



PATIENT

Dash Christiansen

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

11yr

WEIGHT

70lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Hello Vet For Pets

REFERRING VET

Dr Christensen

INVOICE
23704

DATE

01/29/2026

PRESENTING CLINICAL SIGNS

- Clinical Exam Findings:
- Vomiting started early Tuesday morning- not able to keep food down
- Vomiting through Cerenia
- ABNORMAL Lab work Values Was all normal
- Current Medications Cerenia 60mg tablets
- Radiographic Findings
- CONCLUSIONS
- The round soft tissue opacity seen in the hilar region of the stomach on the VD projection may represent food or a foreign body. It is also possible that this finding is a superimposition artifact as it is not identified on any of the other images or visualized in the prior study. Additionally, there is evidence of gastric emptying since the prior examination and there is no gastric dilation to suggest a pyloric outflow obstruction. There is also no evidence of small intestinal mechanical obstruction.
- Static equivocal mild nonspecific splenomegaly

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 6.3 cm in length. The right kidney measured 6.5 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 0.57 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 0.68 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.



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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

The stomach presented non-thickened intact visible wall layering with a normal wall layer ratio. The lumen of the stomach contained mild variably echogenic non-shadowing ingesta sonographically suggestive of food echogenicity with no signs of obstruction or foreign material. The pylorus wall measured 0.43 cm in width.

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 0.58 cm width. The jejunum wall measured 0.45 cm width.

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

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

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

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ULTRASONOGRAPHIC FINDINGS

Primary

- Sonographically normal stomach with mild retained non-shadowing ingesta
- Normal empty small intestine
- Mild heterogeneous pancreas
- Mild age-related renal changes
- Sonographically normal spleen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of mechanical gastrointestinal obstruction, such as foreign body, stricture, mass, etc. The retained gastric ingesta is most consistent with non-shadowing food echogenicity. Assessment for evidence of cranial abdomen/subxiphoid discomfort on palpation and a spec cPL is suggested to assess for evidence of chronic pancreatitis.

Gastrointestinal support recommended with clinical and as needed sonographic monitoring of gastric emptying.



