



**PATIENT**

Bubba Lyes

**SPECIES**

Canine

**BREED**

Pitbull Mix

**SEX**

MN

**AGE**

14yr

**PRESENTING CLINICAL SIGNS**

- PU/PD r/o Cushing's disease vs chronic kidney disease vs hepatopathy (inflammatory vs infectious vs neoplastic) vs other neoplasia vs other; open
- Distended abdomen r/o Cushing's vs organomegaly
- Kyphosis/stiff gait r/o multifocal osteoarthritis +/- IVDD
- Masses r/o benign vs malignant
- OU immature cataracts
- Grade IV/IV periodontal disease
- Cough r/o chronic bronchitis vs other; open
- Allergies; well managed with apoquel
- Hypertension
- ABNORMAL Labwork Values Nonregenerative, normocytic, normochromic anemia (RBC (5.78) Hematocrit (40.4) Hemoglobin (12.9) MCHC (31.9)) r/o anemia of chronic disease vs loss vs destruction; open Mild leukopenia (WBC (3.9) Neutrophils (2.948) Lymphocytes (0.585) Eosinophils (0.109) r/o chronic infection/sequestration vs other Mild ALP elevation r/o chronic inflammation vs stress vs hepatic (inflammatory vs infectious vs age) vs endocrine (Cushing's vs other); open Isothenurias with rods present Mild lipase elevation r/o obesity vs Cushing's vs other; open
- Current Medications Benazipril 10 mg 1 tablet BID, Apoquel 5.4 mg 1 tablet SID

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**WEIGHT**

62.4lb

**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 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.

**INTERPRETED BY**

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

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 6.7 cm in length. The right kidney measured 6.4 cm in length.

**IMAGING PERFORMED BY**

Sara Hansen

The area of the aortic trifurcation was free of pathology.

**HOSPITAL NAME**

VTC Keizer Station

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 0.66 cm width in the caudal pole. The right adrenal gland measured 0.76 cm width in the caudal pole.

**REFERRING VET**

Dr Juskiewicz

**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.

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***Liver/Gallbladder***

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The liver was subjectively normal in size with mild rounded symmetrical contour. No visualized masses or nodules were present. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. Normal 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 mild non-organized debris. The cystic and common bile ducts were normal.

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***Gastrointestinal***

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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild variably echogenic progressively shadowing ingesta sonographically suggestive of food echogenicity with no signs of obstruction or foreign material.

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained segmental similar appearing non-shadowing ingesta with no signs of obstruction or foreign material.

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

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***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.

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***Free Abdomen***

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

**INTERPRETED BY**

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

**ULTRASONOGRAPHIC FINDINGS**

**Primary**

- Mild hepatopathy-subjective benign
- Mild gallbladder debris (non-mucocele)
- Age related renal/adrenal changes with non-enlarged adrenal glands
- Sonographically normal spleen
- Normal gastrointestinal tract with gastrointestinal ingesta-consistent with food echogenicity

**IMAGING PERFORMED BY**

Sara Hansen

**HOSPITAL NAME**

VTC Keizer Station

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Although no evidence of significant hepatopathy or adrenal disease, adrenal workup with LDDST warranted if clinical concern for Cushing syndrome and decreased USG <1020. Further renal staging to include urine C/S and protein: creatinine ratio on sterile urine sample may be considered. A definitive cause of the anemia and CBC abnormalities was not obvious. A CBC pathology review could be considered. No evidence of neoplastic criteria.

