



PATIENT

Blu Castellana

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

9 years

WEIGHT

12.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Megan Cassels-
Conway

HOSPITAL NAME

Central Broward
Animal Hospital

REFERRING VET

Dr. Maryna Mullerman

INVOICE

11051

DATE

1/7/2026

PRESENTING CLINICAL SIGNS

Blu originally presented on 12/12/25 for severe anxiety, history of liver disease and periodontal disease. Lab work was recommended. After reviewing lab work, concerned for high triglycerides, cholesterol, ALP, and high globulins & low albumin as well as significant proteinuria. Patient was put on a Hills GI low fat diet for 4 weeks and recommended to recheck lab work after. UPC was 3.7 with a high level of concern for glomerular proteinuria. Abdominal ultrasound was recommended to screen for HAC, kidney and liver disease (familial vs. acquired).

Abnormal PE/Chem/CBC/UA Results: On PE: tense and distended abdomen with rounded/enlarged liver margins, severe periodontal disease, anxious/panting CBC: Plt 572 (H), Eos 1320 (H) CHEM: Alb 2.7 (LN), Glob 3.9 (H), A/G ratio 0.7 (L), ALT 121 (H), ALP (1179), BUN 11 (LN), Cholesterol 622 (H), Triglycerides 1272 (H) Hemolysis 4+, Lipemia 1+ UA (free catch): SpG 1.028, pH 7.5, Prot 3+, Bili 1+, Cocci 10-25, Fat >50 UPC: 3.7 (H) BP: 180 mmHg (patient very anxious)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with urine. There's a mild amount of suspended echogenic debris in the urine. The bladder wall appears normal with a smooth mucosal surface. There's a small irregularity on the dorsal wall of the trigone, most consistent with a prominent ureteral papillae but a small early polyp/mass lesion cannot be ruled out. The proximal urethra appears within normal limits with no masses or calculi observed.

The prostate is prominent/borderline measuring 1.06 cm. The parenchyma is homogenous and the external margins are smooth. The prostatic urethra appears normal with no evidence of irregularity, invasion, mass effect or calculi.

The left kidney has a normal shape and size (4.72 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 pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (4.4 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 pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size measuring 0.43 cm at the cranial pole and 0.45 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 0.47 cm at the cranial pole and 0.51 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



PATIENT

Blu Castellana

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

9 years

WEIGHT

12.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Megan Cassels-
Conway

HOSPITAL NAME

Central Broward
Animal Hospital

REFERRING VET

Dr. Maryna Mullerman

INVOICE

11051

DATE

1/7/2026

The spleen is subjectively normal in size (1.46 cm) and the echotexture is homogenous. The splenic capsule is smooth with no visible irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

Liver

The liver is borderline large in size, and normal in echogenicity with smooth peripheral margins. The parenchyma is heterogenous in echotexture with subtle, indistinct focal mottling. The visible portions of the vasculature and biliary tract appear normal. There is a ill-defined hypoechoic nodule in the right side of the liver measuring 0.69 cm x 1.39 cm.

The gall bladder lumen is significantly distended. Some areas of the wall appear mildly thickened with adherent debris. There is a large amount of primarily non-organized echogenic debris. There is no evidence of bile duct dilation.

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 (0.37 cm), jejunum (0.3 cm) and ileum have a uniform diameter with minimal fluid distension. There is mild mucosal speckling visualized associated with the duodenum. Wall appears subjectively, mildly increased. Bowel loops follow a typical curvilinear path with distinct wall layering. 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. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

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.

PRIMARY FINDINGS

- Large, heterogenous liver with an ill-defined hypoechoic nodule. Findings are most consistent with a vacuolar hepatopathy. Although, other hepatopathies are possible. The hypoechoic nodule has a benign appearance at this time. Recommend continued monitoring.
- Distended gallbladder with a large amount of non-organized debris. A large amount of debris is evident in the gall bladder with no evidence of a mucocele or associated inflammation at this time. This could represent an early mucocele or cholestasis, with minimal evidence of associated inflammation at this time. Continued monitoring of labwork and ultrasound are warranted for progression of this lesion. Ursodiol therapy could be considered.



PATIENT

Blu Castellana

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

9 years

WEIGHT

12.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Megan Cassels-
Conway

HOSPITAL NAME

Central Broward
Animal Hospital

REFERRING VET

Dr. Maryna Mullerman

INVOICE

11051

DATE

1/7/2026

- Prominent duodenum with mild mucosal speckling. Bright mucosal speckling has been postulated to represent dilated lacteals or focal accumulations of mucus, cellular debris, etc.. in the mucosal crypts.

