unremarkable. The cranial pole measures 4.0 mm and the caudal pole measures 4.7 mm.

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.

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

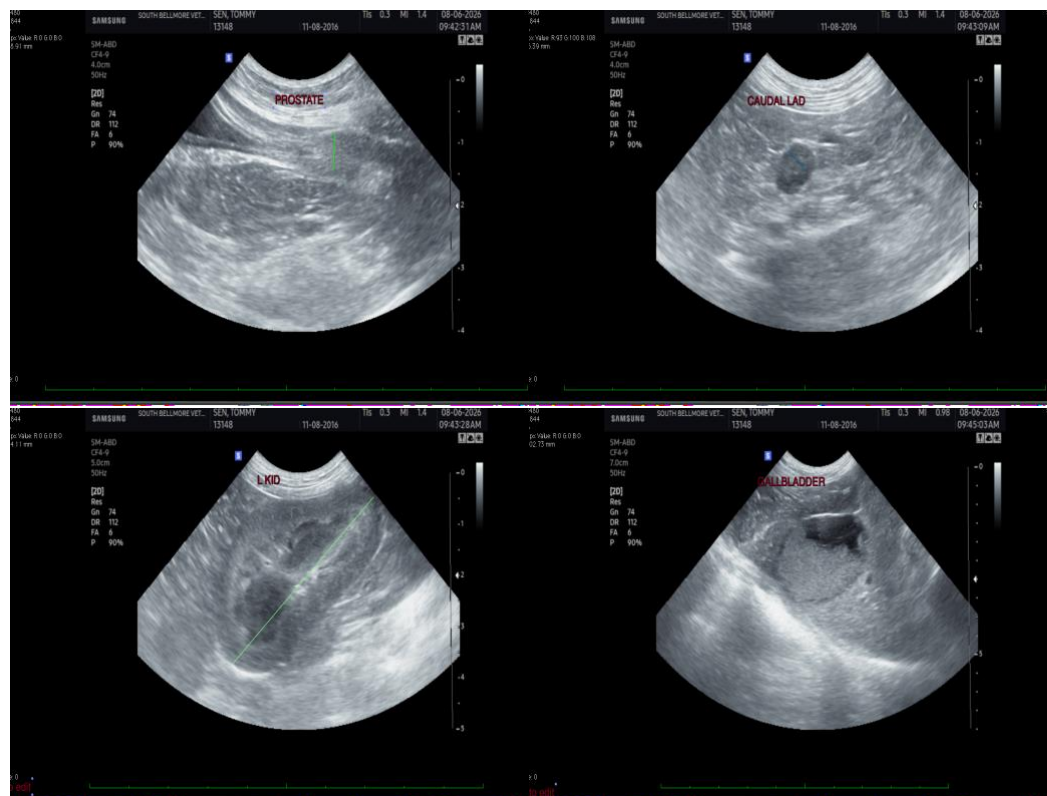
- Moderate gallbladder debris.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend Ursodiol at 15 mg/kg by mouth split into two daily doses. Recheck appearance of gallbladder in two to three months of treatment.

No cause for the mild ALP elevation is seen on this exam. The hypercholesterolemia may potentially be due to hypothyroidism. Reportedly, there is a thyroid panel pending. Recommend submitting a GI panel that includes a cPLI, TLI, cobalamin, and folate to evaluate further for the cause of the elevated alkaline phosphatase. It is possible the patient has occult pancreatitis not seen on this exam which may be causing the mildly elevated ALP.

Given the patient's clinical signs of difficulty jumping onto the couch and ataxia, consider referral to a neurologist for a complete comprehensive neurology exam.





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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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