



PATIENT

Bailey Villegas

SPECIES

Canine

BREED

Doodle

SEX

Neutered Male

AGE

10 Years

WEIGHT

36 Pounds

INTERPRETED BY

Remo Lobetti BVSc,
MMedVet, PhD,
DECVIM

IMAGING PERFORMED BY

Kerri Becker

HOSPITAL NAME

All Creatures, Denville

REFERRING VET

Dr. Silas

INVOICE

36520

DATE

4/10/26

PRESENTING CLINICAL SIGNS

History: Cranial abd. pain, lethargic, xrays hepatomegaly and mild splenomegaly
Abnormal PE/Chem/CBC/UA Results: alk-468

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder 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.

Small hypoechogenic prostate was noted.

Normal renal size, architecture, echogenic appearance, cortico-medullary differentiation, which maintains a 1:3 cortex to medulla ratio, pelvis, and capsule. No infarcts, mineralization or renoliths evident. The left kidney measured 6.0 cm. The right kidney measured 5.7 cm. Normal colorflow pattern was evident in both kidneys.

Adrenal Glands

Normal shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. The left adrenal gland measured 2.56 cm in length x 0.57 cm and 0.65 cm in width. The right adrenal gland measured 1.69 cm in length x 0.47 cm in width.

Spleen

Normal size (2.2 cm in width) 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.

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

Full gallbladder, containing a small amount of adhered hypoechogenic sediment. 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.

Pancreas

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.



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Free Abdomen

Normal mesenteric lymph nodes.

No ascites evident.

Thorax

Normal appearance of the heart. No pleural or pericardial effusion was evident.

ULTRASONOGRAPHIC FINDINGS

- Gallbladder sediment
- In essence this is a normal ultrasound examination of the abdomen, as the gallbladder sediment can be considered an incidental finding.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

On this ultrasound there is no obvious etiology for either the presenting clinical signs or the elevated ALP activity.

Although the visible sections of the pancreas appear ultrasonographically normal, with the presenting clinical signs, low-grade pancreatitis should still be considered.

Although the liver appears ultrasonographically normal, with the elevated ALP activity, an underlying hepatopathy such as reactive hyperplasia, vacuolar and metabolic, should still be considered.

Further assessment would be CPL/PSL assay and FNA cytology of the liver.

Specific therapy would be dependent on an etiological diagnosis.