SECONDARY FINDINGS

- Mild suspended echogenic debris in the urinary bladder and a suspected prominent ureteral papillae. The echogenic debris in the bladder lumen could be consistent with cells, crystals, and/or mucus. Recommend urinalysis and culture. Recommend continued monitoring of the gallbladder for any progression of the prominent ureteral papillae described.
- Borderline large prostate. Correlate with the age of neutering. If this patient was neutered prior to puberty this could be abnormal, and a fine needle aspirate could be considered. If this patient was neutered after puberty this likely is within normal limits.
- Mild age related changes visualized associated with both kidneys.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The liver is large and heterogenous with a moderately distended gallbladder with a moderate amount of debris. Additionally, the adrenals are normal in size. The presentation favors a breed related vacuolar hepatopathy. Although, other differentials are possible. Further evaluation could include a liver function test and consider starting chronic ursodiol therapy with continued monitoring of the gallbladder for progression.

The renal changes are mild and non-specific. Recommend a urine culture on a sterile sample and a blood pressure evaluation (consider reevaluation at a less stressful time, or with sedation?) If no infection is present, recommend confirming the proteinuria on a pooled sample (at least three samples from a 24-hour period combined) to assess if medical therapy is warranted.

There's mild mucosal speckling visualized associated with the duodenum. The significance of this in the absence of underlying gastrointestinal symptoms is uncertain. You could consider a GI panel to Texas A&M for a qualitative PLI/TLI, cobalamin, and folate looking for evidence of gastrointestinal disease which could be contributing to the hypoalbuminemia reported.

The prostate is prominent for a neutered male. This could be normal if this patient was neutered after puberty. If this patient was neutered prior to six months of age consider further evaluation of the prostate for potential neoplastic change.

If triglyceride levels remain severely elevated in the face of an ultra-low fat diet, medical management for hyperlipidemia may be warranted.



