



PATIENT

Jacob Tavares

SPECIES

Canine

BREED

Labrador Retriever Mix

SEX

Male Neutered

AGE

12y

WEIGHT

69.9 lbs

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS Certified
Veterinary
Sonographer

HOSPITAL NAME

Rhode Island Animal
Medical Center

REFERRING VET

Devan Sacknoff, DVM

INVOICE

13054

DATE

1/10/26

PRESENTING CLINICAL SIGNS

History: Elevated liver values. Nonclinical. ALP 578. Eosin 11. Urine pH 7.5, USG 1.011, RBC 0-1, tran epith 0-1. On taping dose of Prednisone for aural hematoma.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment, mineral or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

The residual prostate was free of pathology.

The area of the aortic trifurcation was free of pathology.

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 6.8 cm in length. The right kidney exhibited a caudal cyst measuring 1.7 cm in diameter. The right kidney measured 6.6 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.70 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.53 cm width at the caudal pole.

Spleen

The spleen was subjective mildly enlarged in size with symmetrical contour and mild heterogeneous parenchyma. Normal vascularity was noted.

Liver

The liver presented mildly enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non distended in size with mild, non-organized, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild anechoic fluid.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.



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Normal visible colon wall layers were present with apparent formed feces in lumen.

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Pancreas

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The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

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Free Abdomen

Labrador Retriever Mix

No overt lymphadenopathy or peritoneal effusion was present.

SEX

ULTRASONOGRAPHIC FINDINGS

Male Neutered

- Benign hepatopathy – sonographically suggestive of vacuolar hepatopathy criteria
- Non-organized, mild gallbladder debris (non-mucocele)
- Age-related renal changes with right kidney cyst
- Normal bilateral adrenal glands
- Mildly enlarged non-homogeneous spleen – incidental hyperplasia, hematopoiesis, possible inflammation assuming patient is non-sedated, potential for emerging occult splenic neoplasia thought less likely yet not excluded

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

Hepato-supportive medications including Denamarin and Ursodiol if tolerated with monitoring of hepatic parameters during tapering dose of Prednisone would be reasonable. Assuming normal clotting status and using 25-gauge needle, screening splenic FNA cytology could be warranted if patient non-sedated persistent or progressive splenomegaly or evidence of weight loss.