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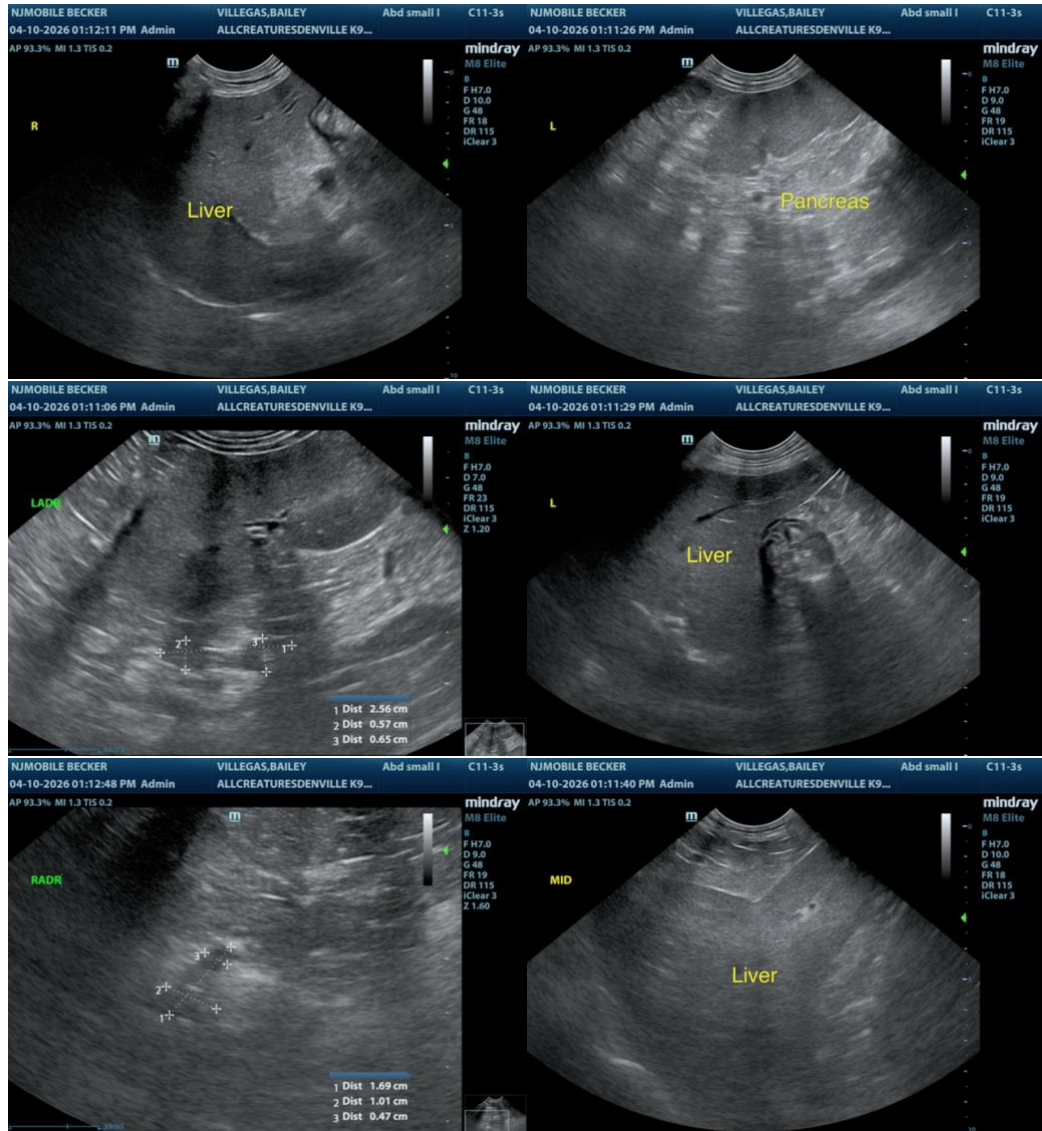
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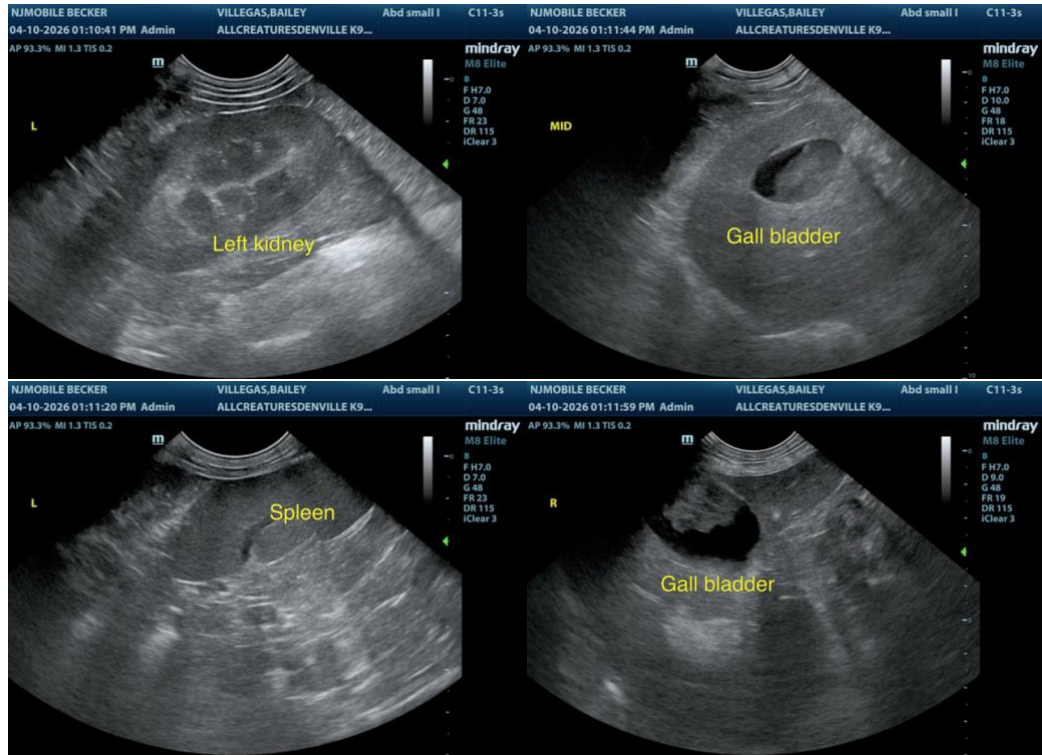
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

info@sonopath.com