

## PATIENT

Todd Mcwalter

## SPECIES

Canine

## BREED

Chihuahua

## SEX

MN

## AGE

14 years

## WEIGHT

1.28

## INTERPRETED BY

Kathleen Sennello DVM,  
MS, Diplomate ACVIM  
(Small Animal Internal  
Medicine)

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski

## HOSPITAL NAME

Apex Veterinary  
Services Ltd.

## REFERRING VET

Alpine 24/7 – ER Dr

## INVOICE

11613

## DATE

4/1/2026

## PRESENTING CLINICAL SIGNS

Mild increased soft tissue opacity within the cranial abdominal (gallbladder?) region, most consistent with superimposition of normal structures. No radiographic evidence of mineralization or discrete mass effect. Gallbladder pathology cannot be assessed on radiographs.

Abnormal PE/Chem/CBC/UA Results: Pain on abdominal palpation with guarding Concurrent thoracolumbar discomfort Thin body condition (BCS 2.5/5) Mild leukocytosis with neutrophilia Platelets mildly low Renal, hepatic parameters within normal limits - Serosal detail: Mildly decreased consistent with lean body condition - Stomach: Moderately gas-filled, normal position, - Small intestines: Mild, diffuse gas; no segmental dilation or obstructive pattern - Colon: Mild-moderate fecal content with gas - Liver/spleen silhouette: WNL Mild increased soft tissue opacity within the cranial abdominal (gallbladder) region, most consistent with superimposition of normal structures. No radiographic evidence of mineralization or discrete mass effect. - Urinary bladder: Moderately distended, smoothly marginated.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

The prostate is normal in size (0.75 cm) and shape for this neutered male dog. The parenchyma is homogenous and the external margins are smooth. The prostatic urethra appears normal with no evidence of irregularity, invasion, mass effect or calculi.

The left kidney has a normal shape and size (2.85 cm). Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (2.89 cm). Overall echogenicity is slightly hyperechoic with poor corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

### Adrenal Glands

The left adrenal gland is normal in size measuring 0.36 cm at the cranial pole and 0.42 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The right adrenal gland is normal in size measuring 0.38 cm at the caudal pole (the cranial pole is not clearly visualized). It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

### Spleen



## PATIENT

Todd Mcwalter

The spleen is subjectively normal in size (0.83 cm) and the echotexture is homogenous. The splenic capsule is smooth with no visible irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

## SPECIES

Canine

### Liver

The liver is large in size, and normal in echogenicity with smooth peripheral margins. The parenchyma is mildly heterogenous in echotexture with subtle, indistinct focal mottling. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

## BREED

Chihuahua

The gall bladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. There is a moderate/large amount of non-organized echogenic debris. Some of the debris is hyperechoic, possibly consistent with some mineralized/sandy debris. The cystic and common bile ducts are normal/not visible.

## SEX

MN

### Gastrointestinal

## AGE

14 years

The stomach contains mild fluid. It measures at a normal thickness of 0.4 cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

## WEIGHT

1.28

Most of the visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. The duodenum measured as normal (0.29 cm in wall thickness) and the jejunum measured as normal (0.21 cm.) Visualized peristalsis appears appropriate.

## INTERPRETED BY

Kathleen Sennello DVM,  
MS, Diplomate ACVIM  
(Small Animal Internal  
Medicine)

Descending colon is distended with non-formed/liquid fecal material. There is no observed focal or generalized colon wall thickening or loss of layering.

### Pancreas

The pancreas is large and hypoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is evidence of regional mesenteric inflammation. Consistent with mild pancreatitis (left limb greater than right limb.)

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski

### Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion. There is no lymphadenopathy. The omentum is hyperechoic in the cranial abdomen in the region of the stomach and the pancreas.

## HOSPITAL NAME

Apex Veterinary  
Services Ltd.

## REFERRING VET

Alpine 24/7 - ER Dr

## ULTRASONOGRAPHIC FINDINGS

## INVOICE

11613

- Age related changes visualized associated with both kidneys.
- Prominent hypoechoic left limb of the pancreas and mottled right limb of the pancreas with some reactive mesentery in the region. Findings are most consistent with mild pancreatitis.
- Mildly heterogenous liver. The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, nodular hyperplasia, inflammatory/immune-mediated disease, infiltrative neoplasia (less likely) or other hepatopathy.

## DATE

4/1/2026



## PATIENT

Todd Mcwalter

## SPECIES

Canine

## BREED

Chihuahua

## SEX

MN

## AGE

14 years

## WEIGHT

1.28

## INTERPRETED BY

Kathleen Sennello DVM,  
MS, Diplomate ACVIM  
(Small Animal Internal  
Medicine)

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski

## HOSPITAL NAME

Apex Veterinary  
Services Ltd.

