



PATIENT

Sage Kaline

SPECIES

Canine

BREED

Shih Tzu Mix

SEX

Neutered male

AGE

12 years

WEIGHT

17.6 lbs

INTERPRETED BY

Remo Lobetti, BVSc,
MMedVet (Med),
PhD, Dipl. ECVIM

IMAGING PERFORMED BY

Jazmin Munoz
Gonzalez

HOSPITAL NAME

Oakridge VC

REFERRING VET

Dr. Munoz Gonzalez

INVOICE

69187

DATE

12/1/25

PRESENTING CLINICAL SIGNS

History: P had surgery for cyst removal. Was on baytril + metacam when hematochezia noted 11/25/25 followed by hematemesis. Received cerenia injection on 11/25. Vomited bile yesterday AM and continues to have soft stools. AUS performed 2/25 revealed Kidneys: The kidneys are normal in size (left: 4.3 cm, right: 3.8 cm). The renal margins are regular. The corticomedullary definition remains mildly decreased. Similar to prior, the renal cortices contain several thin-walled cysts filled with anechoic fluid (up to 2.0 cm, previously 2.3 x 2.9 cm). Some of these cysts are bordered by an incomplete hyperechoic rim that casts distal acoustic shadowing. Bilaterally in the renal pelvises and diverticula, there are hyperechoic foci that cast distal acoustic shadowing. There is no distension of the renal collecting system. Urinary bladder and urethra: The urinary bladder wall is thin and uniform in thickness. The urinary bladder contains a moderate amount of anechoic fluid. Several small hyperechoic foci are present in the dependent portion of the urinary bladder and extend into the prostatic segment of the urethra. Adrenal glands: The adrenal glands are normal in size and shape with a homogeneous echogenicity and regular margins (left: 0.42 cm, right: 0.44 cm).

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is small with a normal thickness and smooth appearance of the wall. A small amount of floating, hyperechogenic sediment.

Normal appearance of the trigone area, proximal urethra, and iliac blood vessels.

Normal appearance and size of the iliac lymph nodes. Ureters not visualized, which can be considered a normal finding.

Normal renal size (left measured 4.4 cm, right measured 4.0 cm) with normal echogenic appearance, cortico-medullary differentiation, pelvis, and capsule. No infarcts or mineralization evident. Few, small, bilateral, non-obstructive renoliths are present. A large cortical cyst was noted in the left kidney measuring 1.5 x 2.2 cm with smaller cortical cysts evident measuring up to 0.3 cm in size. A few, small cortical cysts are present in the right kidney measuring 0.7 x 1.1 cm in size.

The prostate is small and hypoechogenic.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 0.38 cm and 0.42 cm in width. The right adrenal gland measured 0.41 cm in width.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma and regular curvilinear capsule. Normal volume of the splenic vasculature without any overt congestion or thrombosis evident. No inflammatory, neoplastic, infarction, or infiltrative changes evident. The spleen measured 1.2 cm in width.



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Liver

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. No nodules or masses evident. Normal appearance of the hepatic and portal vasculature.

Gallbladder

The gallbladder is full containing normal anechoic bile. Normal thickness and echogenic appearance of the wall. Normal size and appearance of the cystic and common bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, 1:3 muscularis to mucosa ratio, normal wall thickness and peristaltic activity, and no distension of the lumen. A small amount of ingesta is present in the stomach compatible with a recent meal.

Pancreas

The visible sections of the pancreas are of normal size and echogenic appearance with a regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

ULTRASONOGRAPHIC FINDINGS

- Bilateral cortical cysts.
- Bilateral renoliths.
- Urinary bladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The renal cysts and renoliths can be considered incidental findings.

The most likely etiology for the urinary bladder sediment would be incidental debris with crystalluria and bacterial cystitis a less likely differential diagnosis.

With the presenting clinical signs the likely etiologies would be acute hemorrhagic diarrhea syndrome or drug induced colitis.

Urinalysis and possibly urine culture can be considered.



