



PATIENT

Roux Young

SPECIES

Canine

BREED

Border Collie Mix

SEX

Intact female

AGE

11 weeks

WEIGHT

16 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Brandi Kurzowski

HOSPITAL NAME

Corfu VC

REFERRING VET

Dr. Beatty

INVOICE

72189

DATE

3/4/26

PRESENTING CLINICAL SIGNS

- O got p on 2/14/24, p was having constant urination, eating snow, PUPD, rare bowel movements
- UA revealed WBC, low USG 1.006, no bacteria seen, started on clavamox for 1 week
- PUPD symptoms improved while on abx, p also started having BM on a more regular basis, once abx were stopped, symptoms returned
- P has better control of symptoms while on abx and probiotics
- 2/18/26 CBC- RBC 4.55 M/uL, HCT 33%, HGB 10.5 g/dL, Lymph 7 k/uL, Mono 1.4 k/uL Chem-TP 4.5 g/dL, Glob 1.6 g/dL, GLU 125mg/dL, Phos 9.4 m,g/dL Urine culture- no growth

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is full with a normal thickness and smooth appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

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 5.7 cm, right measured 5.2 cm), architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. Normal color flow pattern is evident in both kidneys.

Adrenal Glands

The adrenal glands were not clearly visualized, but appears to be of normal shape, echogenic appearance and size. The left adrenal gland measured approximately 0.42 cm in width and the right adrenal gland measured approximately 0.4 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 0.8 cm in width.

Liver

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



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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 moderate amount of ingesta is present in the stomach and there is chyme present within the small intestine both 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

- Normal ultrasound examination of the abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

On this ultrasound there is no obvious etiology for the presenting clinical signs.

With the patients presenting clinical signs, age and response to antibiotic therapy, the most likely diagnosis would be intestinal dysbiosis.

Further assessment that can be considered would be intestinal dysbiosis index.

Management would be to continue with the probiotics and to feed an intestinal biome type diet.



