



## PATIENT

Sam Jager

## SPECIES

Canine

## BREED

Mix

## SEX

Neutered male

## AGE

13 years

## WEIGHT

71 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Rebecca Barnard

## HOSPITAL NAME

Southkent VH

## REFERRING VET

Dr. Kursch

## INVOICE

75273

## DATE

5/7/26

## PRESENTING CLINICAL SIGNS

History: Non-regenerative anemia, worsening from visit a few weeks ago. Has previously had a splenectomy back in 4/2024 benign tumor.

Abnormal PE/Chem/CBC/UA Results: RBC 5.38 M/ $\mu$ L, Hematocrit 33.4%, Hemoglobin 12.4g/dL

## 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 5.6 cm, right measured 5.5 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.

The prostate is small and hypoechogenic.

### *Adrenal Glands*

The left adrenal gland is normal in shape, echogenic appearance, size, position, and appearance of the visible peri-adrenal vasculature. Left adrenal gland measured 1.11 cm in length x 0.52 cm in width. The right adrenal gland was not visualized.

### *Spleen*

The spleen was not visualized (previous splenectomy). Normal appearance of the anatomical area of the spleen.

### *Liver*

Normal size, echogenic appearance, portal markings, and regular curvilinear capsule. A few, hypoechogenic parenchymal nodules are present and measure up to 1.8 x 1.8 cm in size. No 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.

## ***Pancreas***

The pancreas was not visualized.

## ***Free Abdomen***

Normal mesenteric lymph nodes.

No ascites evident.

## **ULTRASONOGRAPHIC FINDINGS**

- Hepatic nodules.

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Etiologies for the hepatic nodules would be nodular hyperplasia, granulomatous disease and possibly infiltrative neoplasia.

Further assessment would be three view thoracic radiographs and FNA cytology of the hepatic nodules.

A tru cut or wedge biopsy may be required for a final etiological diagnosis.

Specific therapy would be dependent on an etiological diagnosis.



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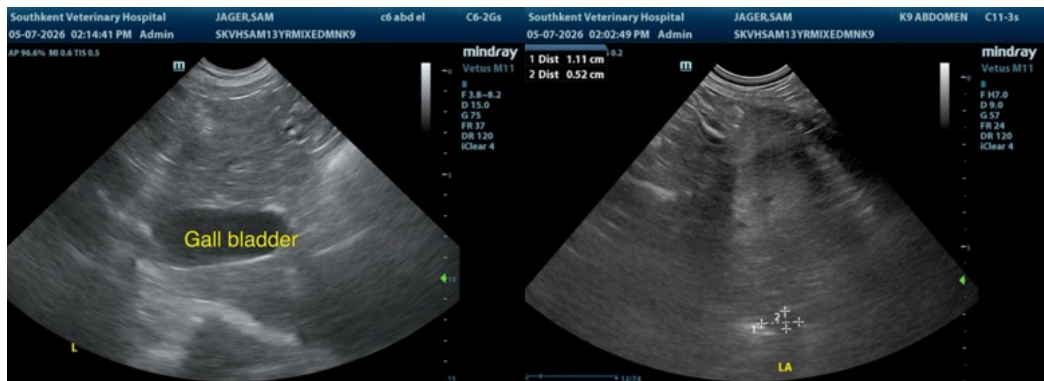
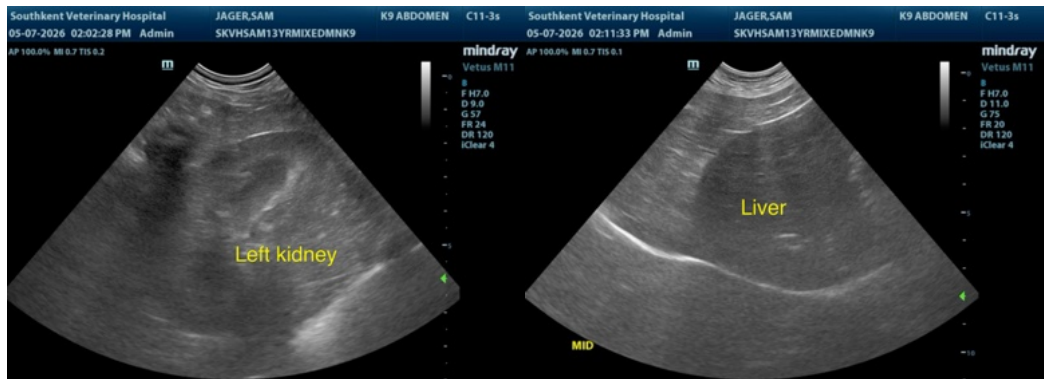
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)