



PATIENT

Bella Moran

SPECIES

Canine

BREED

Yorkie

SEX

Female

AGE

11 Years

WEIGHT

7.2 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Allendale Veterinary
Hospital

REFERRING VET

Dr. Tartini

INVOICE

72251

DATE

1/15/26

PRESENTING CLINICAL SIGNS

Chronic diarrhea, fluctuating appetite, will improve with metro.
Abnormal PE/Chem/CBC/UA Results: 12/17/25 BUN-82 MG-3.3 NA-156 PSL-213 ALB-2.6

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

The left kidney has a normal shape and size (3.53 cm) with pyelectasia at 0.24 cm. Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (3.57 cm) with pyelectasia at 0.21 cm. Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size measuring 0.42 cm at the cranial pole and 0.70 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The right adrenal gland is normal in size measuring 1.1 cm at the cranial pole and 0.61 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

Spleen

The spleen is subjectively normal in size (0.67 cm), echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. There is a hyperechoic nodule in the parenchyma measuring 0.36 cm.

Liver

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are mild and likely incidental at this time. The cystic and common bile ducts are normal/not visible.



PATIENT

Bella Moran

SPECIES

Canine

BREED

Yorkie

SEX

Female

AGE

11 Years

WEIGHT

7.2 lbs

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Allendale Veterinary
Hospital

REFERRING VET

Dr. Tartini

INVOICE

72251

DATE

1/15/26

Gastrointestinal

The stomach contains minimal luminal contents. It measures at a normal thickness of <0.7cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

The visualized areas of duodenum, jejunum and ileum have a uniform diameter with minimal fluid distension. Wall thickness is increased. Bowel loops follow a typical curvilinear path. Duodenum wall measures 0.55 cm. Jejunum wall measures 0.39 cm. There is mild mucosal speckling and fogging visualized associated with the duodenum. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

Sections of colon are visualized with formed fecal material and gas shadowing distally. The descending colon wall appears slightly prominent with intact wall layering, measuring at 0.32 cm.

Pancreas

The area of the pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

ULTRASONOGRAPHIC FINDINGS

- Age related changes visualized associated with both kidneys as well as bilateral pyelectasia – Pyelectasia of the kidney(s) could be consistent with pyelonephritis, chronic renal disease, secondary to PU/PD or fluid therapy (if applicable), other.
- Hyperechoic splenic nodule – Findings are most consistent with a benign myelolipoma. Recommend continued monitoring.
- Mildly thickened small intestine with mild mucosal speckling and fogging in the duodenum – Bright mucosal speckling has been postulated to represent dilated lacteals or focal accumulations of mucus, cellular debris, etc.. in the mucosal crypts.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The small intestine appears mildly diffusely thickened, and there are some sections of small intestine (primarily duodenum) that has mild fogging and mucosal speckling. Findings are concerning for a primary enteropathy (possibly protein losing enteropathy). Consider the following for further evaluation:

- Recommend a combination ultra low-fat prescription and hydrolyzed protein prescription diet (Royal Canin).
- Consider a GI panel to Texas A&M for evaluation of B12 levels, folate, PLI/TLI etc.. to further evaluate for pancreatic/small intestinal disease.



PATIENT

Bella Moran

SPECIES

Canine

BREED

Yorkie

SEX

Female

AGE

11 Years

WEIGHT

7.2 lbs

INTERPRETED BY

Kathleen Sennello DVM,
 MS, Diplomate ACVIM
 (Small Animal Internal
 Medicine)