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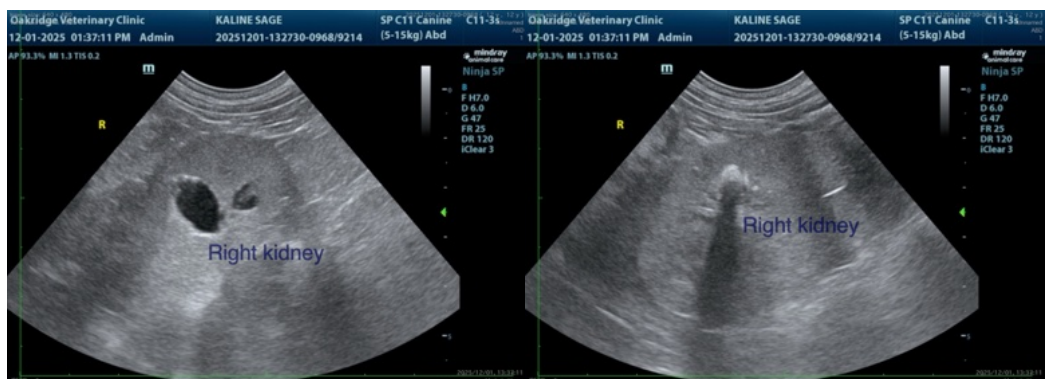
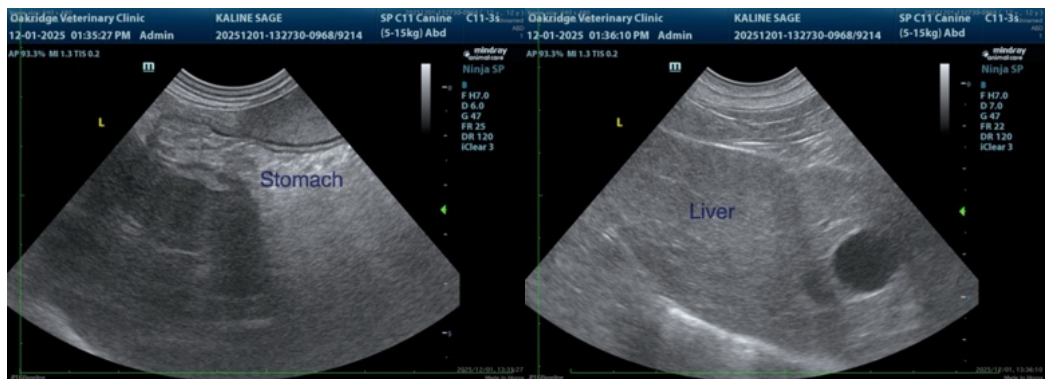
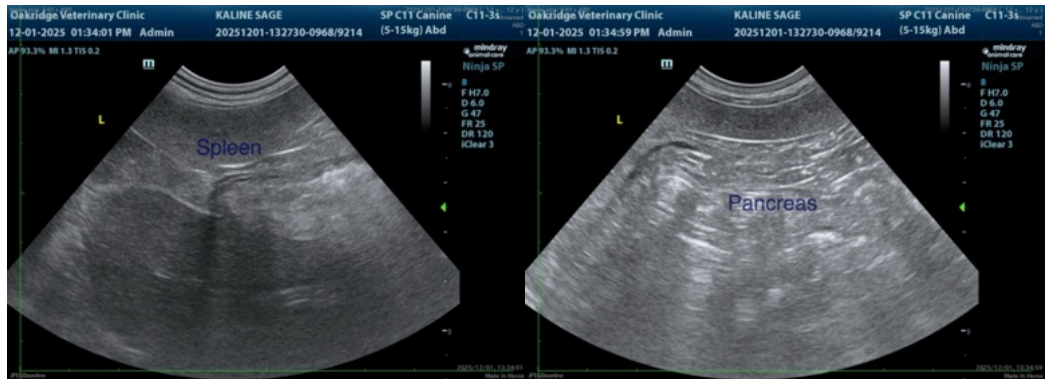
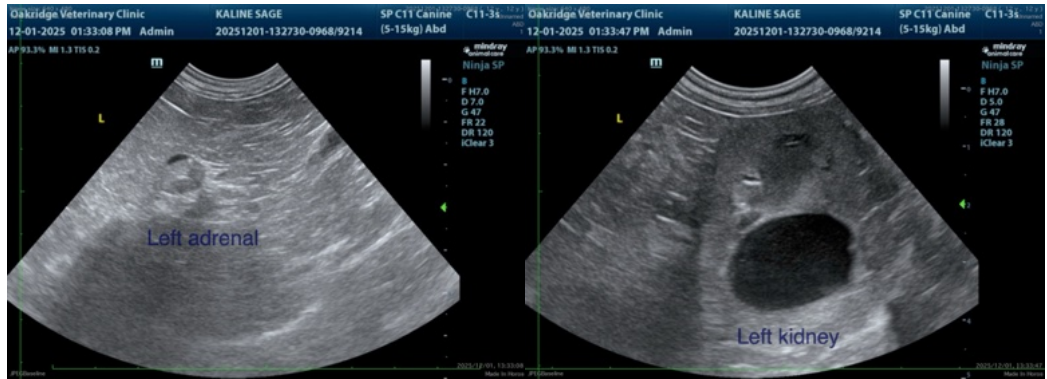
