



PATIENT

Mojo Lett

SPECIES

Canine

BREED

Poodle Mix

SEX

MN

AGE

11yr

WEIGHT

13.6lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Mack E

HOSPITAL NAME

Northside Veterinary
Clinic

REFERRING VET

Mack E

INVOICE

23525

DATE

01/12/2026

PRESENTING CLINICAL SIGNS

Decreased appetite

Abnormal PE/Chem/CBC/UA Results: 4Dx: Negative CBC/CHEM: WNL U/A: Cocci present

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 evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were 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 4.5 cm in length. The right kidney measured 4.1 cm in length.

The area of the aortic trifurcation was free of pathology.

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured 3.0 cm in diameter. Multiple variably sized anechoic, thinly walled parenchyma cysts were present.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.46 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 0.48 cm width at the caudal pole.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver/Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal



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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild retained primarily non-shadowing ingesta / chyme. Within the gastric ingesta, a solitary non-obstructive shadowing echo was present measuring 1.5 cm in diameter

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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 mechanical/metabolic ileus, obstruction or foreign material.

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

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Pancreas

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

No overt mid abdomen lymphadenopathy or peritoneal effusion was present.

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A non-homogenous structure in the caudal abdomen at the level of the iliac trifurcation which did not overtly exhibit typical lymph node criteria was present measuring ~ 2.5 cm in diameter.

ULTRASONOGRAPHIC FINDINGS

Primary

- Enlarged non-homogenous, mildly cystic prostate gland.
- Age-related renal changes.
- Mild retained gastric ingesta with non-obstructive lumen echo.
- Sonographic normal small intestine.
- Non-homogenous caudal abdomen structure

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given patient is reported neutered, the prostate presentation is suggestive of benign prostatic hyperplasia with concurrent small prostatic cysts or potential for prostatitis with prostatic neoplastic criteria considered unlikely.

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The caudal abdomen structure may indicate known or unknown retained testicle. Correlation with clinical history is recommended as well as diagnostic testing to potentially confirmed known or unknown cryptorchidism. Concurrent prostatic sampling and urine C/S warranted for further clarification.

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The non-obstructive shadowing gastric lumen echo is nonspecific. Documented 12-hour fast and sonographic reassessment of the stomach would be ideal. If persistent, upper gastrointestinal endoscopy is suggested.

