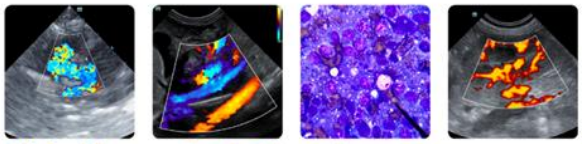


PATIENT

Lucy Shahrabadi

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

10yr

WEIGHT

5.8kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Sarah Barthelemy

HOSPITAL NAME

Fish Creek Pet Hospital

REFERRING VET

Dr Ackert

INVOICE
23099

DATE
12/03/2025

PRESENTING CLINICAL SIGNS

Presented for vomiting, diarrhea, anorexia, abdominal pain. Hospitalized currently

Abnormal PE/Chem/CBC/UA Results: Marked ALP elevation, bilirubin elevation Monocytosis and suspected bands.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, 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, dependent to non-dependent particulate sediment. No obstruction to urine outflow. No evidence of inflammatory or neoplastic changes was noted.

Normal renal size with asymmetrical margination was present in both kidneys. The renal cortex presented uniformly increased in echogenicity with uniform echotexture. The renal cortex appeared to be hypertrophied resulting in an altered cortex: medulla ratio. Mild loss of corticomedullary distinction was also present. The renal medullary volume was subjectively reduced. The right kidney exhibited medullary renoliths without evidence of pyelectasia. The left kidney exhibited medullary mineral with moderate pyelectasia to mild hydronephrosis.

Thickened, mildly dilated left ureter exiting the left kidney extending toward urinary bladder was present. Two visualized left ureteroliths were present, one at the level of the distal left ureter and left ureteral papilla. A second ureterolith was present in the subjective mid aspect of the left ureter. Both ureteroliths measured ~ 0.8 cm in diameter.

The left kidney measured 5.1 cm in length. The right kidney measured 4.5 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

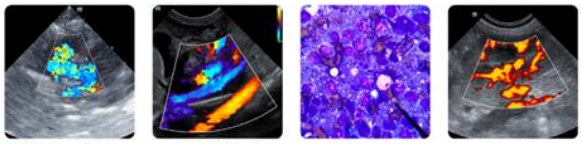
The left adrenal gland was mildly enlarged at the caudal pole with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.68 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.49 cm width at the caudal pole.

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 presented borderline mildly enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of



PATIENT

Lucy Shahrabadi

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

10yr

WEIGHT

5.8kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Sarah Barthelemy

HOSPITAL NAME

Fish Creek Pet Hospital

REFERRING VET

Dr Ackert

INVOICE
23099

DATE
12/03/2025

congestion. The gallbladder was non-distended in size with primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained retained anechoic fluid and lumen gas with no signs of obstruction or foreign material.

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 soft fecal matter consistent with patient history.

Pancreas

The right pancreas exhibited prominent size, capsule asymmetry and non-homogenous remodeled variably hypoechoic parenchyma. The left pancreatic limb exhibited non-homogenous remodeled parenchyma with potential for left limb pancreatic cysts.

Free Abdomen

No omental masses or overt lymphadenopathy was present.

Minor left retroperitoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

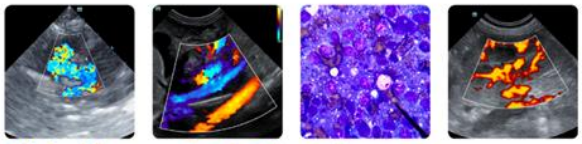
Primary

- Non-distended urinary bladder with urine sediment
- Chronic renal changes exhibiting medullary mineral/renoliths and left kidney pyelectasia/ mild hydronephrosis
- Mid and distal left ureteroliths with concurrent ureteritis
- Hepatopathy-subjective benign.
- Normal gallbladder
- Probable chronic / chronic active pancreatitis with parenchyma remodeling and possible left limb pancreatic cyst
- Gastroenterocolitis pattern with non-obstructive mild hypomotile stomach and soft fecal matter in colon
- Mildly enlarged caudal left adrenal gland -non-specific

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Referral for interventional or surgical procedure regarding left ureteroliths is recommended. Urine C/S on sterile urine sample if inflammatory sediment on UA is indicated. Hepatogastrointestinal support and empirical therapy for chronic / chronic active pancreatitis would be appropriate. Adrenal screening could be considered if clinical signs consistent with adrenal disease are non-reported or arise.

SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com | info@sonopath.com | 1.800.838.4268

PATIENT

Lucy Shahrabadi

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

10yr

WEIGHT

5.8kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Sarah Barthelemy

HOSPITAL NAME

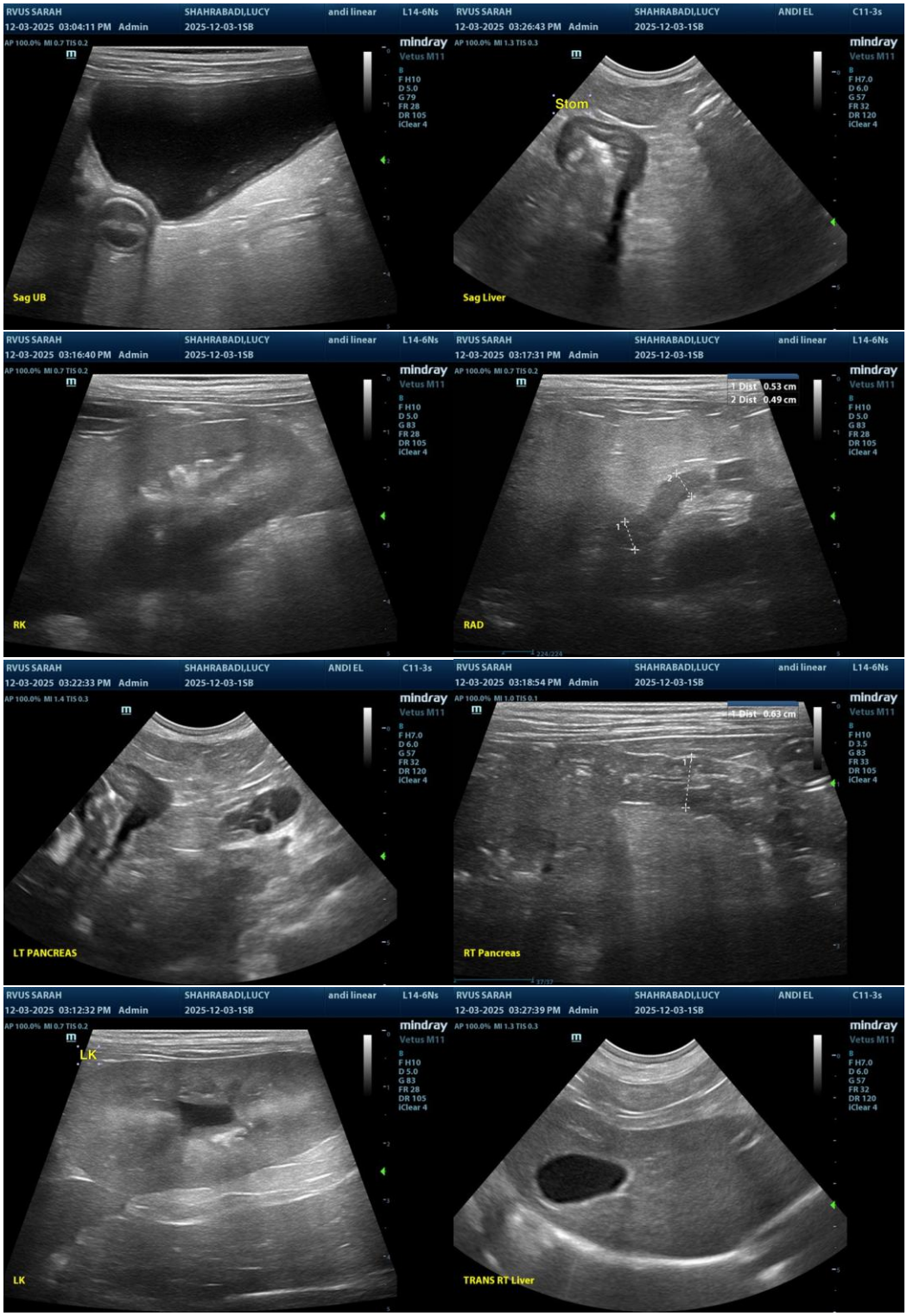
Fish Creek Pet Hospital

REFERRING VET

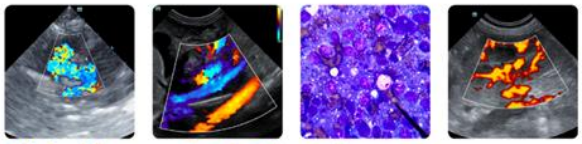
Dr Ackert

INVOICE
23099

DATE
