



PATIENT	PRESENTING CLINICAL SIGNS
Orvie Moser	Previous diag CRD Stage 3 Not eating well and weight loss
SPECIES	Abnormal PE/Chem/CBC/UA Results: Mod elevation renal enzymes SDMA -22 range to 14
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Lhasa Apso Mix	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 uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.
SEX	Normal size and margination was 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. Bilateral pinpoint medullary mineral was present. Bilateral focal to intermittent small cortical cysts were noted.
MN	No evidence of pelvic dilation was present. The left kidney measured 3.6 cm in length. The right kidney measured 3.2 cm in length.
AGE	The area of the aortic trifurcation was free of pathology.
14	The residual prostate was normal measuring 0.45 cm in diameter.
WEIGHT	Adrenal Glands
7.2 kg	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.36 cm width at the caudal pole and 0.31 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 0.41 cm width at the caudal pole and 0.55 cm width at the cranial pole.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The spleen exhibited normal size and contour with subtle splenic parenchyma heterogeneity and intermittent small hyperechoic splenic nodules consistent with benign myelolipoma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.
IMAGING PERFORMED BY	Liver
Dr. Belan	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. The hepatic and portal vasculature were normal in appearance without signs of congestion.
HOSPITAL NAME	REFERRING VET
Signal Hill Animal Hospital	Dr. Lebouldus
INVOICE	Gastrointestinal
11394ag	The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content with moderate non-dependent non-organized hyperechoic debris along with suspected concurrent luminal hypoechoic mucus. The cystic and common bile ducts were normal.
DATE	INVOICE
08/18/2022	11394ag
	The stomach presented intact yet mildly prominent wall layering with a normal wall layer ratio. The lumen of the stomach contained minor retained fluid with no signs of ileus, obstruction or foreign material. The gastric body wall measured 0.35 cm in width.



PATIENT

Orvie Moser

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. The jejunum wall measured 0.30 cm in width. The jejunum wall measured 0.36 cm in width.

SPECIES

Canine

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.

BREED

Lhasa Apso Mix

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

SEX

MN

ULTRASONOGRAPHIC FINDINGS

- Mild chronic renal changes exhibiting medullary mineral and intermittent cortical cysts
- Nondependent hyperechoic gallbladder debris and suspected luminal mucus-possible very early mucocele
- Mild gastritis pattern-overtly normal small bowel
- Mild pancreatic remodeling-suspect age related changes

AGE

14

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

7.2 kg

The appearance of the kidneys is consistent with mild chronic renal disease Further renal staging to include U/A, urine C/S and protein: creatinine ratio on sterile urine sample may be considered.

Potential for pancreatitis is suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation. A GI panel to include PLI/TLI/Cobalamin/Folate is recommended to assess for occult GI or pancreatic disease. Overall, largely a geriatric abdomen without evidence of significant visceral pathology.

INTERPRETED BY

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

As needed GI support and CRD therapy is recommended. Hepatosupportive medications including Denamarin and Ursodiol may prove beneficial.

IMAGING PERFORMED BY

Dr. Belan

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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