



PATIENT	PRESENTING CLINICAL SIGNS
Leila Meyers	History: P presented 4/8/26 for a distended/tense abdomen. PE revealed cranial organomegaly - likely hepatic based on radiograph. O declined blood work. Right lateral and VD abdominal radiographs - liver extends past the rib cage. Food - like material present within the stomach. No obvious mass effects or foreign body. O came back for repeat fasted radiograph today 4/28/26. Abdomen still tense/distended. Radiograph shows possible mass effect in cranial abdomen. Ultrasound to evaluate further
SPECIES	Abnormal PE/Chem/CBC/UA Results: No recent labs
Canine	
BREED	
Poodle Mix	
SEX	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Spayed female	Urinary System
AGE	The urinary bladder , trigone and pelvic urethra presented with normal wall thicknesses with anechoic urine and normal tone. No uroliths or masses were noted in the lumen of the bladder. No evidence of inflammatory or neoplastic changes were noted. The ureters were not visible and considered normal.
12 years	The kidneys revealed normal size, corticomedullary definition and ratio with the cortex being 1/3 of medulla. Medullary echogenicity differed distinctly from that of the cortex and no evidence of dilation could be seen. The renal pelvic diverticuli were distinct in character. The capsules were acceptably uniform without dramatic irregularities. Both kidneys had multiple, discrete, hyperechoic, distal shadowing foci of mineralization within the renal medulla. The left kidney was <u>3.46 cm</u> and the right kidney was <u>3.46 cm</u> in length.
WEIGHT	
11.4 lbs	
INTERPRETED BY	
Kim Radway, DVM, DABVP (Canine/ Feline)	Adrenal Glands
IMAGING PERFORMED BY	The left adrenal gland was visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were acceptable. The left adrenal gland was <u>1.5 cm by 0.7 cm by 0.6 cm</u> . The region of the right adrenal gland was evaluated, but not specifically identified.
Brandi Kurzowski	
HOSPITAL NAME	Spleen
Corfu VC	The spleen presented with a smooth homogeneous parenchyma hyperechoic to liver and kidney. The capsule was smooth and linear in its contour. The splenic vasculature demonstrated normal volume without signs of congestion, significant contraction, or thrombosis. There were multiple, discrete, hyperechoic, myelolipomas present along the splenic vasculature. The two largest measured 1.2 x 1.16 cm and 0.64 x 0.84 cm in size.
REFERRING VET	
Dr. Greil	
INVOICE	Liver
74944	The liver revealed normal size, contour, and structure. Parenchymal echogenicity was smooth and homogenous in appearance. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented with 25% of the contents were hyperechoic and non-
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shadowing. The cystic and common bile ducts were normal. No periportal lymphadenopathy was evident.

Gastrointestinal

The **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. There was a small amount of gas in the lumen of the stomach. No obstructive or overt infiltrative disease was noted. No abnormal lymphatic activity was noted and the abdomen was free of gastrointestinal masses and pathological fluid.

Pancreas

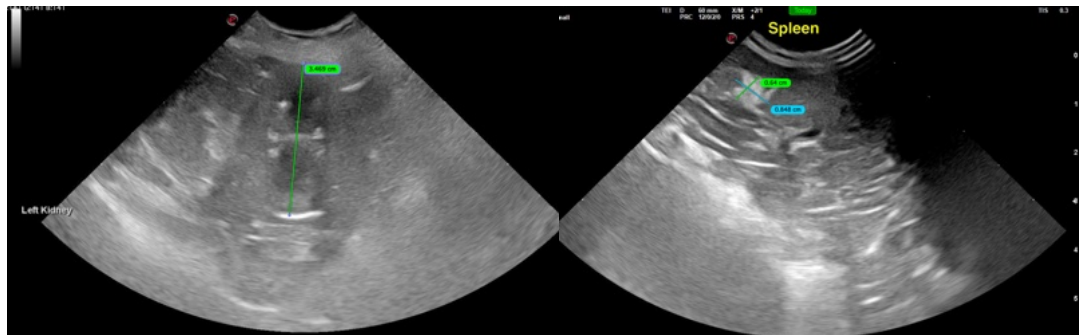
The right and left limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic capsular contour were acceptably normal. No overt evidence of active inflammatory or neoplastic disease was noted.

