



PATIENT

Wendy Besler

SPECIES

Canine

BREED

Golden Retriever

SEX

FS

AGE

10.5yr

WEIGHT

56.6

INTERPRETED BY

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

IMAGING PERFORMED BY

A. Murphy CVT

HOSPITAL NAME

Wauwatosa Veterinary
Clinic

REFERRING VET

Dr Elaine Binor, DVM

INVOICE

23408

DATE

1-2-26

PRESENTING CLINICAL SIGNS

Hx of hematuria since this morning. Bloodwork indicated a regenerative anemia, mild globulin elevation, mild T. bilirubin elevation. Imaging to check for renal neoplasia, or other neoplasm. Urinalysis indicated TNTC cocci and RBCs, few WBCs, and TNTC casts. Urine was dark red in color, normal specific gravity. Owner reports she is was whining when resting, otherwise was eating and drinking ok._

Abnormal PE/Chem/CBC/UA Results: HCT 31.7%(37.3-61.7%) Hgb 8.8 (13.1-20.5) RBCs 3.75 (5.65 - 8.87) Platelet 13 (148-484). Checking for clumping. Eosinophils 0.04 (0.06-1.23) Total bilirubin 1.1 (0-0.9) Amylase 1565 (500-1500)

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.

The area of the uterine remnant appeared normal and free of pathology

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 6.4 cm in length. The right kidney measured 6.0 cm in length.

The area of the aortic trifurcation was 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 0.65 cm width in 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 presented subjective borderline 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 non-dependent debris. The cystic and common bile ducts were normal.



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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild progressively shadowing ingesta 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.

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

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.

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary

- Normal urinary bladder and visible proximal urethra
- Mild age-related renal changes
- Normal adrenal glands.
- Borderline/ mild hepatomegaly-subjective benign
- Mild non-organized gallbladder debris (non-mucocele)
- Normal spleen.
- Normal gastrointestinal tract with progressively shadowing gastric ingesta

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no evidence of significant visceral pathology, such as masses or neoplastic criteria. Urine C/S on a sterile urine sample, +/- UPC level if non-inflammatory proteinuria is recommended. The definitive intra-abdominal cause of the anemia was not obvious. Correlation with a CBC pathology review and pending diagnostics is indicated. Correlation with most recent meal ingestion is recommended. If fasted, a documented 12-hour NPO to monitor for gastric emptying is recommended.