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Dr Juszkiwicz

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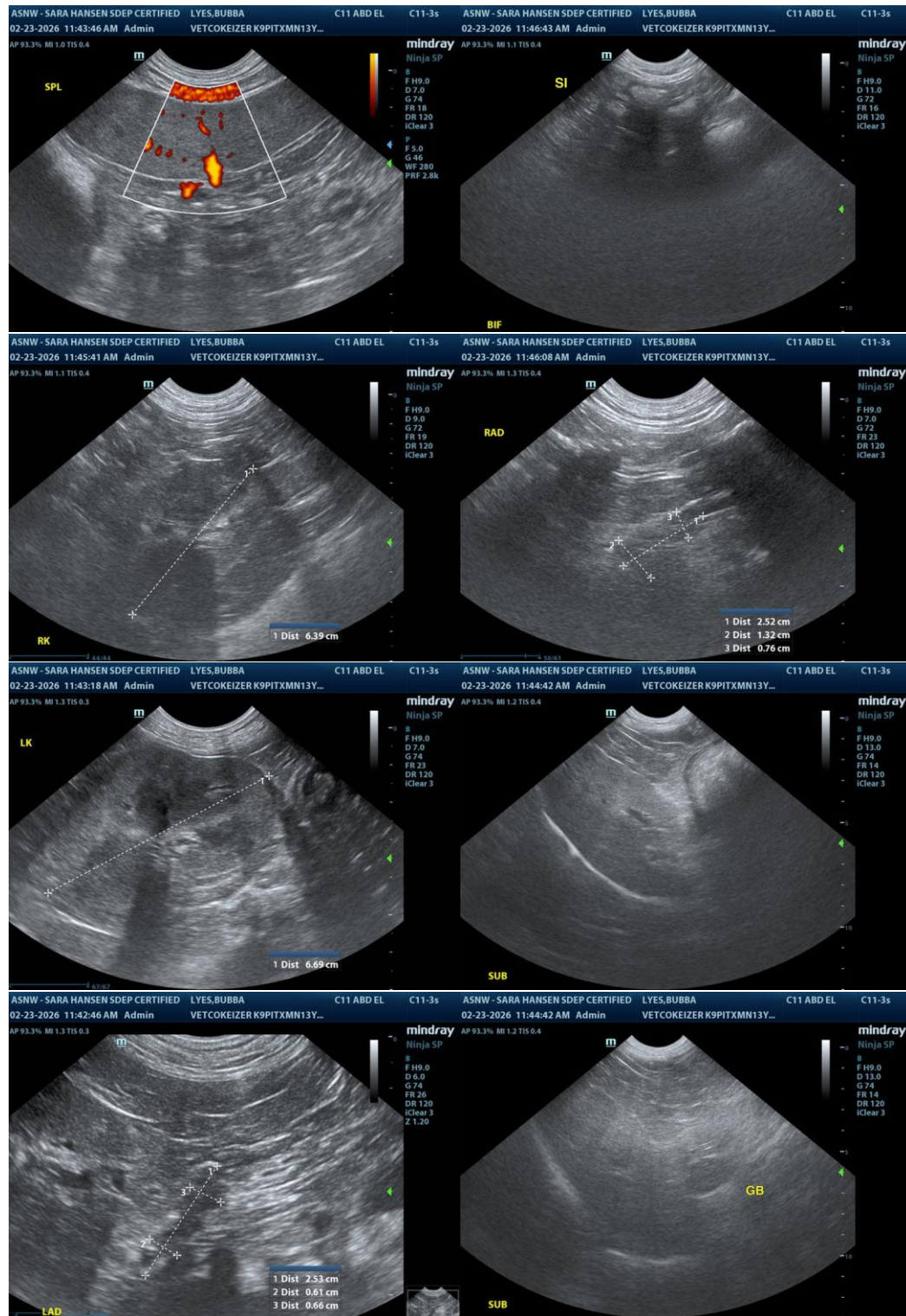
Dr Juszkievicz

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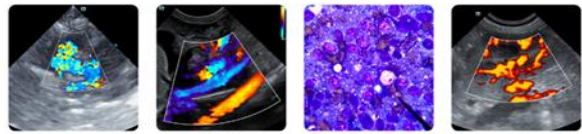
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not



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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.

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[info@sonopath.com](mailto:info@sonopath.com)

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