



PATIENT

Elliot Carefoot

SPECIES

Canine

BREED

Terrier Mix

SEX

MN

AGE

1yr

WEIGHT

8.2kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Aar

HOSPITAL NAME

Fish Creek Pet Hospital

REFERRING VET

Dr Whale

INVOICE

23614

DATE

01/19/2026

PRESENTING CLINICAL SIGNS

Approx 1 week Hx of picky eating, one vomit and diarrhea. No know dietary indiscretion

Abnormal PE/Chem/CBC/UA Results: Mild ALT elevation 140

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm 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 and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 4.9 cm in length. The right kidney measured 4.7 cm in length.

The area of the aortic trifurcation was free of pathology.

The residual prostate appeared normal and free of pathology

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.51 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 0.45 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 uniform and hypoechoic to the spleen with a mild coarse echotexture. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and minor non-dependent debris. The cystic and common bile ducts were normal.

Gastrointestinal



PATIENT

Elliot Carefoot

SPECIES

Canine

BREED

Terrier Mix

SEX

MN

AGE

1yr

WEIGHT

8.2kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Aar

HOSPITAL NAME

Fish Creek Pet Hospital

REFERRING VET

Dr Whale

INVOICE

23614

DATE

01/19/2026

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild retained gastric fluid with no signs of obstruction or foreign material.

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. The duodenum wall measured 0.52 cm width. The jejunum wall measured 0.32 cm width.

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

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

Minor pockets of peritoneal effusion.

Intermittent mildly prominent to enlarged mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example measured 2.7 cm x 0.40 cm.

ULTRASONOGRAPHIC FINDINGS

Primary

- Sonographically unremarkable normal volume liver -consistent with mild benign hepatopathy.
- Structurally normal gastrointestinal tract/ colon with minor retained gastric fluid and soft fecal matter in colon.
- Intermittent mild benign mesenteric lymphadenopathy- benign criteria, i.e. hyperplasia or immunologic immaturity probable.
- Scant peritoneal effusion - suspect physiologic without evidence of hepatic congestion and assuming normal ALB

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of significant gastroenterocolic mural pathology, i.e. intussusception, masses, foreign material or obstructive pattern. Dietary intolerance / hypersensitivity, non-specific gastroenterocolitis or inflammatory bowel, occult parasitism, occult Addison's disease, all potentials. A GI panel and fresh fecal analysis, if not done is recommended. Dietary trial with potential long term dietary therapy, cobalamin supplementation pending assessment of cobalamin level, as needed gastroprotectants and empirical deworming despite fecal testing may prove beneficial.