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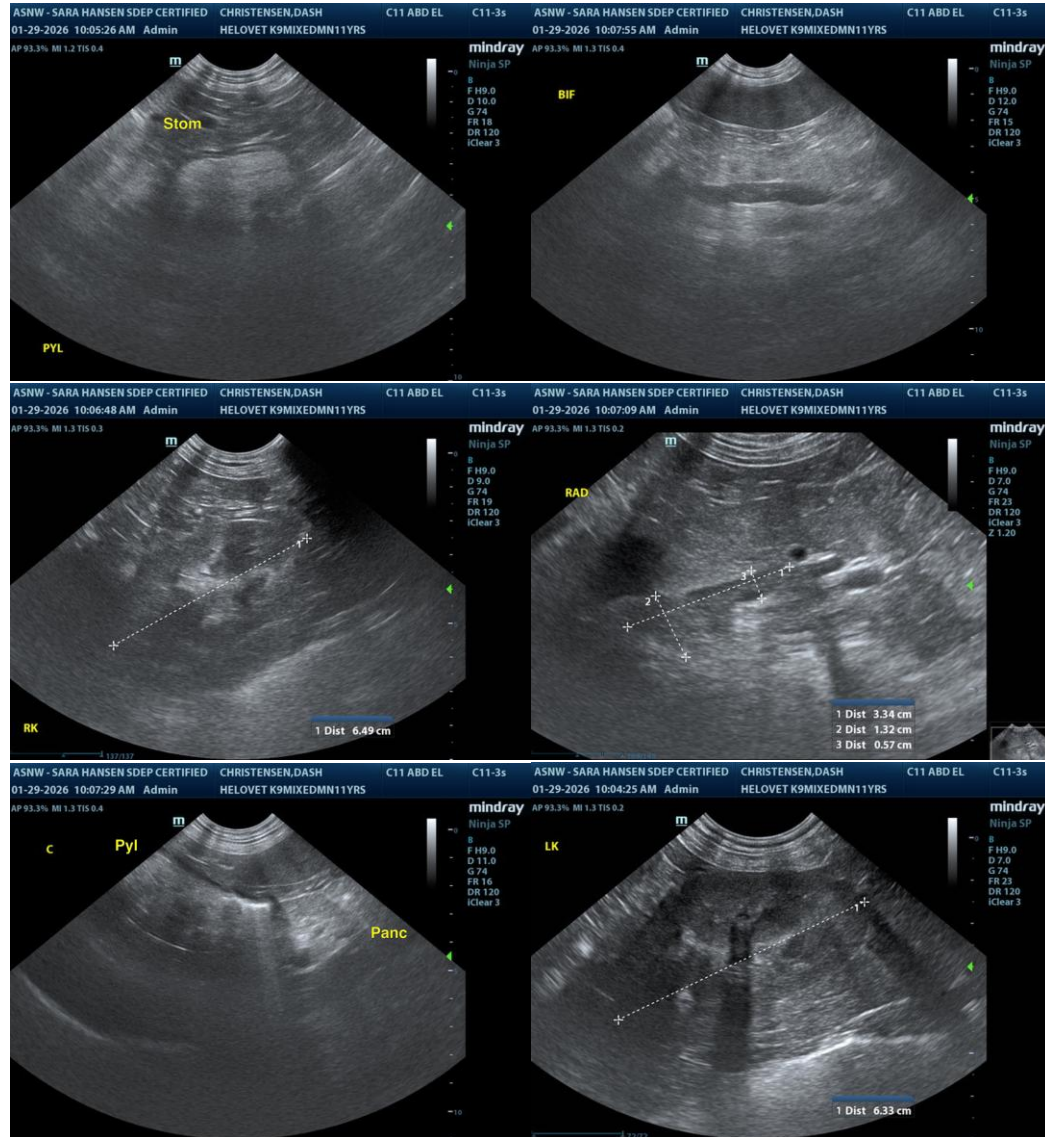
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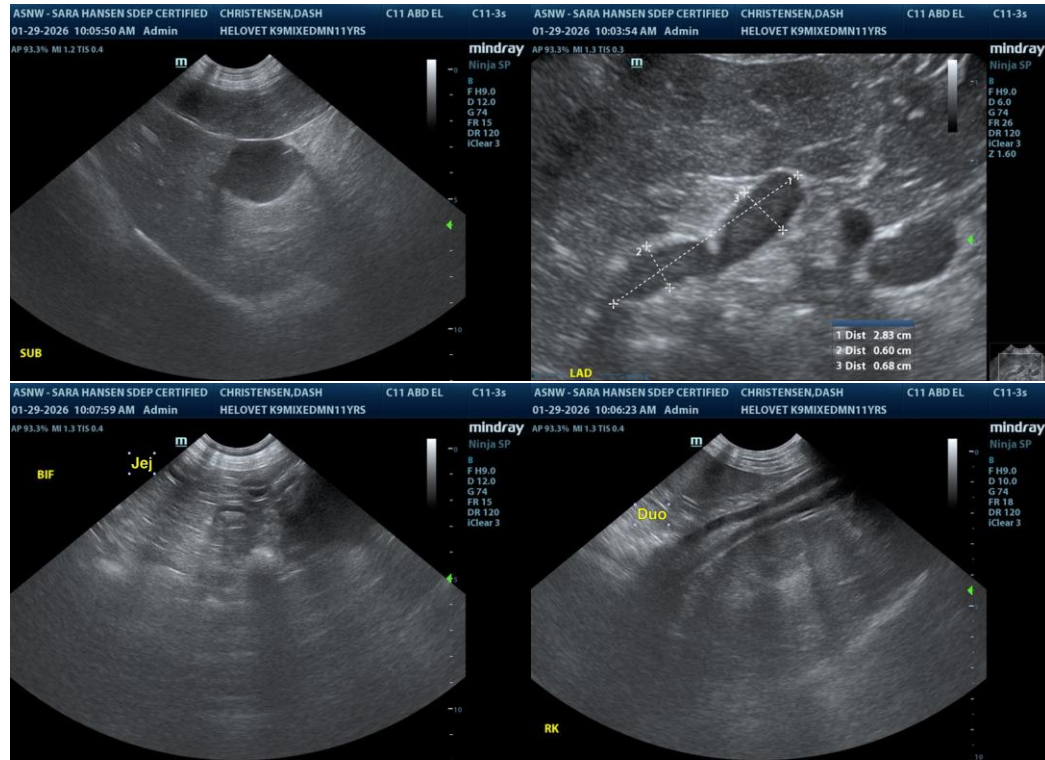
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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