



PATIENT

Bella Seludo

SPECIES

Canine

BREED

Maltese/Bichon

SEX

FS

AGE

15 years

WEIGHT

21 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jessica Miller

HOSPITAL NAME

Animal General
Hudson

REFERRING VET

Dr. Lang

INVOICE

14550

DATE

8/10/22

PRESENTING CLINICAL SIGNS

Grade II murmur and evidence of renal dz

Abnormal PE/Chem/CBC/UA Results: TP 7.6, ALP 266, AST 84, BUN 51, Crea 2.1, Ca 11.6, Mg 2.9, Na 161, Chol 352, Trig 1102, PLT 454, Mono 1029

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

The area of the aortic trifurcation was free of pathology.

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. Minor medullary mineral was present in both kidneys. Right kidney caudal thinly-walled cyst containing anechoic fluid was present. No evidence of pelvic dilation was present. The left kidney measured 4.2 cm in length. The right kidney measured 4.7 cm in length. The right kidney cyst measured 1.3 cm in diameter.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.50 cm width at the caudal pole and 0.33 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.51 cm width at the caudal pole and 0.75 cm width at the cranial pole.

Spleen

The spleen was overall normal in size with areas of mild asymmetrical lateral and medial capsule contour. Generalized mild splenic parenchyma heterogeneity was present. Multifocal asymmetrical hyperechoic nondisruptive nodules were present with an example measuring 0.65 cm in diameter. Normal splenic vascularity was present.

Liver/ Gallbladder

The liver presented 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 congestion. The gallbladder was non-distended in size containing anechoic content with minor luminal debris. The cystic and common bile ducts were normal.



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Gastrointestinal

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 ileus, obstruction, or foreign material.

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

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

A solitary nonhomogeneous cystic hepatic lymph node measuring 1.1 cm in diameter was present. No other evidence of intraabdominal lymphadenopathy was noted. No peritoneal free fluid was noted.

ULTRASONOGRAPHIC FINDINGS

- Mild chronic renal changes with minor medullary mineral and right kidney cyst
- Benign splenic nodules - consistent with benign myelolipomas, potential for splenic infarcts or emerging mineralization
- Vacuolar hepatopathy pattern - benign
- Minor gallbladder debris (non-mucocele)
- Focal cystic benign hepatic lymph node

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Further assessment of the kidneys including full urinary workup with urinalysis, screening C/S, and baseline UPC is suggested. Monitoring of blood pressure may be considered going forward. Early CRD therapy is warranted. Monitoring of hepatic enzyme levels with hepatosupportive medications including Denamarin +/- Ursodiol may prove beneficial.

Largely geriatric abdomen without evidence of significant visceral pathology.