PATIENT

Elliot Carefoot

SPECIES

Canine

BREED

Terrier Mix

SEX

MN

AGE

1yr

WEIGHT

8.2kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Aar

HOSPITAL NAME

Fish Creek Pet Hospital

REFERRING VET

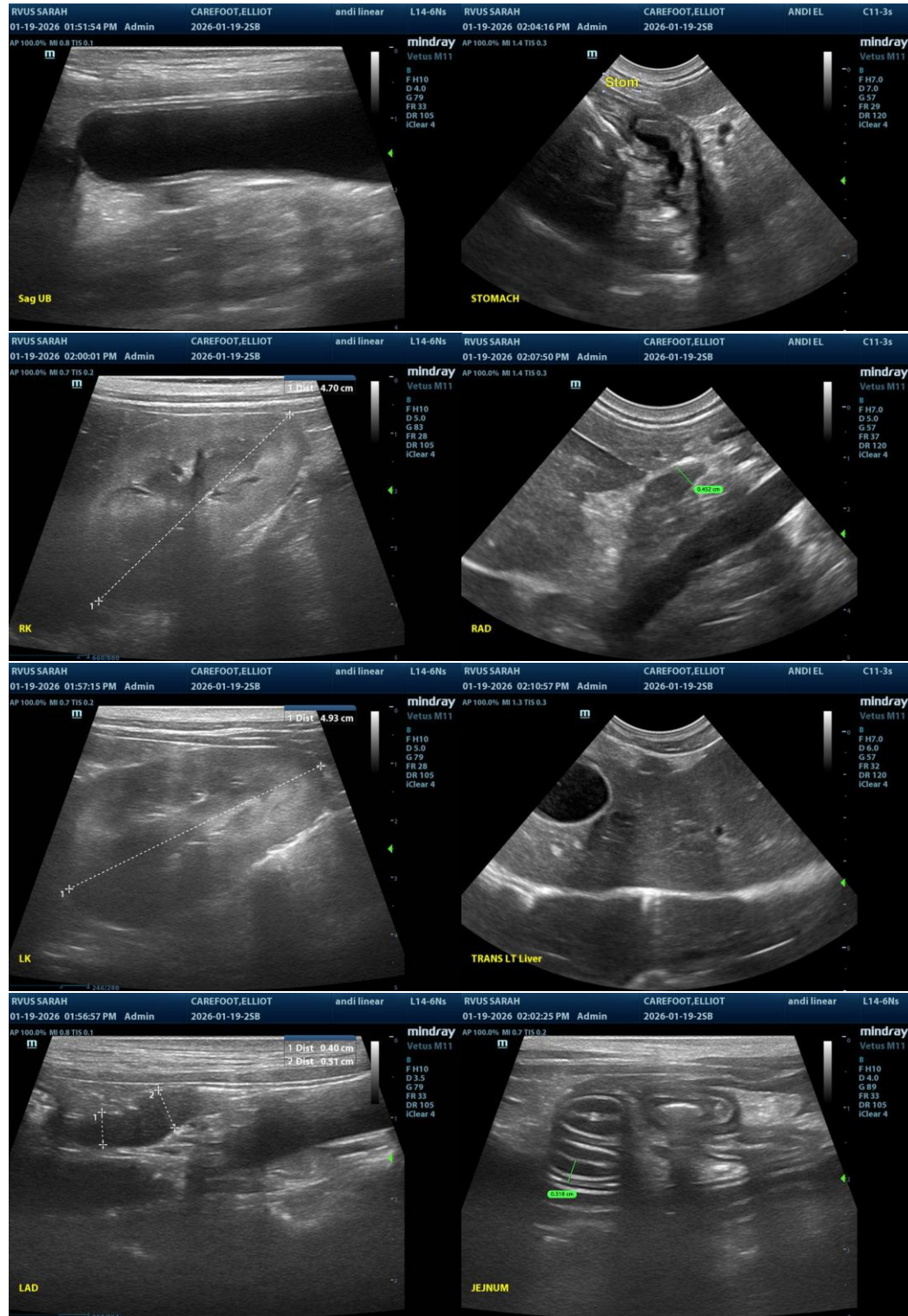
Dr Whale

INVOICE

23614

DATE

01/19/2026





PATIENT

Elliot Carefoot

SPECIES

Canine

BREED

Terrier Mix

SEX

MN

AGE

1yr

WEIGHT

8.2kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr Aar

HOSPITAL NAME

Fish Creek Pet Hospital

REFERRING VET

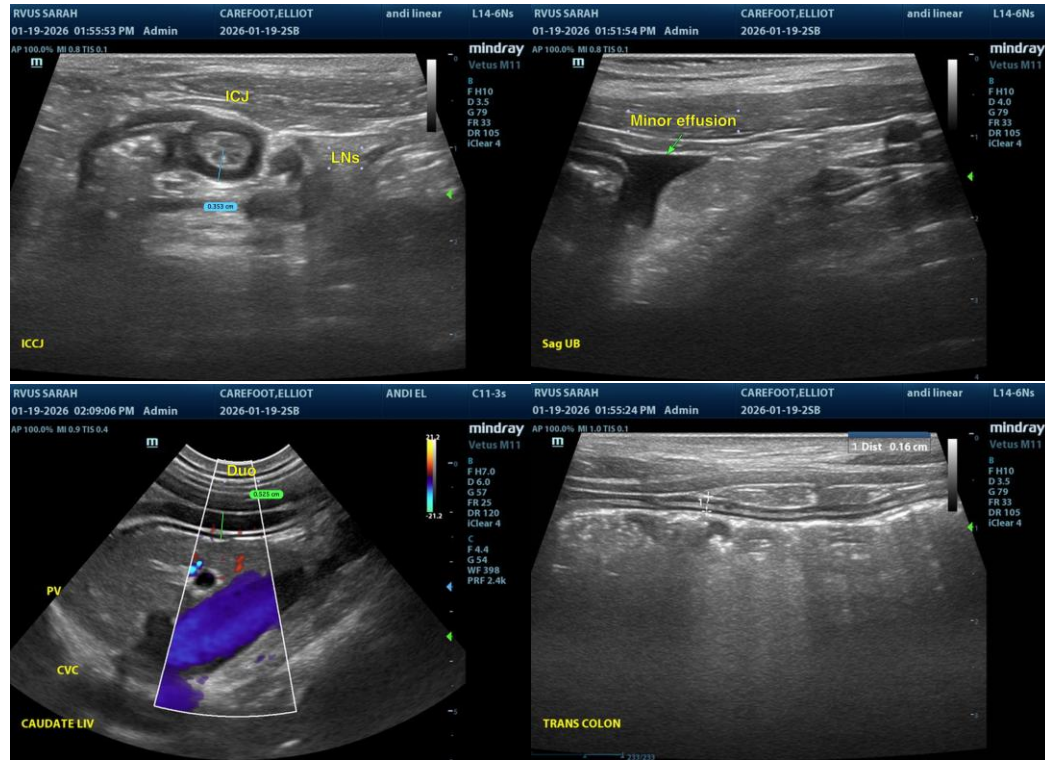
Dr Whale

INVOICE

23614

DATE

01/19/2026



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.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com