



PATIENT

Bleu Conlon

SPECIES

Canine

BREED

Pitbull

SEX

MN

AGE

11yr

WEIGHT

89lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Whitcraft

HOSPITAL NAME

Craig Road AH

REFERRING VET

Dr Cooper

INVOICE

23140

DATE

12/6/2025

PRESENTING CLINICAL SIGNS

Recent history of PU/PD, and increased appetite. Pre-op chemistry showed ALT 577, 3+ proteinuria.

Abnormal PE/Chem/CBC/UA Results: - Gingival growth- r/o benign gingival overgrowth, neoplasia - Multiple soft tissue masses - r/o lipomas, mast cell tumors, other neoplasia - Polydipsia and polyuria - r/o diabetes mellitus, kidney disease, Cushing's disease - Dental disease - Overweight (BCS 6/9)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. 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 was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 7.7 cm in length. The right kidney measured 7.5 cm in length.

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate appeared normal and free of pathology.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.80 cm width in the caudal pole. The right adrenal gland measured 0.67 cm width in 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 was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. Adequate vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. Mild congealed hyperechoic debris. The cystic and common bile ducts were normal.

Gastrointestinal



PATIENT

Bleu Conlon

SPECIES

Canine

BREED

Pitbull

SEX

MN

AGE

11yr

WEIGHT

89lb

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.

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

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

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

ULTRASONOGRAPHIC FINDINGS

Primary

- Benign hepatopathy
- Non-organized gallbladder debris (non-mucocele)
- Non-specific chronic renal changes
- Normal bilateral adrenal glands
- Normal gastrointestinal tract

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Further assessment of the liver in conjunction with PU/PD may include FNA cytology primarily to assess for inflammatory criteria in conjunction with ALT elevation +/- leptospirosis titer /PCR if clinically indicated. No evidence of hepatic vascular anomaly or adrenal disease yet bile acid profile and adrenal screening may be considered. Correlation with UPC is recommended.