PATIENT

Blu Castellana

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

9 years

WEIGHT

12.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Megan Cassels-
Conway

HOSPITAL NAME

Central Broward
Animal Hospital

REFERRING VET

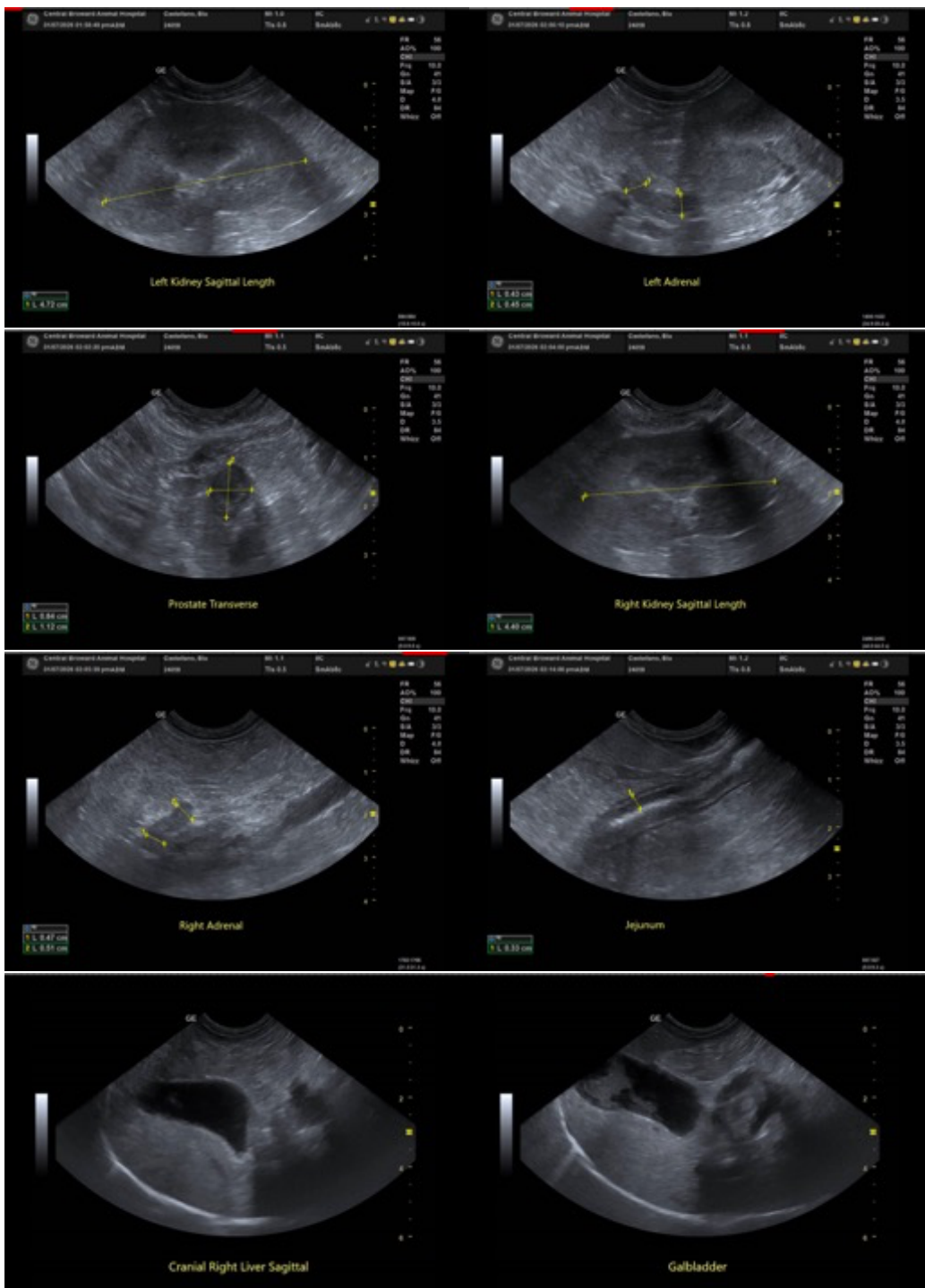
Dr. Maryna Mullerman

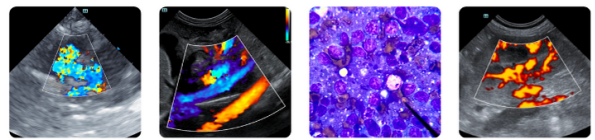
INVOICE

11051

DATE

1/7/2026





PATIENT

Blu Castellana

SPECIES

Canine

BREED

Miniature Schnauzer

SEX

Neutered Male

AGE

9 years

WEIGHT

12.1 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Megan Cassels-
Conway

HOSPITAL NAME

Central Broward
Animal Hospital

REFERRING VET

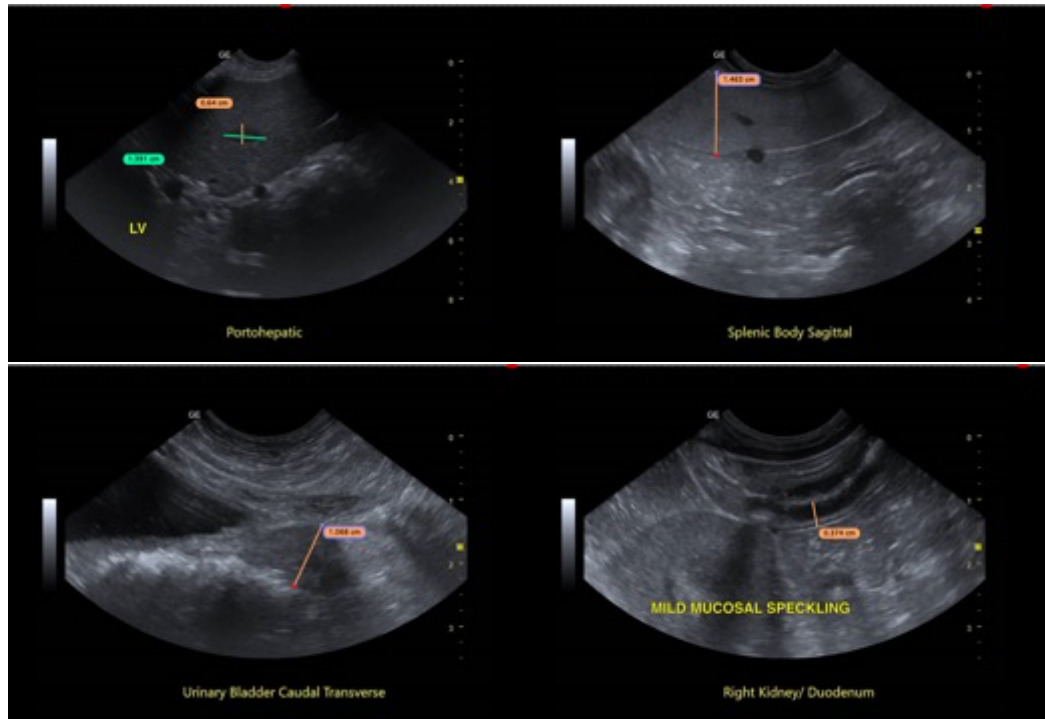
Dr. Maryna Mullerman

INVOICE

11051

DATE

1/7/2026



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