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

Allendale Veterinary
 Hospital

REFERRING VET

Dr. Tartini

INVOICE

72251

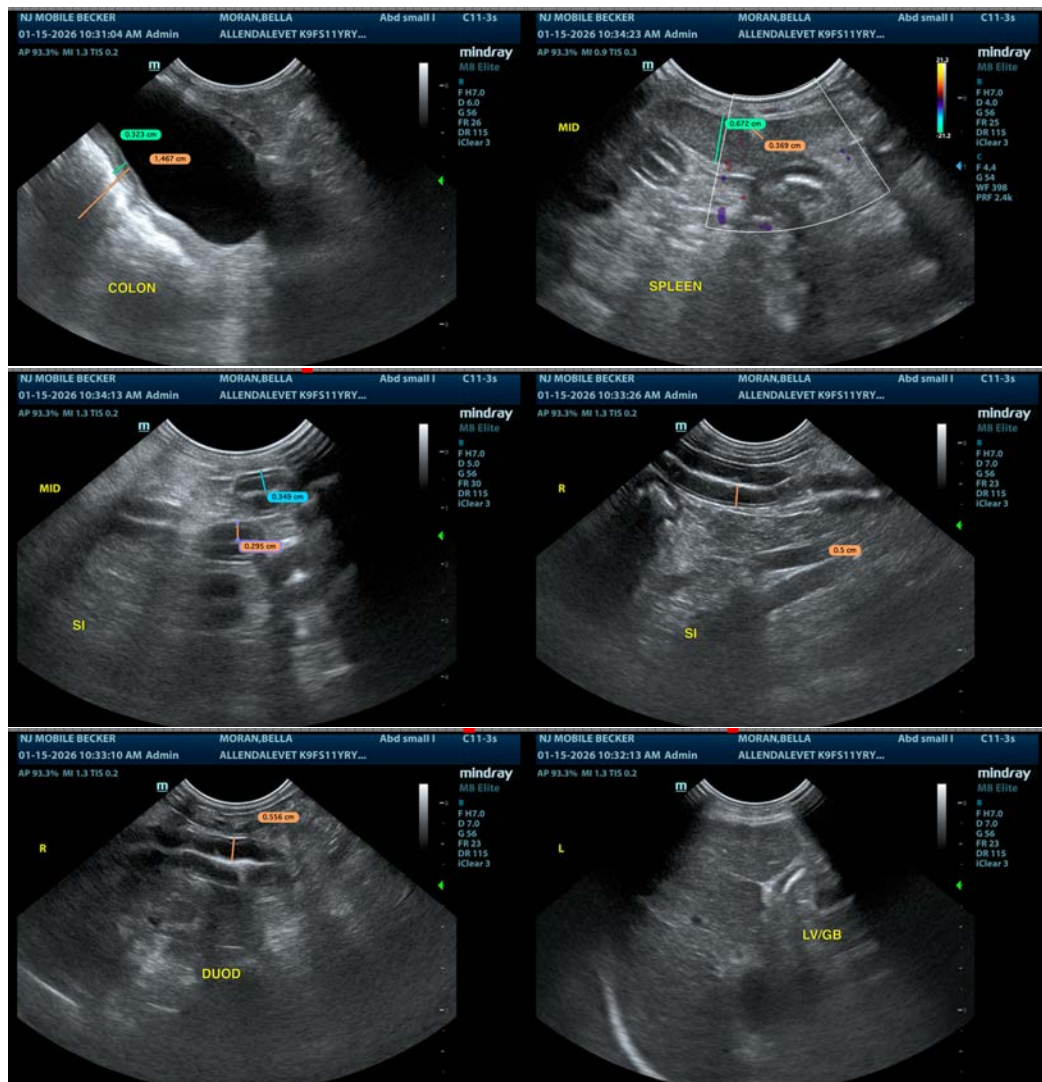
DATE

1/15/26

- Recommend chronic probiotic therapy.

If symptoms are persistent despite making these changes, consider biopsies to further evaluate. The most common differentials would include IBD and lymphangiectasia, less likely neoplastic change.

Both kidneys have changes consistent with chronic renal disease. Recommend a blood pressure, urinalysis and culture as a baseline, as well as a urine protein to creatinine ratio to look for significant proteinuria contributing to the borderline low albumin level reported.





