



PATIENT

Jacob Miller

PRESENTING CLINICAL SIGNS

pancreatitis vs fb 2 week hx vomitng bile food and eating less

SPECIES

Canine

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.

BREED

Aussie

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 5.3 cm in length. The right kidney measured 4.8 cm in length.

SEX

MN

AGE

12

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate appeared normal and free of pathology

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.68 cm width in the caudal pole. The right adrenal gland measured 0.75 cm width in the caudal pole.

WEIGHT

42.8

INTERPRETED BY

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

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multiple primarily medial parenchyma perihilar non-capsule deforming nodules were present. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

IMAGING PERFORMED BY

Jenn

Liver/Gallbladder

The liver presented 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 debris. The cystic and common bile ducts were normal.

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

Dr Harrs

Gastrointestinal

INVOICE

23606

DATE

01/19/2026



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The stomach presented thickened hypoechoic wall exhibiting loss of gastric mural detail. The stomach was non-distended containing a mild amount of retained anechoic fluid and mild gas. The stomach wall measured 1.1 cm in width.

SPECIES

Canine

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.

BREED

Aussie

Pancreas

The area of the pancreas was indistinctly visualized yet overtly normal owing to perigastric and omental artifact.

SEX

MN

Free Abdomen

Mild surrounding perigastric hyperechoic omentum and minor perigastric effusion.

No definitive visualized significant or swollen gastric or cranial abdomen mesenteric lymph nodes.

AGE

12

ULTRASONOGRAPHIC FINDINGS

Primary

- Thickened mildly hypomotile stomach exhibiting mural hypoechoicogenicity and loss of mural detail.
- Associated perigastric hyperechoic omentum and minor effusion
- Sonographically normal empty small intestine.
- Overtly normal area of pancreas
- Mild non congested hepatomegaly with non-organized gallbladder debris (non-mucocele)

WEIGHT

42.8

Secondary

- Mild chronic renal changes
- Hyperechoic splenic nodules consistent with benign criteria i.e. myolipomas

INTERPRETED BY

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DVM, DABVP
(Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Jenn

The thickened stomach with loss of gastric mural detail is highly suggestive of neoplastic criteria with significant gastritis, infectious gastropathy or gastric wall edema possible. Definitive diagnosis would require gastric biopsies for histopathology. No evidence of gastrointestinal mechanical obstruction, foreign material or significant active pancreatitis.

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Gastroprotectant protocol with consideration for empirical helicobacter coverage with clinical and sonographic monitoring would be a more conservative approach. Correlation with lab work and hepatic enzymes +/- hepatic cytology if evidence of hepatopathy and assuming normal clotting status is recommended.

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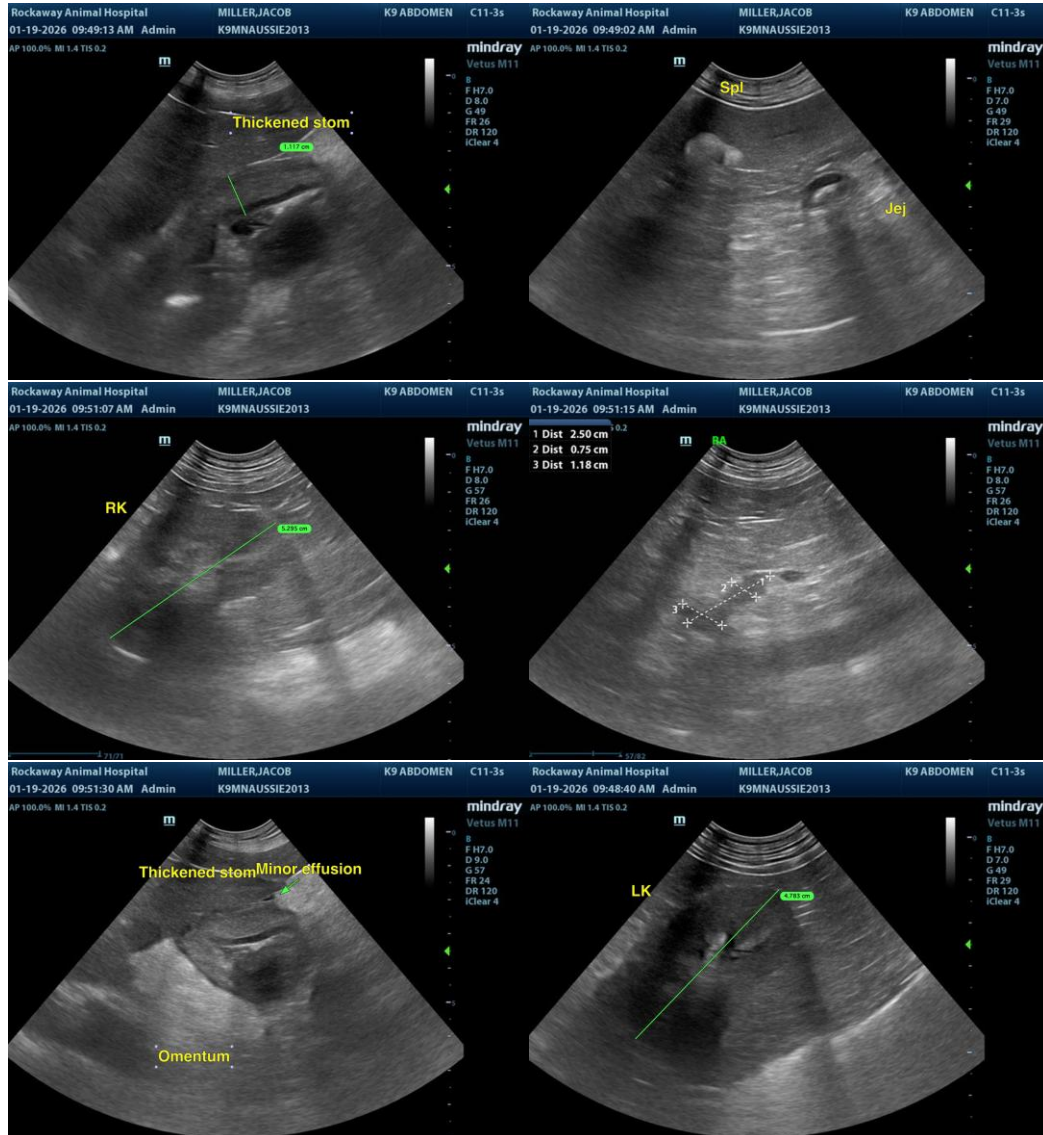
Dr Harris