ULTRASONOGRAPHIC FINDINGS

Nephroliths and foci of mineralization within both renal medulla.
Benign splenic myelolipomas.
Hepatomegaly.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Despite the hepatomegaly noted on abdominal radiographs, there were no discrete, cranial abdominal masses visible in the images provided. The spleen did contain multiple, hyperechoic myelolipomas which are felt to be benign. Since this patient has hepatomegaly with no discrete masses, it is strongly recommended to perform blood work including a CBC and chemistry panel in order to better assess underlying liver function. If this patient continues to have a tense and painful abdomen, it is also recommended to perform a musculoskeletal and neurologic exam to rule out referred back pain as a possible cause of this clinical presentation.





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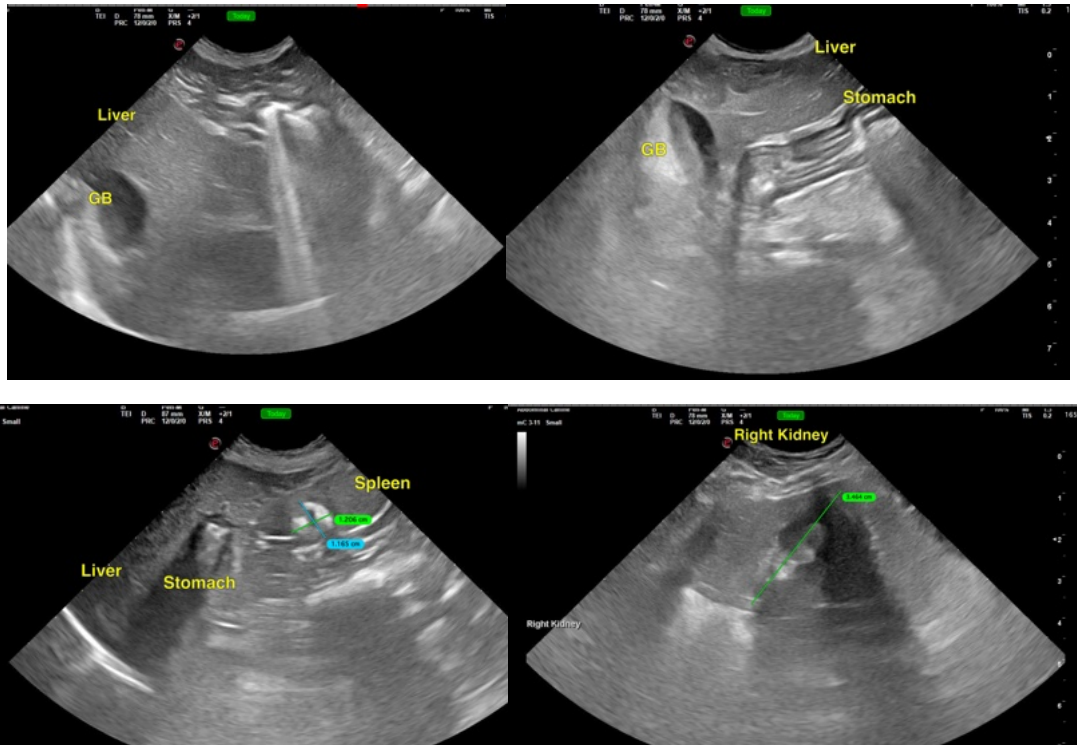
Dr. Greil

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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.

Kim Radway, DVM, DABVP (Canine/ Feline)

info@SonoPath.com