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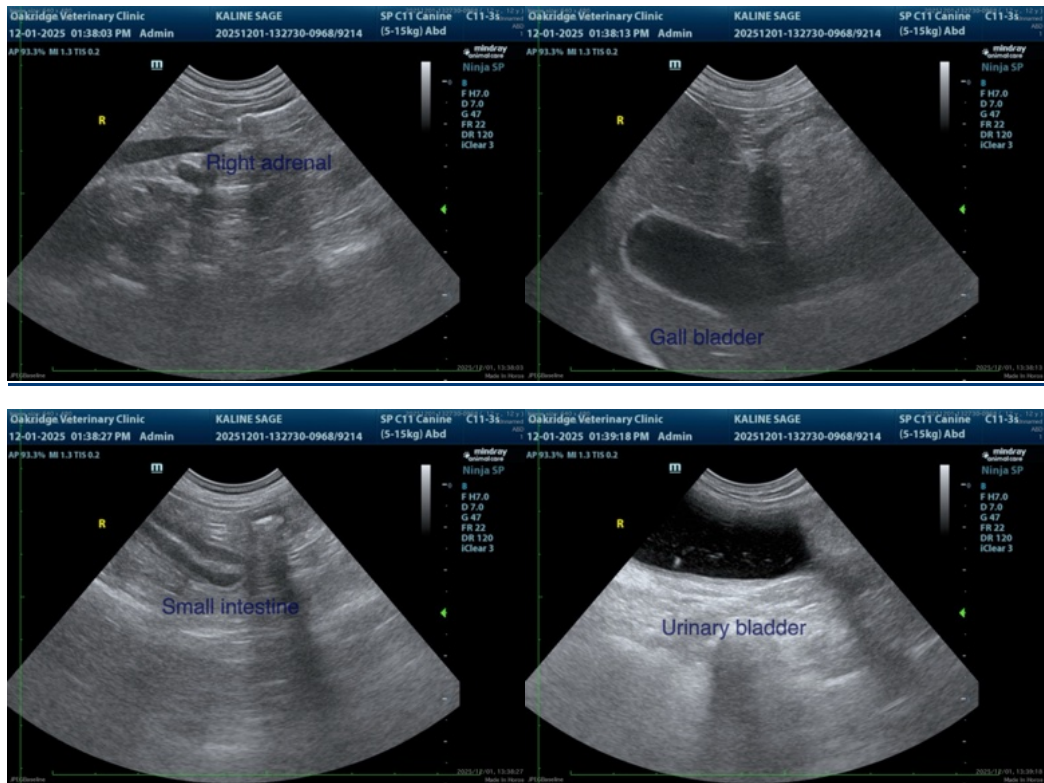
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)

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