



**PATIENT**

Narae Suh

**SPECIES**

Canine

**BREED**

Maltese

**SEX**

F

**AGE**

9 years

**WEIGHT**

6 lbs.

**PRESENTING CLINICAL SIGNS**

Decreased appetite, wt loss, lethargy. No current meds.  
Abnormal PE/Chem/CBC/UA Results:K 5.8, Na/K 26, WBC 16.5, plt 991, neuts 11880

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 uterus exhibited overtly normal wall layering. The uterus exhibited mild, primarily anechoic, lumen fluid present in the uterine body and extending into the left and right uterine horns. There was no evidence of significant uterine distention with fluid. The uterus measured 0.4 cm diameter.

The right ovary was overtly normal in size and appearance measuring 0.9 cm in diameter. The left ovary was normal in size with a solitary cyst measuring 0.5 cm in diameter. The overall left ovary measured 1.0 cm in diameter.

No evidence of pathology in the area of the aortic trifurcation.

**INTERPRETED BY**

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

Normal size and mild asymmetrical 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. Discreet medullary mineral was noted. The left kidney measured 3.4 cm in length. The right kidney measured 3.8 cm in length.

**IMAGING PERFORMED BY**

Jessica Miller

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.8 cm length x 0.49 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 1.6 cm length x 0.40 cm width at the caudal pole.

**HOSPITAL NAME**

Animal General  
Hudson

**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.

**REFERRING VET**

Dr. Ng

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**Liver/ Gallbladder**

**DATE**

8/2/23

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild gallbladder sediment. 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 was empty with no signs of ileus, obstruction, or foreign material.

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The small intestine presented generalized intact wall layering with propensity for potential mildly prominent duodenojejunal mucosa and mild, hyperechoic duodenal mucosal speckling.

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

**SEX**

F

The pancreas base and right pancreatic limb exhibited subtly prominent size with mild capsule asymmetry and nonhomogeneous, mildly hypoechoic parenchyma with mild minor right limb pancreatic duct dilation.

**AGE**

9 years

***Free Abdomen***

No overt lymphadenopathy or peritoneal effusion was present.

**WEIGHT**

6 lbs.

**ULTRASONOGRAPHIC FINDINGS**

- Mild chronic renal changes
- Mild fluid distended uterus
- Cystic left ovary
- Possible nonspecific enteritis
- Mildly prominent nonhomogeneous pancreas base / right pancreatic limb - potential for low-grade chronic/chronic active pancreatitis
- Mild gallbladder sediment (non mucocele)

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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The mild fluid distended uterus is not overtly consistent with pyometra criteria, yet emerging pyometra cannot be definitively excluded.

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UA +/- baseline renal staging to include screening C/S and baseline UPC level may be considered. A GI panel to include PLI/TLI/Cobalamin/Folate, and if not recently done, three view chest radiographs to assess for intestinal disease or intrathoracic pathology as contributing factors to the patient's clinical signs, are recommended. Close monitoring for clinical signs which may suggest emerging pyometra going forward and potential recheck sonogram, if clinically indicated, is recommended.

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Pending echocardiogram, ovariohysterectomy +/- intestinal biopsies, pending additional diagnostics, may be a consideration in this patient.