## REFERRING VET

Alpine 24/7 - ER Dr

## INVOICE

11613

## DATE

4/1/2026

- Large gallbladder debris with some mild sandy/mineralized debris. A large amount of debris is evident in the gall bladder with no evidence of a mucocele or associated inflammation at this time. This could represent an early mucocele or cholestasis, with minimal evidence of associated inflammation at this time. Continued monitoring of labwork and ultrasound are warranted for progression of this lesion. Ursodiol therapy could be considered.
- Areas of mildly fluid distended small intestine and fluid distended descending colon. Findings are most consistent with enteritis/colitis.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

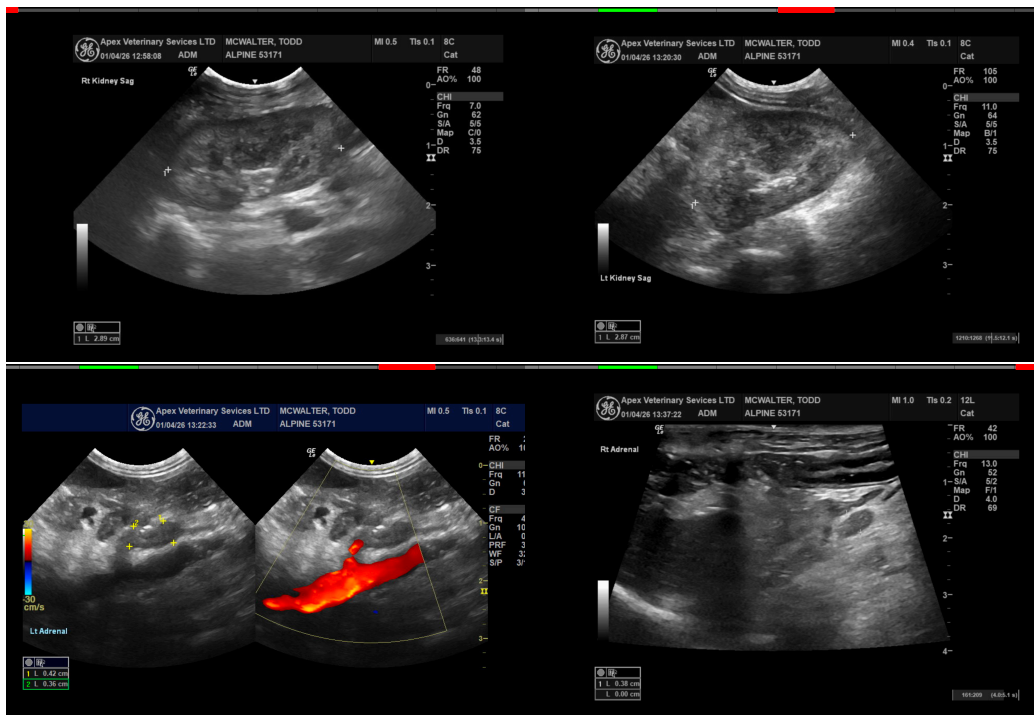
There are focal areas of pancreas medial to the spleen which appear hypoechoic and prominent. The right limb of the pancreas appears somewhat mottled and there is some reactive mesentery in the region. Correlate with a PLI level and consider empirical treatment for pancreatitis.

The gallbladder has a moderate to large amount of non-organized debris with no evidence of wall thickening or significant inflammation. Correlate with current lab values. If cholecystitis is strongly suspected, you could consider empirical treatment with ursodiol and continued monitoring.

The liver appears mildly heterogenous. This is non-specific finding.

The small intestine and colon have mild gas and fluid distension and some areas suggestive of mild enterocolitis.

If symptomatic therapy is not effective and the patient's symptoms are progressing, consider repeat imaging in the future looking for the development of new lesions or the progression of today's lesions.





## PATIENT

Todd Mcwalter

## SPECIES

Canine

## BREED

Chihuahua

## SEX

MN

## AGE

14 years

## WEIGHT

1.28

## INTERPRETED BY

Kathleen Sennello DVM,  
MS, Diplomate ACVIM  
(Small Animal Internal  
Medicine)

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski

## HOSPITAL NAME

Apex Veterinary  
Services Ltd.

