



PATIENT

Piepie Lincheng Zheng

SPECIES

Canine

BREED

French Bulldog

SEX

M

AGE

4

WEIGHT

22.9

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Dr Sharkawy

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

Dr Sharkawy

INVOICE

22985

DATE

11/17/2025

PRESENTING CLINICAL SIGNS

Dysuria

Abnormal PE/Chem/CBC/UA Results: Bw- elevated ALT Bile acids test - pre 9.5, post 65.9 Dysuria Intact male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was mildly distended with normal tone and normal appearing bladder wall. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild to moderate focally dependent lumen to non-dependent sediment and mineral. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. Bilateral areas of mild medullary mineral were present. The left kidney measured 5.1 cm in length. The right kidney measured 4.7 cm in length.

The area of the aortic trifurcation was free of pathology.

The prostate was mildly enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. A small intraparenchymal cyst was present. The prostate measured 2.4 cm in diameter.

Adrenal Glands

The left and right adrenal glands were not definitively visualized.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver/Gallbladder

The liver was subjectively normal to borderline subnormal in size with symmetrical contour and homogenous mildly hypoechoic parenchyma. Increased prominence of portal vascular borders was present. The gallbladder was distended in size with the gallbladder lumen occupied by hyperechoic non-mineralized, non-organized debris. No evidence of gallbladder/peripheral gallbladder inflammation or wall edema was present. The common bile duct was not visualized without overt evidence of dilation or post hepatic obstructive criteria.

Gastrointestinal



PATIENT
Piepie Lincheng Zheng

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

SPECIES

Canine

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

BREED

French Bulldog

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

Free Abdomen

SEX

M

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

AGE

4

Primary

- Mild dependent to non-dependent urinary bladder lumen sediment/ mineral.
- Mild benign prostatic hyperplasia pattern with small cyst
- Minor bilateral renal medullary mineral
- Normal to borderline subnormal liver size exhibiting hypoechoic parenchyma.
- Distended gallbladder occupied primarily by non-organized sediment.

WEIGHT

22.9

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Considerations for the liver may include primary parenchymal disease, portal hypoplasia / microvascular dysplasia or non-visualized shunt. Further assessment may include hepatic FNA cytology, primarily to assess for inflammatory cell type.

IMAGING PERFORMED BY

Dr Sharkawy

Given subjective subnormal liver size, urinary bladder mineral and minor renal mineral, gold standard CT with contrast is indicated to definitively assess for non-obvious shunt. A urinary workup including screening C/S and UPC level if non-inflammatory proteinuria is recommended. No evidence of prostatic inflammation or neoplastic criteria.

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

Dr Sharkawy

INVOICE

22985

DATE

11/17/2025



PATIENT

Piepie Lincheng Zheng

SPECIES

Canine

BREED

French Bulldog

SEX

M

AGE

4

WEIGHT

22.9

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Dr Sharkawy

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

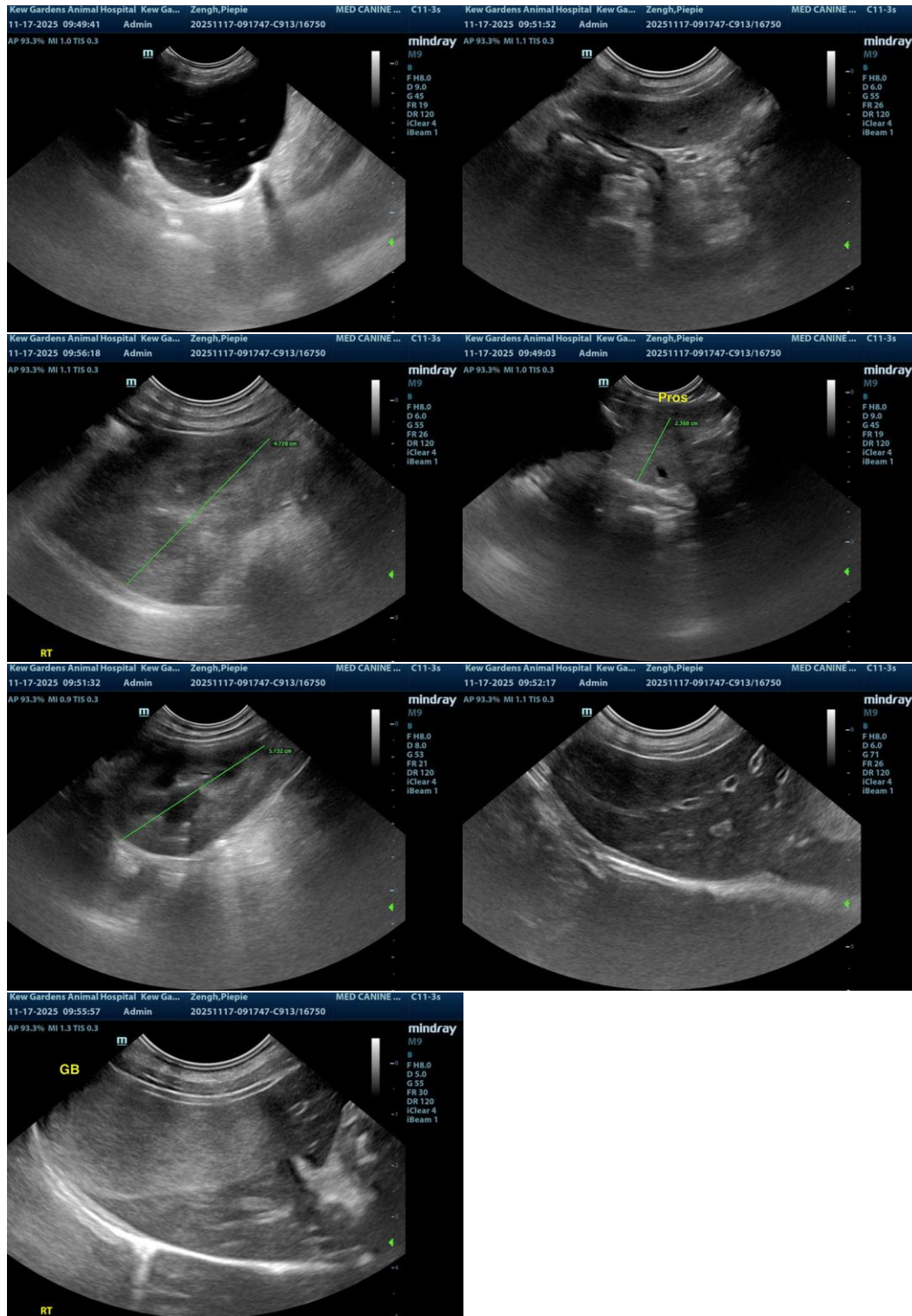
Dr Sharkawy

INVOICE

22985

DATE

11/17/2025





PATIENT

Piepie Lincheng Zheng

SPECIES

Canine

BREED

French Bulldog

SEX

M

AGE

4

WEIGHT

22.9

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Dr Sharkawy

HOSPITAL NAME

Kew Gardens Animal
Hospital

REFERRING VET

Dr Sharkawy

INVOICE

22985

DATE

11/17/2025

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.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com