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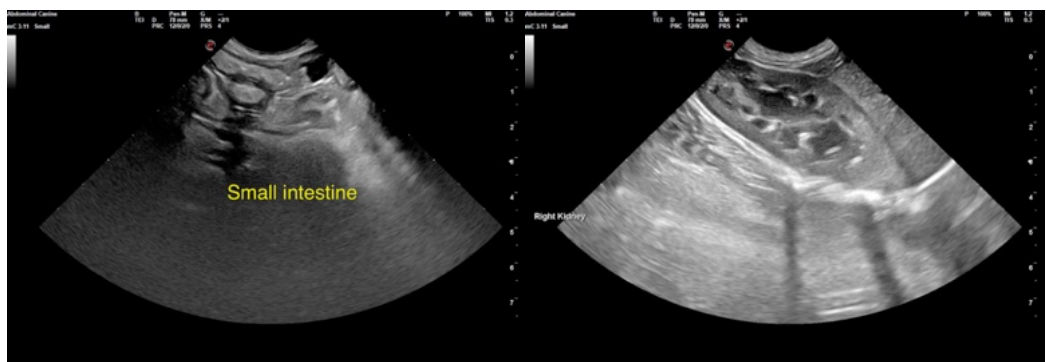
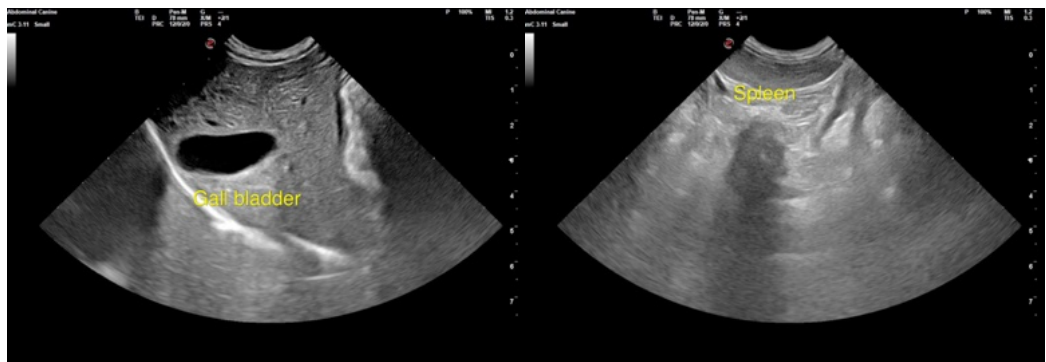
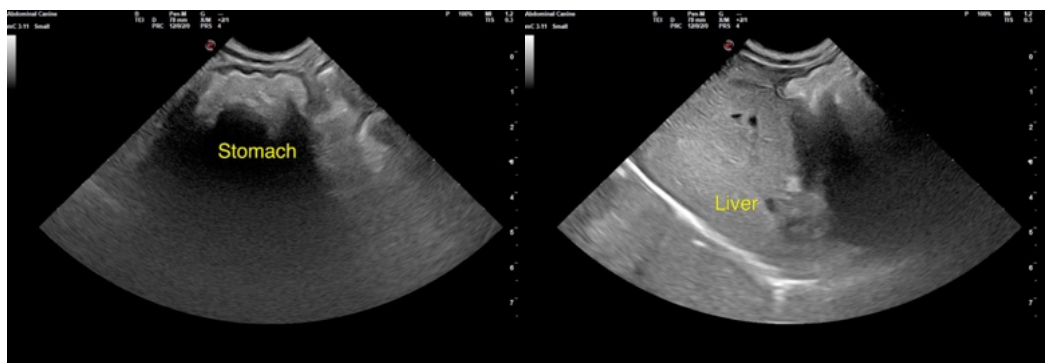
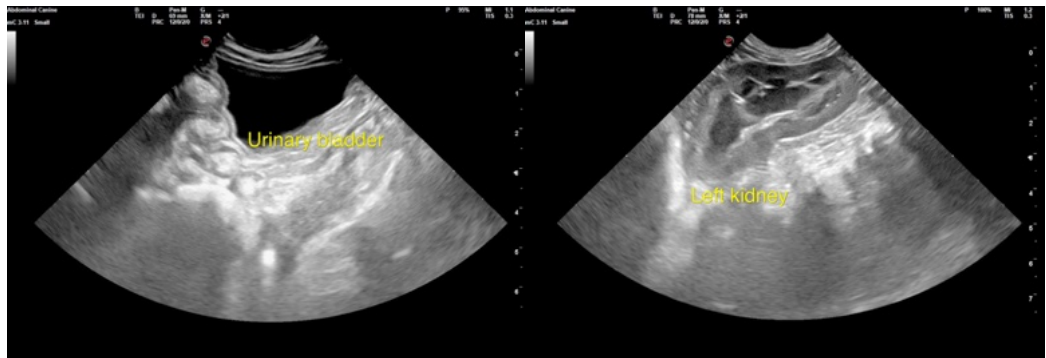
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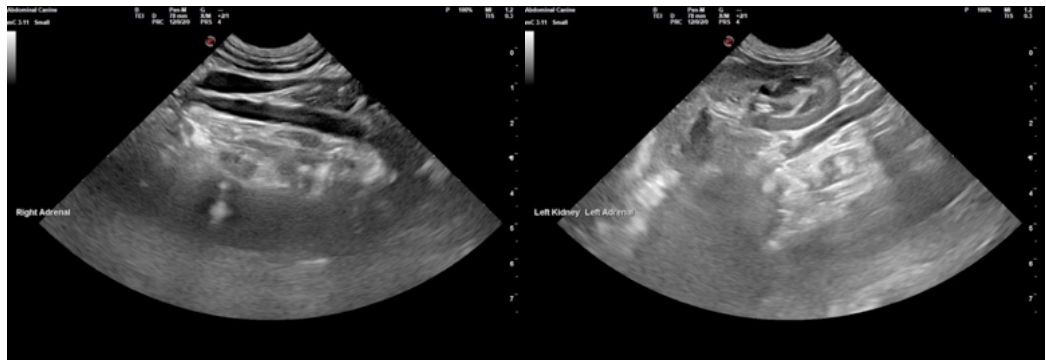
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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