



PATIENT

Sparty Kleine

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed female

AGE

8 years

WEIGHT

61.2 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Katie Margulies

HOSPITAL NAME

Fairland AH

REFERRING VET

Dr. Margulies

INVOICE

75490

DATE

5/13/26

PRESENTING CLINICAL SIGNS

History: Patient was adopted 12/2025 and came with a history of chronic large bowel diarrhea. Was initially on Costco senior pet formula, but starting in April was starting to transition to an over the counter sensitive stomach formula. When 'stable' patient will have overall soft in appearance with mucus stools, but no increase in urgency and frequency. Will go through flare ups where there is a significant increase in urgency/frequency, which resolves with metronidazole, diigel and bland diet. Once kibble is started to add back in, the stool texture will start to soften again.

Abnormal PE/Chem/CBC/UA Results: UA and fecal pending from 4/14/2026 bloodwork panel (samples collected on day of ultrasound) TAMU panel submitted 5/12 and results are still pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is small 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 6.0 cm, right measured 6.4 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.

Adrenal Glands

The adrenal glands are not clearly visualized, but both appear to be of normal shape, echogenic appearance and size.

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 2.7 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.



PATIENT

Sparty Kleine

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed female

AGE

8 years

WEIGHT

61.2 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Katie Margulies

HOSPITAL NAME

Fairland AH

REFERRING VET

Dr. Margulies

INVOICE

75490

DATE

5/13/26

Gallbladder

The gallbladder is full containing a small amount of non-adhered, hyperechogenic 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. Fecal material was present in the colon.

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

- Gallbladder sediment.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The gallbladder sediment can be considered an incidental finding.

On this ultrasound there is no obvious etiology for the chronic colonic disease.

Etiologies to consider would be idiopathic colitis, granulomatous colitis, dietary hypersensitivity, inflammatory bowel disease and possibly emerging neoplasia.

Further assessment would be based on the pending results, but could include rectal cytobrush cytology and colonoscopy with biopsies.

Specific therapy would be dependent on an etiological diagnosis.

Symptomatic management that could be considered would be feeding a novel protein/hypoallergenic diet either Sulfasalazine or Olsalazine and if there is still not a satisfactory improvement then a course of Prednisolone would then be indicated.



PATIENT

Sparty Kleine

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed female

AGE

8 years

WEIGHT

61.2 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Katie Margulies

HOSPITAL NAME

Fairland AH

REFERRING VET

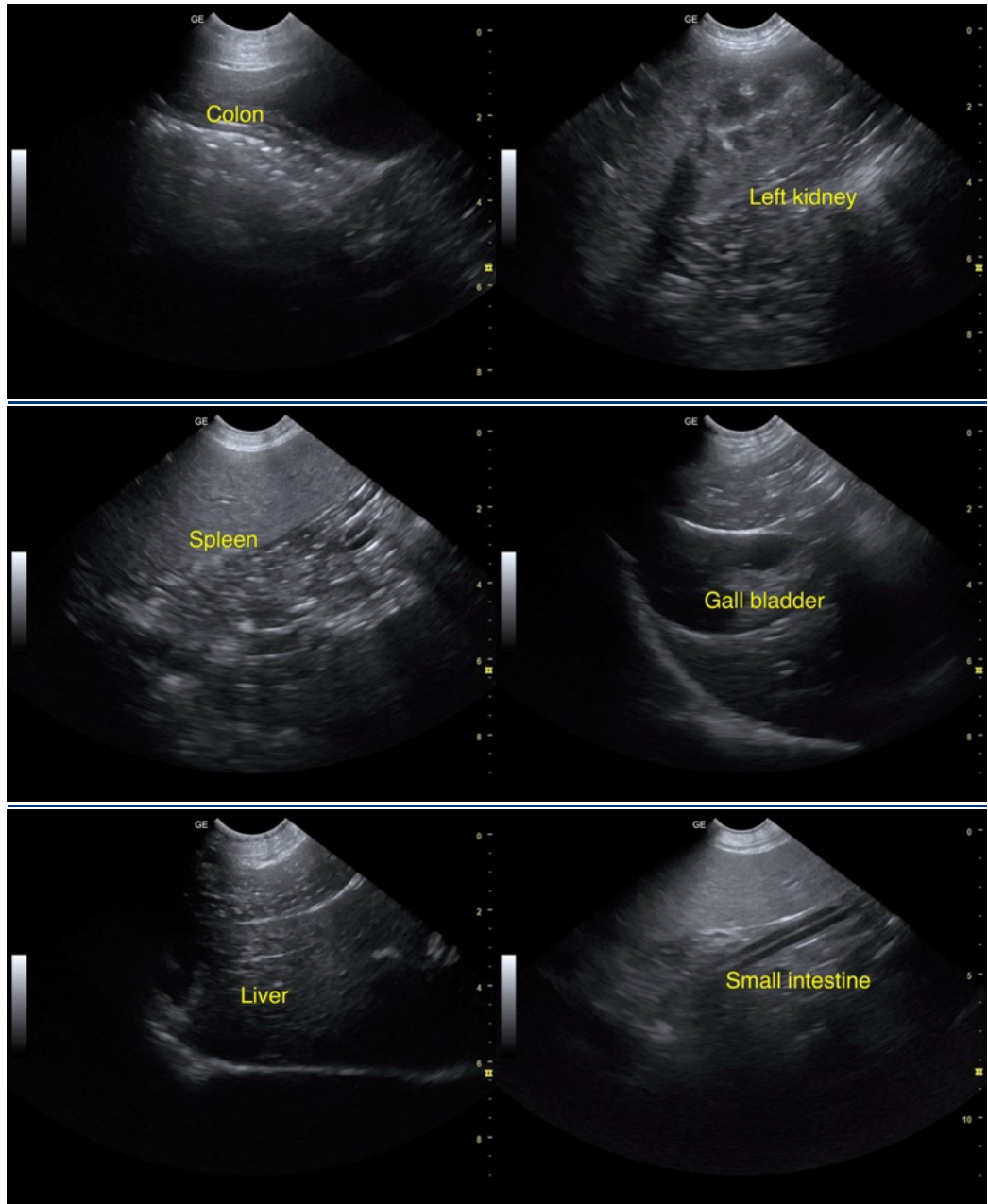
Dr. Margulies

INVOICE

75490

DATE

5/13/26



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