## REFERRING VET

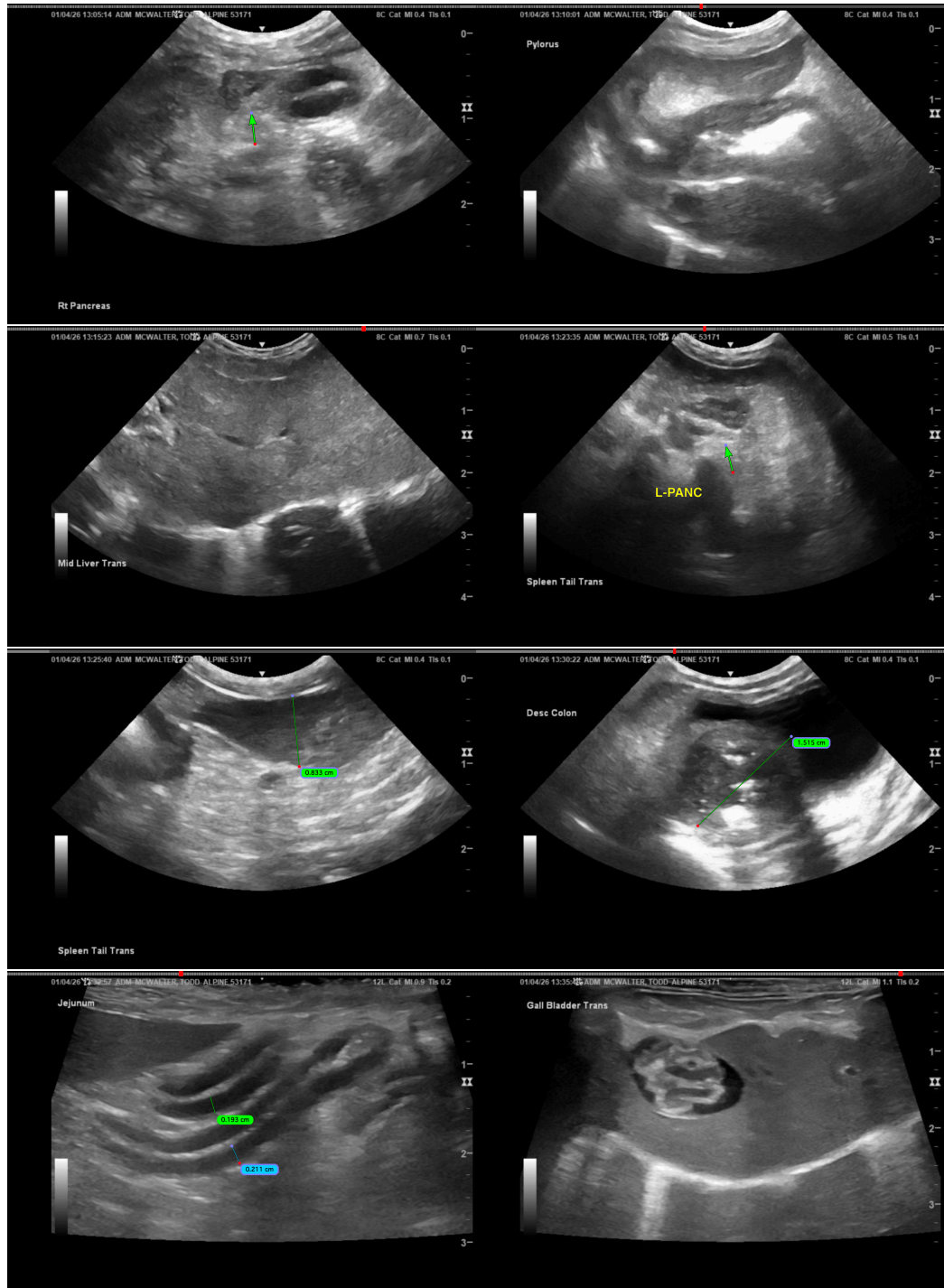
Alpine 24/7 - ER Dr

## INVOICE

11613

## DATE

4/1/2026





## PATIENT

Todd Mcwalter

## SPECIES

Canine

## BREED

Chihuahua

## SEX

MN

## AGE

14 years

## WEIGHT

1.28

## INTERPRETED BY

Kathleen Sennello DVM,  
MS, Diplomate ACVIM  
(Small Animal Internal  
Medicine)

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski

## HOSPITAL NAME

Apex Veterinary  
Services Ltd.

## REFERRING VET

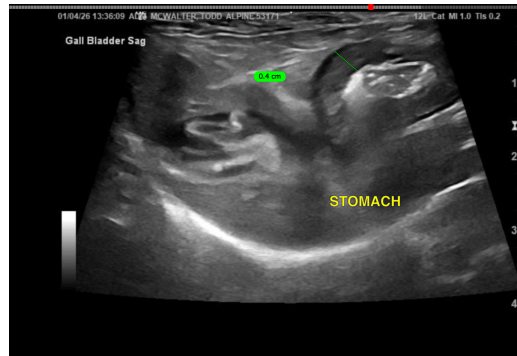
Alpine 24/7 - ER Dr

## INVOICE

11613

## DATE

4/1/2026



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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

info@sonopath.com