12/03/2025



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

PATIENT

Lucy Shahrabadi

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

FS

AGE

10yr

WEIGHT

5.8kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Sarah Barthelemy

HOSPITAL NAME

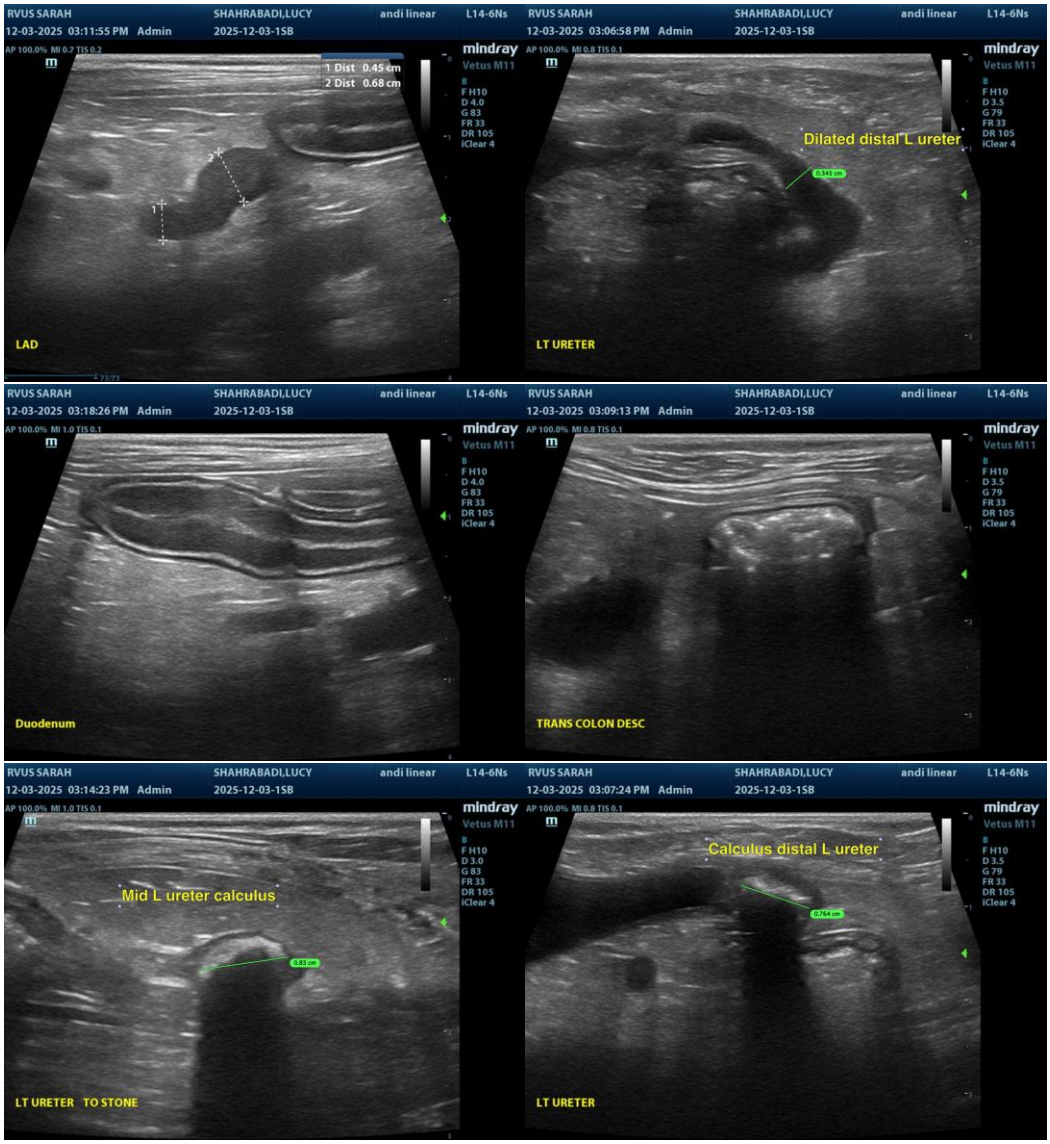
Fish Creek Pet Hospital

REFERRING VET

Dr Ackert

INVOICE
23099

DATE
12/03/2025



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