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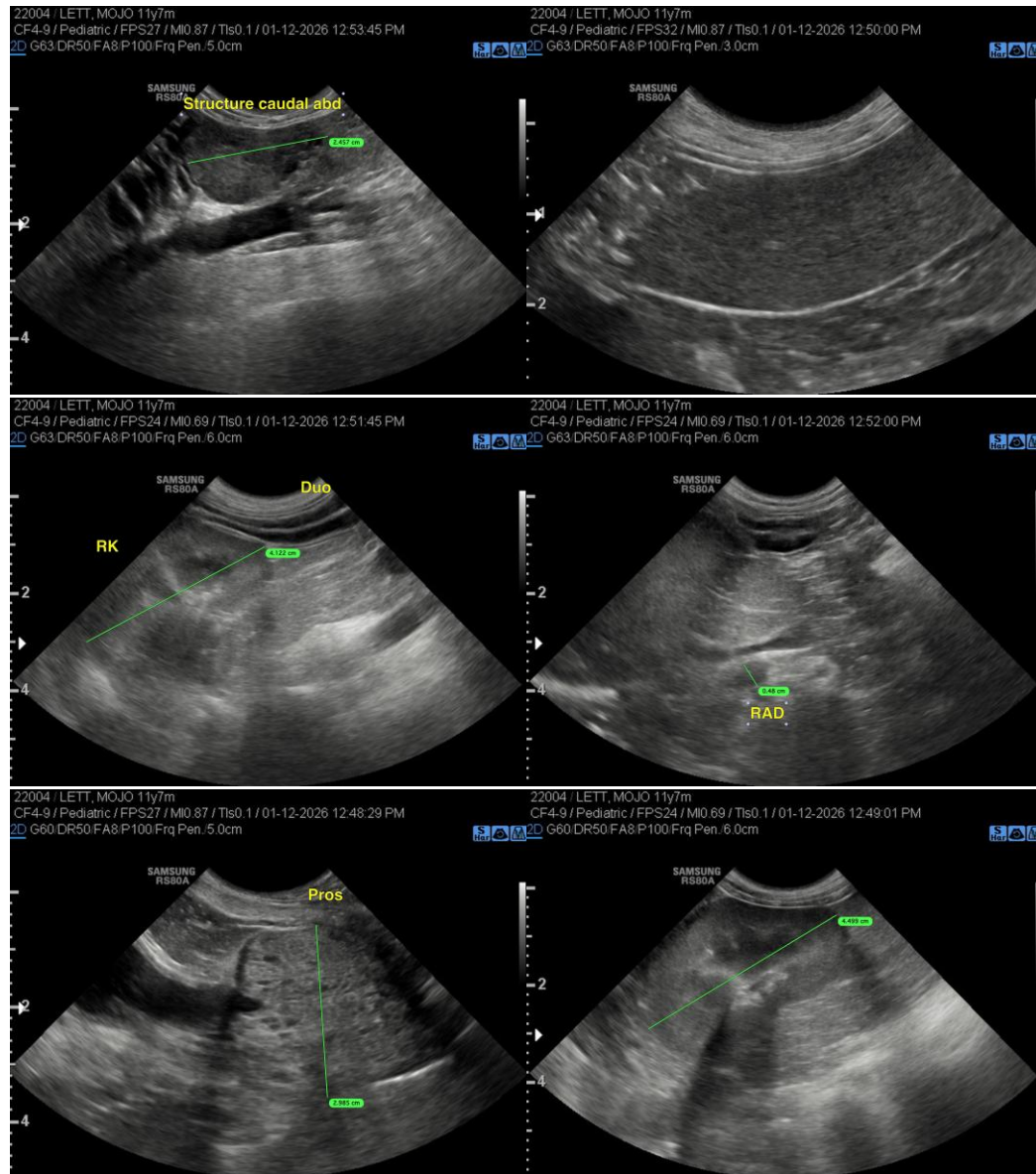
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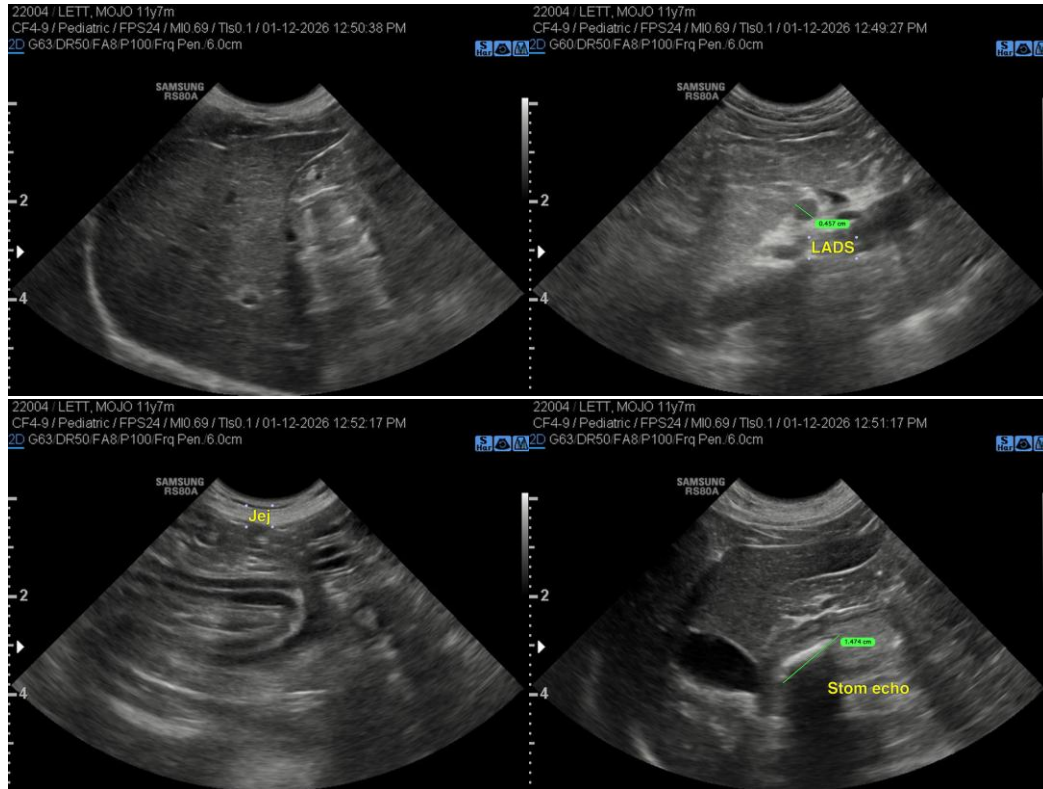
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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