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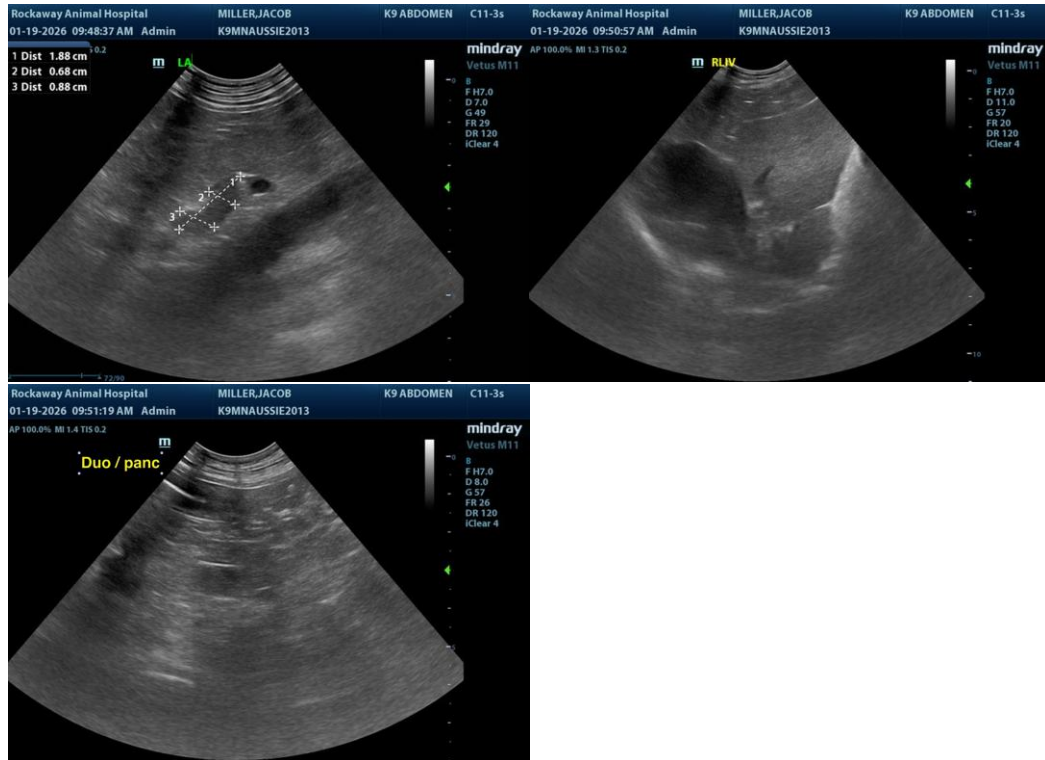
Dr Harrs

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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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