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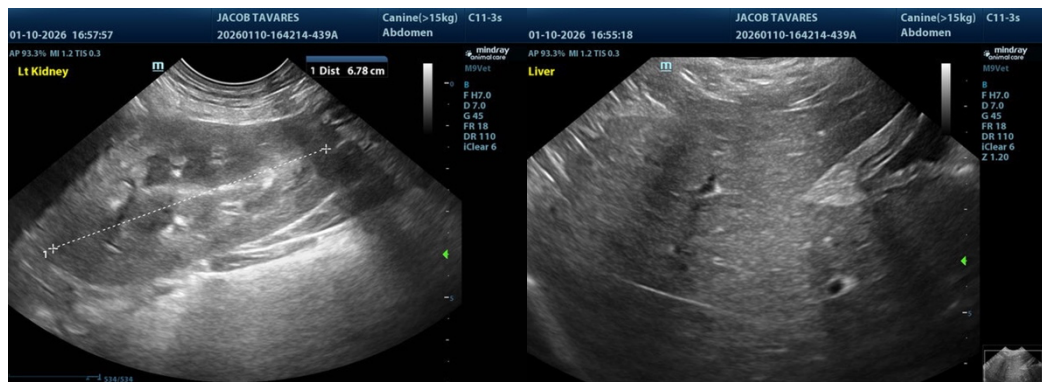
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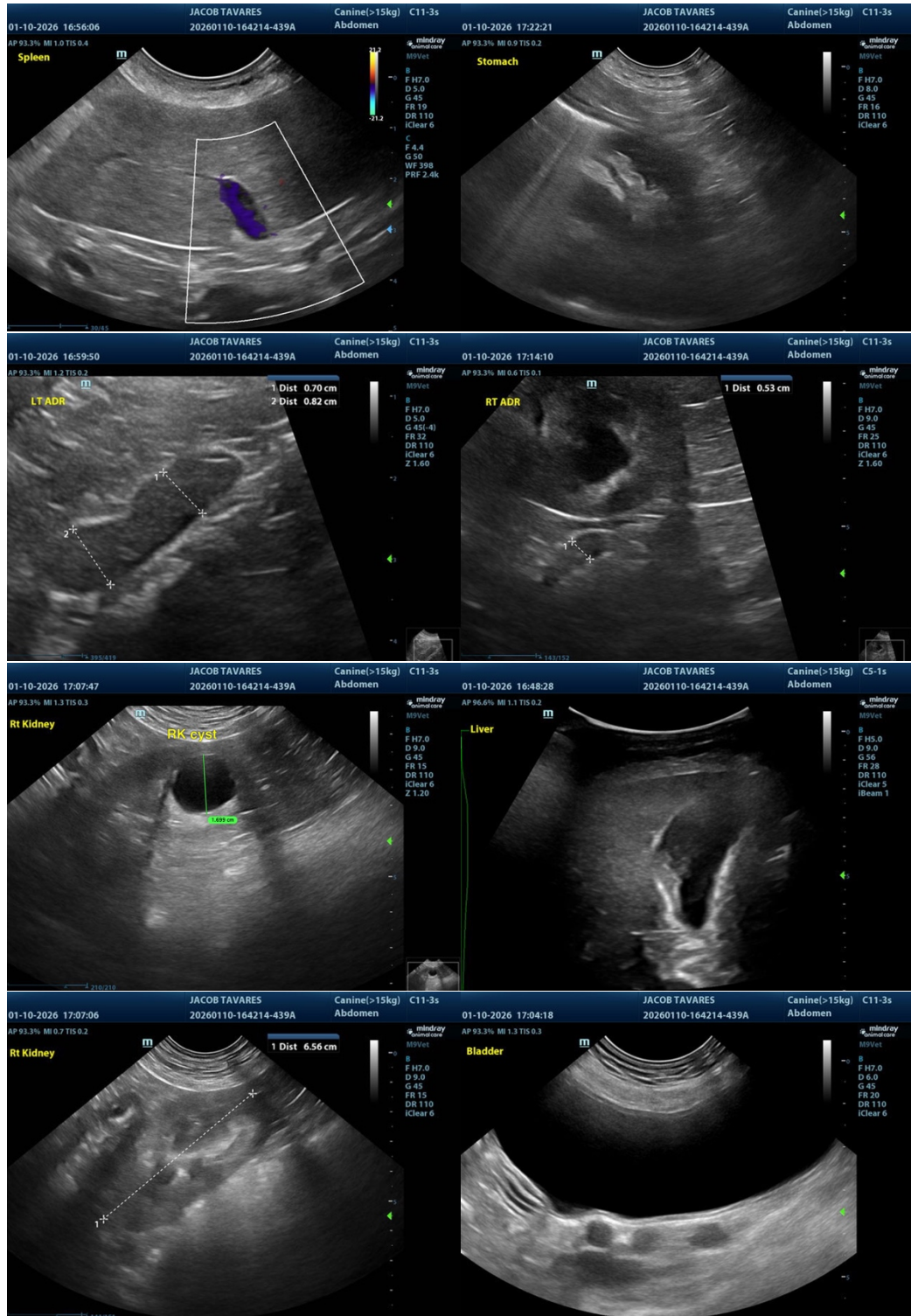
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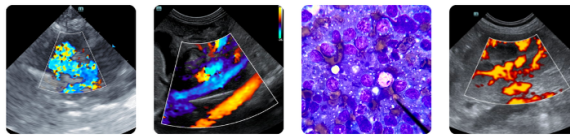
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@sonopath.com