PATIENT

Bella Moran

SPECIES

Canine

BREED

Yorkie

SEX

Female

AGE

11 Years

WEIGHT

7.2 lbs

INTERPRETED BY

Kathleen Sennello DVM,
 MS, Diplomate ACVIM
 (Small Animal Internal
 Medicine)

**IMAGING
 PERFORMED BY**

Kerri Becker

HOSPITAL NAME

Allendale Veterinary
 Hospital

REFERRING VET

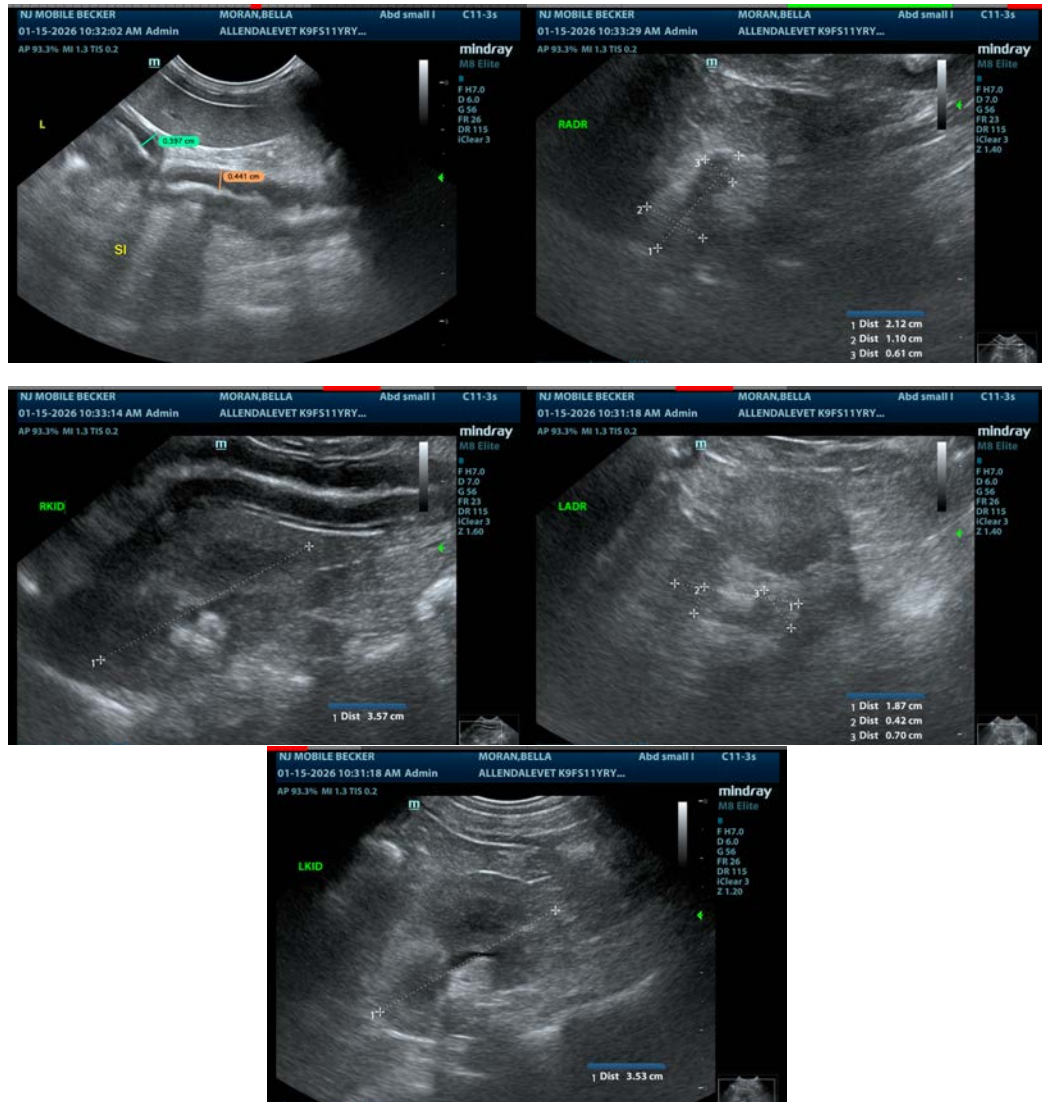
Dr. Tartini

INVOICE

72251

DATE

1/15/26



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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

info@sonopath.com