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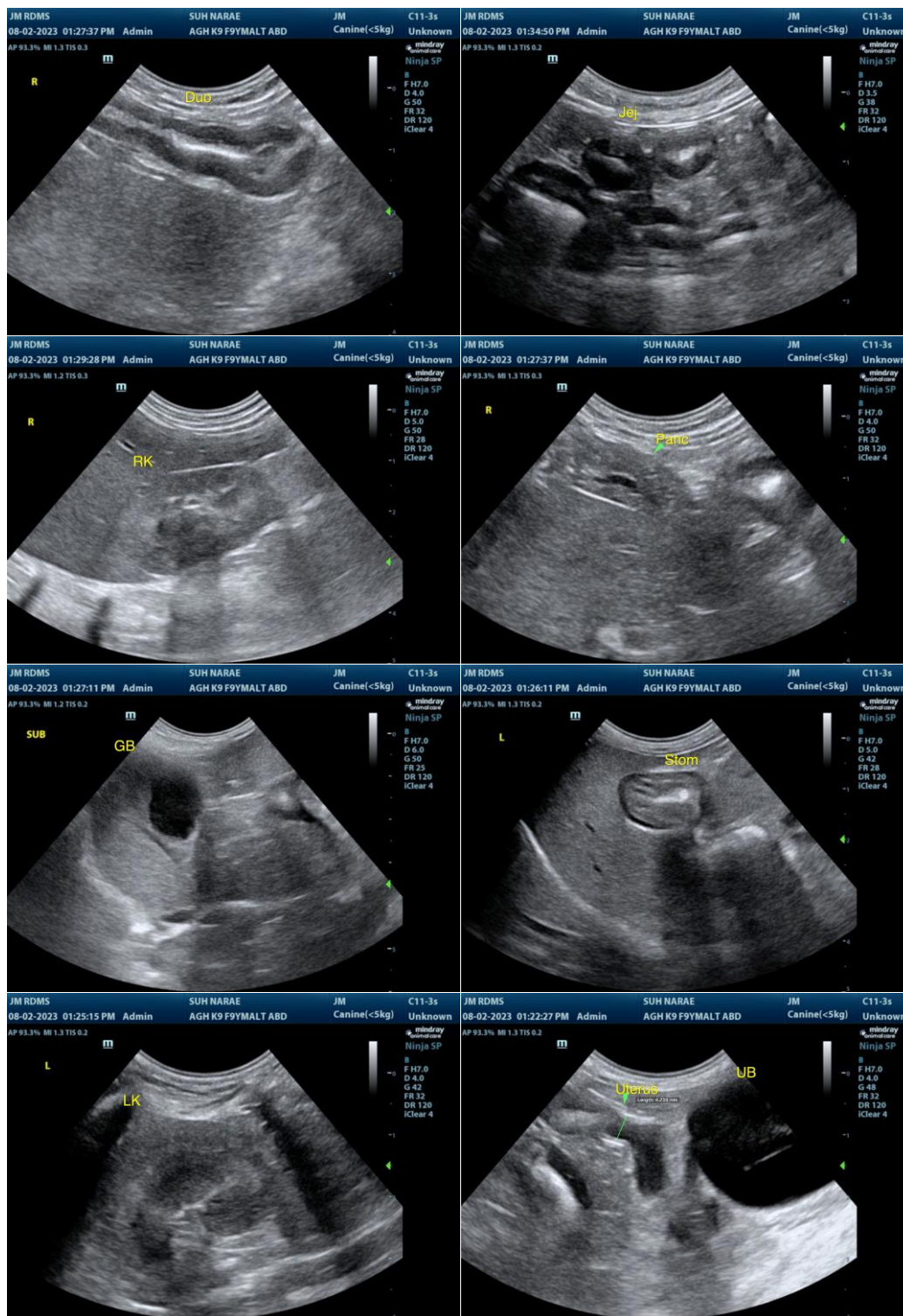
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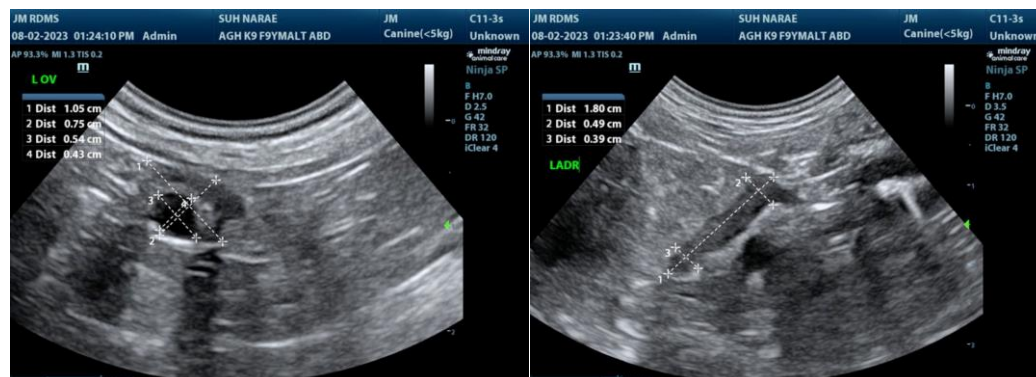
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)**

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