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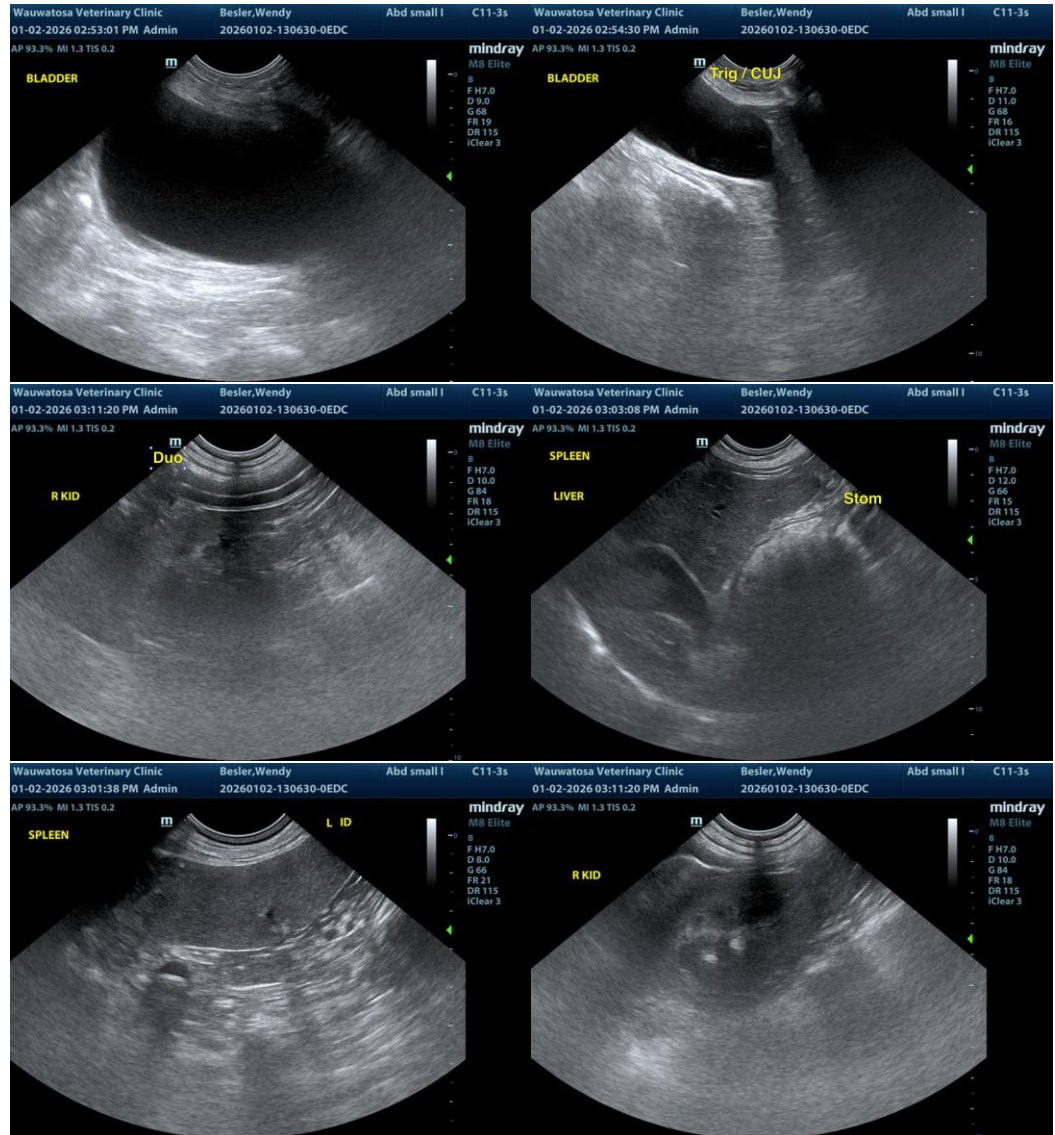
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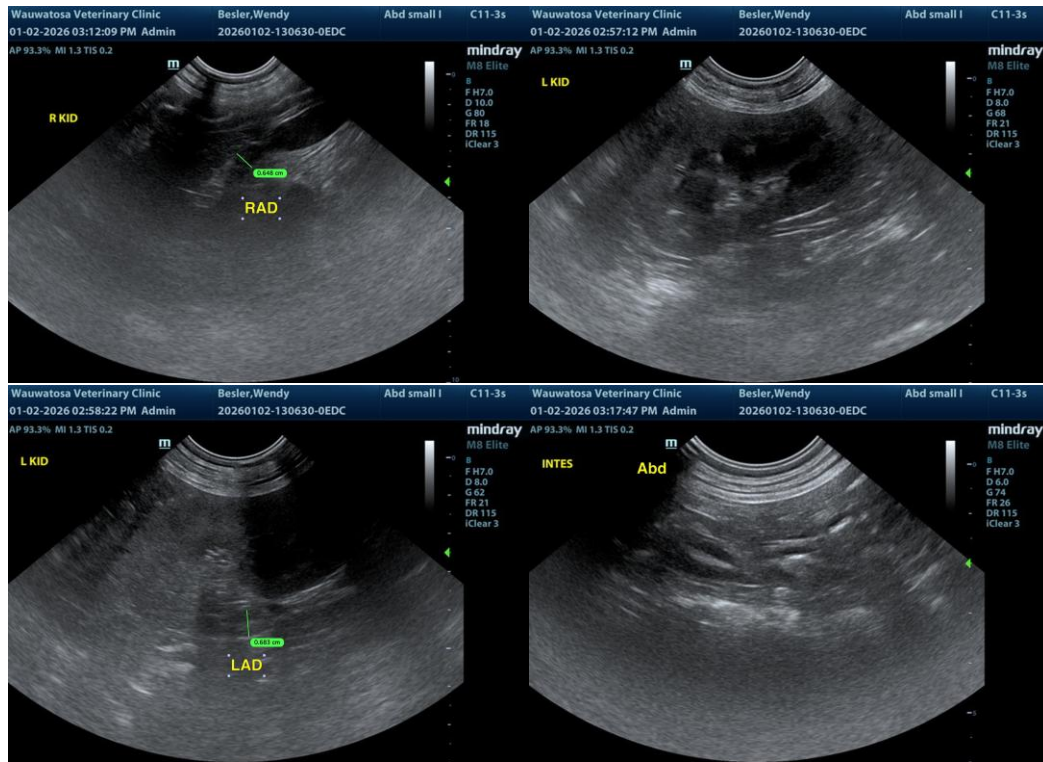
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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info@sonopath.com