



**PATIENT**

Genny Kalb

**SPECIES**

Canine

**BREED**

Labrador Retriever

**SEX**

Spayed Female

**AGE**

12 years

**WEIGHT**

76.8 lbs.

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Pamela Harrigan, RDCS

**HOSPITAL NAME**

Wood River AH

**REFERRING VET**

Casey Schulke, DVM

**INVOICE**

12310

**DATE**

9/27/21

**PRESENTING CLINICAL SIGNS**

Presented 9/10/2021 with signs consistent with a UTI (PU/PD, urinary accidents in house). CBC, chem and UA performed and consistent with UTI, treated with a course of sulfatrim. Urinary signs resolved but panting continually seems painful to owner, though not overtly on exam. Lungs and heart normal on auscultation. Splinting/ tensing of abdomen on palpation. R/O endocrine/ metabolic/ organic disease as cause of clinical signs.

**Urinary System**

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

No overt pathology was noted in the area of the uterine stump or aortic trifurcation.

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 6.0 cm in length. The right kidney measured 5.8 cm in length.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.57 cm width at the caudal pole and 0.53 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 0.60 cm width at the caudal pole and 0.51 cm width at the cranial pole.

**Spleen**

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

**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. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with mild, nondependent to focally congealed, yet nonorganized gallbladder debris primarily in the caudal lumen and gallbladder neck. The cystic duct and common bile ducts were normal without evidence of dilation.



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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 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 duodenum wall width measured 0.53 cm.

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

***Pancreas***

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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 were evident.

***Free Abdomen***

**AGE**

12 years

No overt lymphadenopathy or peritoneal effusion was present.

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

76.8 lbs.

***Primary Findings***

- Sonographically unremarkable abdomen for age

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No overt evidence of visceral pathology with primarily benign to early geriatric abdomen including subtle age-related hepatosplenic, urinary bladder, and renal changes. An obvious cause of abdominal pain in this study was not evident. If evidence of PU/PD, further assessment may include recheck urine culture and sensitivity +/- baseline UPC as further renal staging on a sterile urine sample, and Leptospirosis titer / PCR if clinically indicated.

No overt evidence of underlying endocrinopathy, given the normal adrenal presentation and appearance of the liver.

Screening three view chest radiographs as well as thorough muscular/skeletal exam could be considered if not done.

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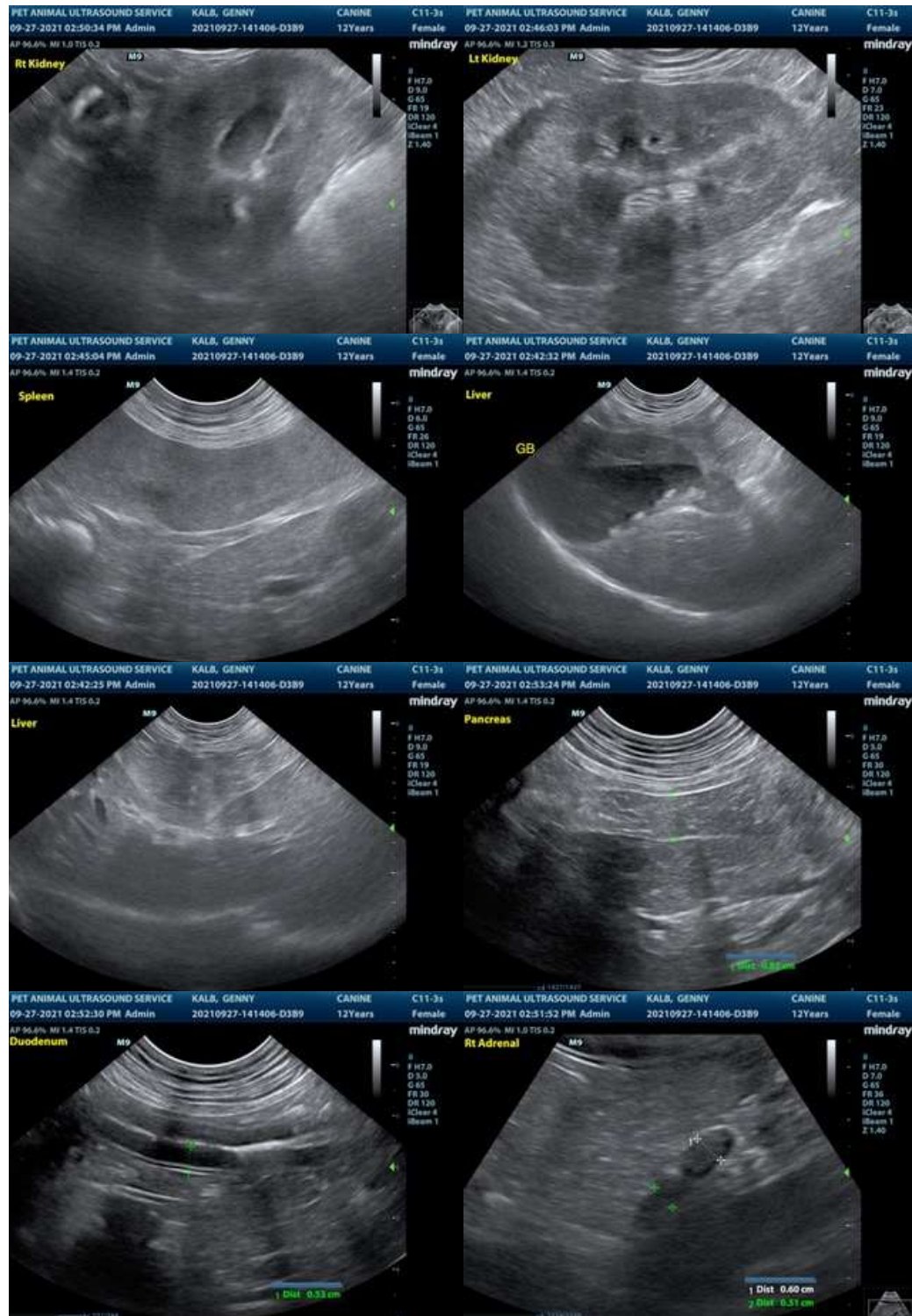
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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12 years

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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**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
**info@SonoPath.com**

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