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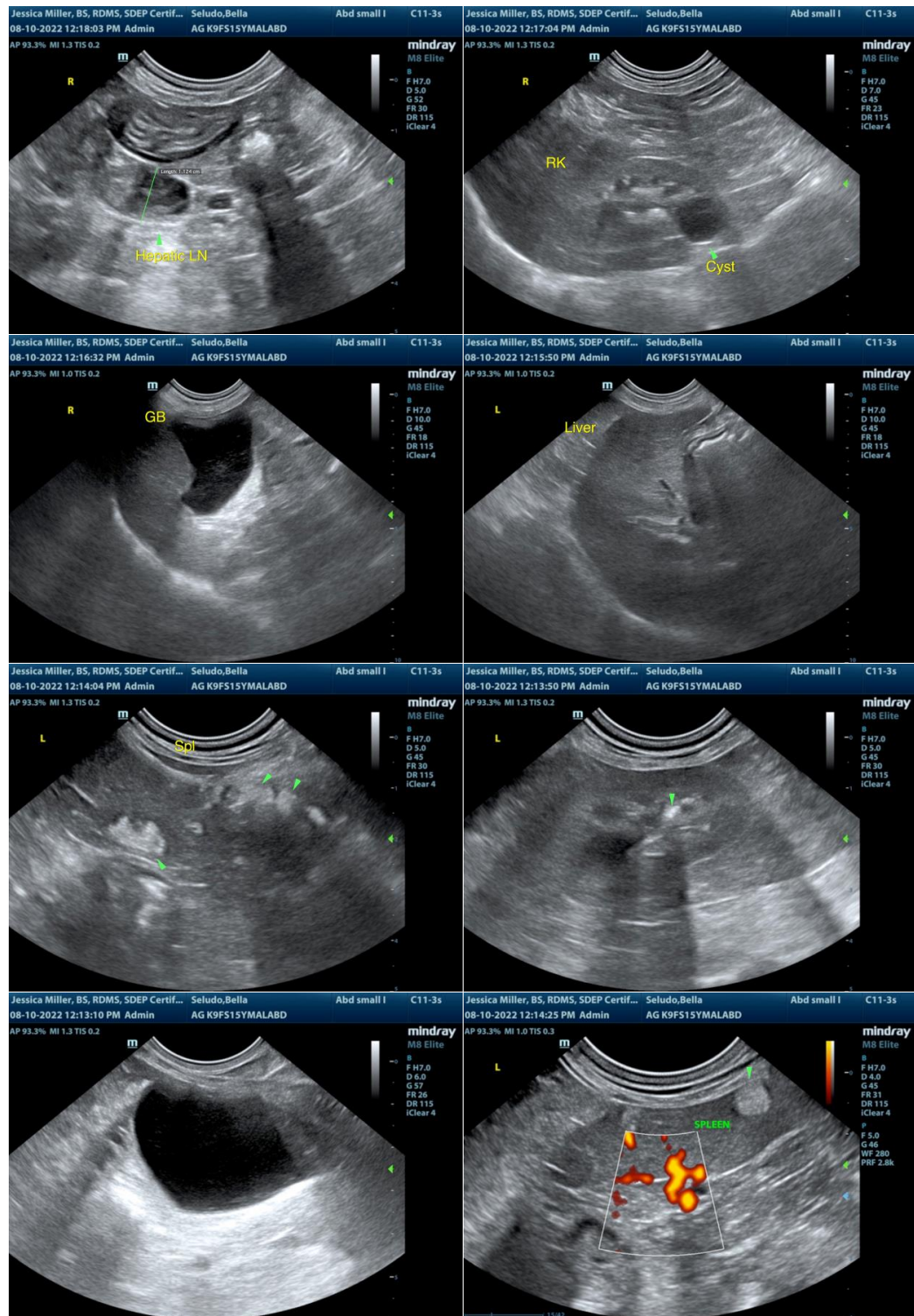
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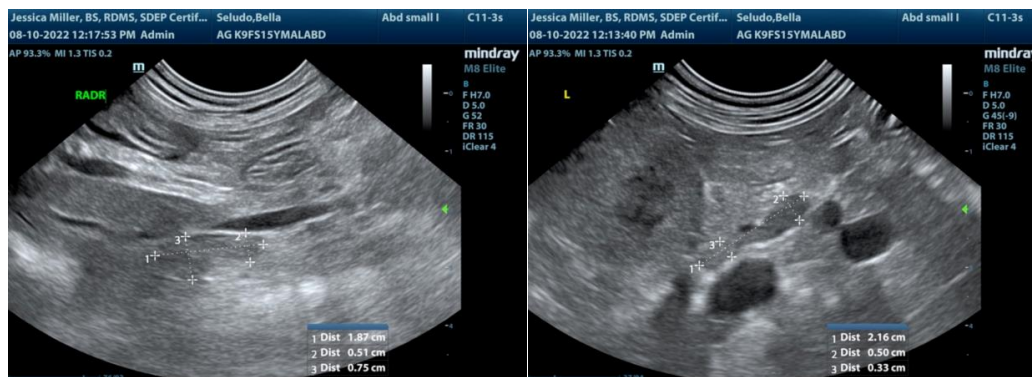
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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