



## PATIENT

Hyrts Lozynskyj

## SPECIES

Canine

## BREED

Pomeranian Mix

## SEX

Neutered Male

## AGE

12

## WEIGHT

16.8

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway Animal  
Hospital

## REFERRING VET

Dr. Maniar

## INVOICE

13410

## DATE

01/27/26

## PRESENTING CLINICAL SIGNS

- re check from yesterday

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic change were noted.

The area of the residual prostate appeared normal and 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 4.1 cm in length. The right kidney measured 4.5 cm in length.

### *Adrenal Glands*

No obvious pathology in the area of the left or right adrenal glands.

### *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. The hepatic and portal vasculature were normal in appearance without signs of congestion.

The gallbladder was non distended in size with mild nonorganized 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 echogenic, mild nonshadowing to persistent progressive strongly shadowing ingesta/content without evidence of obstruction to pyloric outflow.

The visualized segments of small intestine were empty without evidence of intestinal mechanical/metabolic ileus.



**PATIENT**

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

Hyrts Lozynskyj

**Pancreas**

**SPECIES**

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.

Canine

**BREED**

**Free Abdomen**

Pomeranian Mix

No overt lymphadenopathy or peritoneal effusion was present.

**SEX**

**ULTRASONOGRAPHIC FINDINGS**

Neutered Male

- Mild retained to persistent nonshadowing to progressively shadowing possibly fluid absorbing content.
- Normal empty visualized small intestine.
- Age-related renal changes.
- Gallbladder debris (non-mucocele).

**AGE**

12

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

16.8

Assuming documented NPO, the presence of persistent to retained progressive shadowing gastric ingesta and content still suggests a small amount of non-obstructive possible partial fluid absorbing material in conjunction with patient's history. Correlation with current clinical signs is recommended.

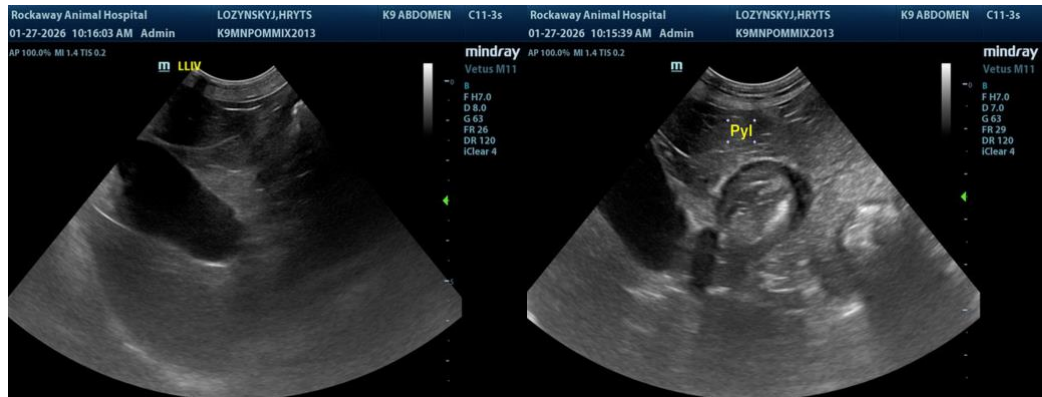
**INTERPRETED BY**

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

If available, gastric endoscopy is recommended for further assessment and/or potential retrieval of suspect non-obstructive gastric foreign material.

**IMAGING PERFORMED BY**

Jenn



**HOSPITAL NAME**

Rockaway Animal  
Hospital

**REFERRING VET**

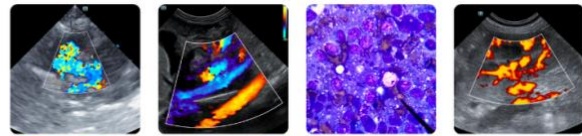
Dr. Maniar

**INVOICE**

13410

**DATE**

01/27/26



## PATIENT

Hyrts Lozynskyj

## SPECIES

Canine

## BREED

Pomeranian Mix

## SEX

Neutered Male

## AGE

12

## WEIGHT

16.8

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway Animal  
Hospital

## REFERRING VET

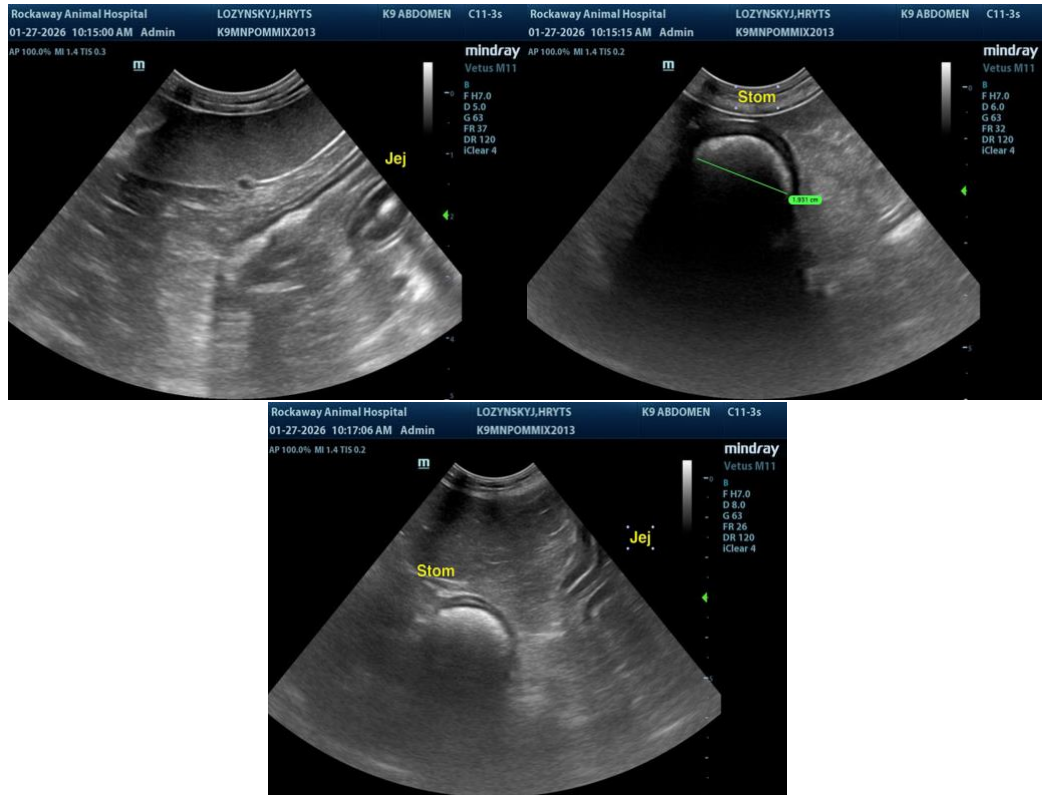
Dr. Maniar

## INVOICE

13410

## DATE

01/27/26



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](mailto:info@SonoPath.com)