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Whitcraft

HOSPITAL NAME

Craig Road AH

REFERRING VET

Dr Cooper

INVOICE

23140

DATE

12/6/2025



PATIENT

Bleu Conlon

SPECIES

Canine

BREED

Pitbull

SEX

MN

AGE

11yr

WEIGHT

89lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Whitcraft

HOSPITAL NAME

Craig Road AH

REFERRING VET

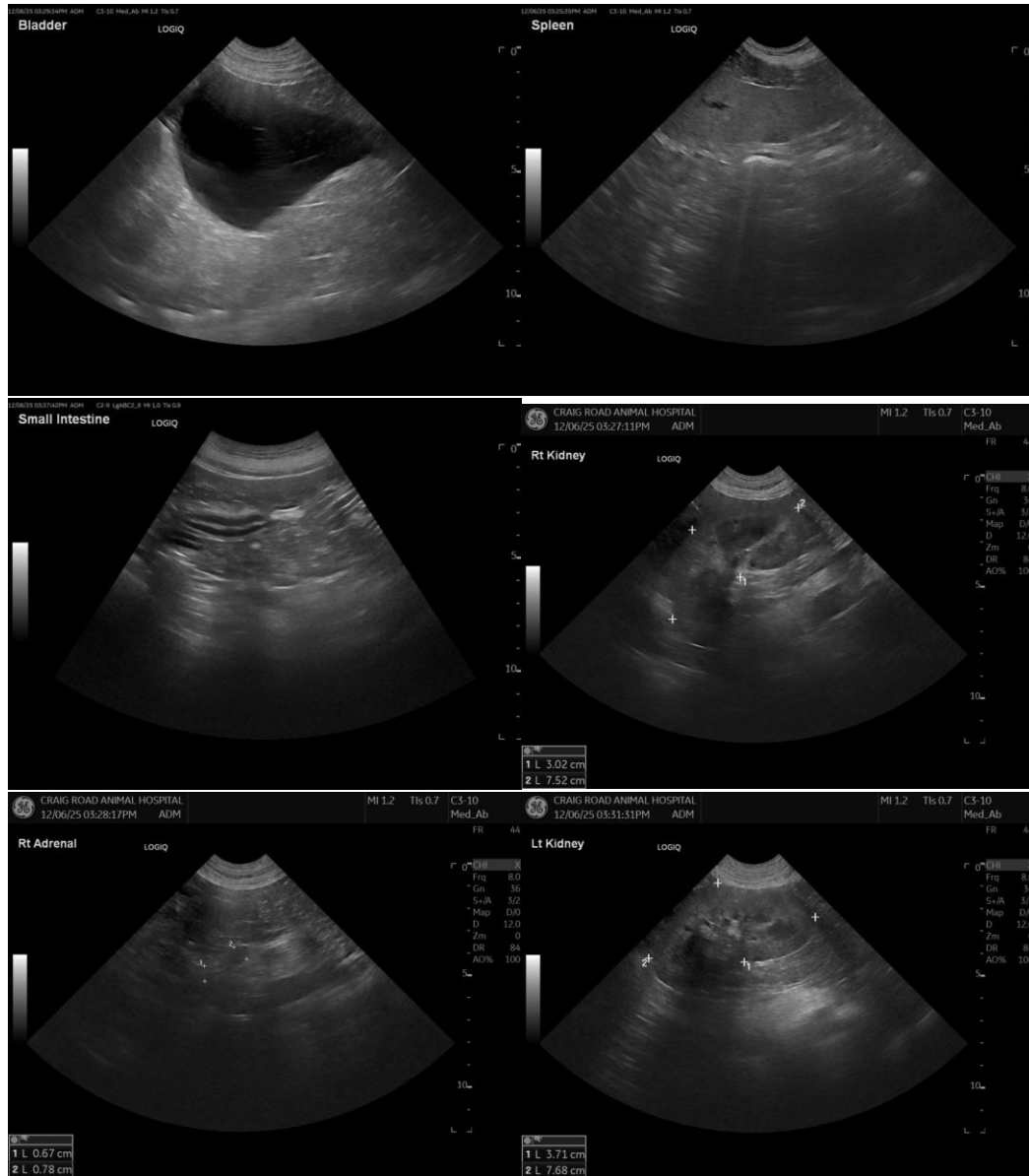
Dr Cooper

INVOICE

23140

DATE

12/6/2025





PATIENT

Bleu Conlon

SPECIES

Canine

BREED

Pitbull

SEX

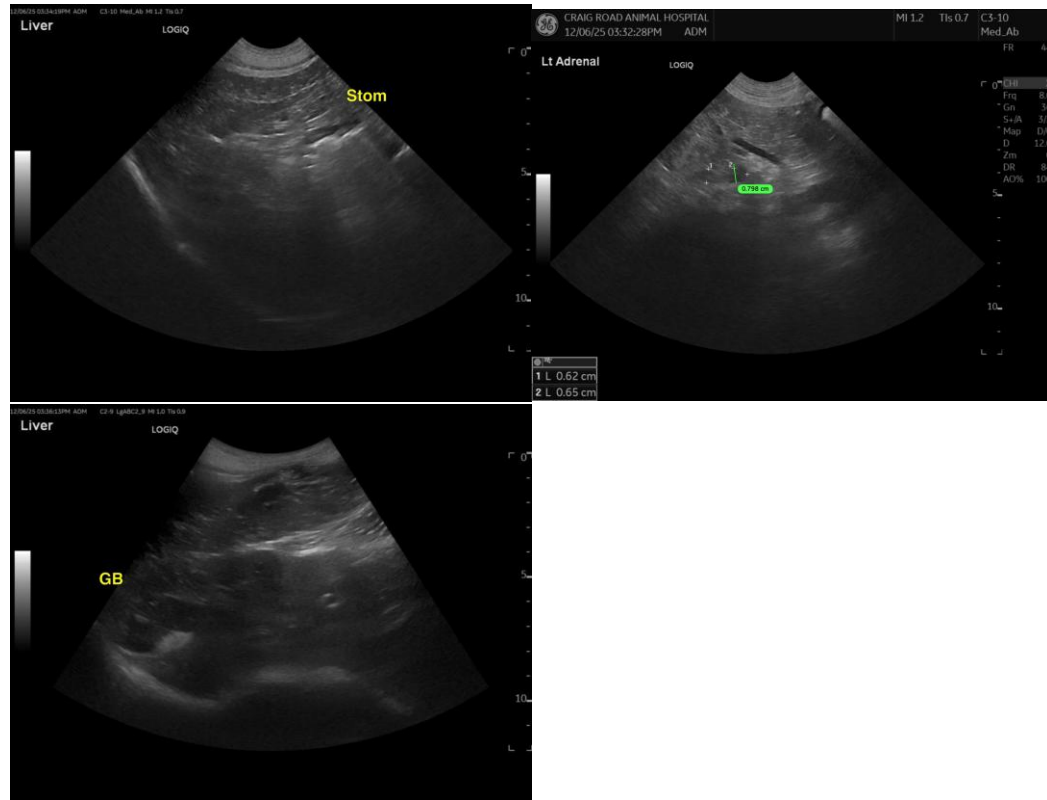
MN

AGE

11yr

WEIGHT

89lb



INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Whitcraft

HOSPITAL NAME

Craig Road AH

REFERRING VET

Dr Cooper

INVOICE

23140

DATE

12/6/2025

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