



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Peanut Bailey Cibellis	Diarrhea HGE increased Eosinophils
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b><i>Urinary System</i></b>
<b>BREED</b>	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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.
Maltese	
<b>SEX</b>	The area of the aortic trifurcation was free of pathology.
Neutered Male	The area of the residual prostate appeared normal and free of pathology.
<b>AGE</b>	Normal size and margination was 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 3.4 cm in length. The right kidney measured 3.3 cm in length.
5	
<b>WEIGHT</b>	<b><i>Adrenal Glands</i></b>
6.6	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.46 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 0.52 cm width at the caudal pole.
<b>INTERPRETED BY</b>	<b><i>Spleen</i></b>
R. McKenzie Daniel, DVM, DABVP	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.
<b>IMAGING PERFORMED BY</b>	<b><i>Liver</i></b>
Jenn	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 thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
<b>HOSPITAL NAME</b>	<b><i>Gastrointestinal</i></b>
Rockaway Animal Hospital	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.
<b>REFERRING VET</b>	
Dr. Maniar	
<b>INVOICE</b>	
12949	
<b>DATE</b>	
01/05/2026	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 ileus, obstruction or foreign material.



**PATIENT**

Peanut Bailey Cibellis

The colon walls presented intact yet prominent wall layering with mild thickened to echogenic submucosa. Semi formed fecal matter and lumen gas was present in the colon lumen with lumen dilation.

**SPECIES**

Canine

**Pancreas**

The area of the pancreas was sonographically normal.

**BREED**

Maltese

**Free Abdomen**

No overt lymphadenopathy or peritoneal effusion was present.

**SEX**

Neutered Male

- Sonographically normal gastrointestinal tract.
- Mild colitis pattern containing semi formed fecal matter.

**AGE**

5

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Dietary indiscretion, infectious disease, nonstructural inflammatory bowel, occult parasitism in conjunction with eosinophilia, occult Addison's disease or neoplasia are all potentials. Gastrointestinal support, empirical therapy for acute hemorrhagic diarrhea syndrome including empirical deworming is recommended. A GI panel to include PLI, TLI, cobalamin and folate and screening cortisol level to assess for occult disease may be considered.

**WEIGHT**

6.6

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway Animal Hospital

**REFERRING VET**

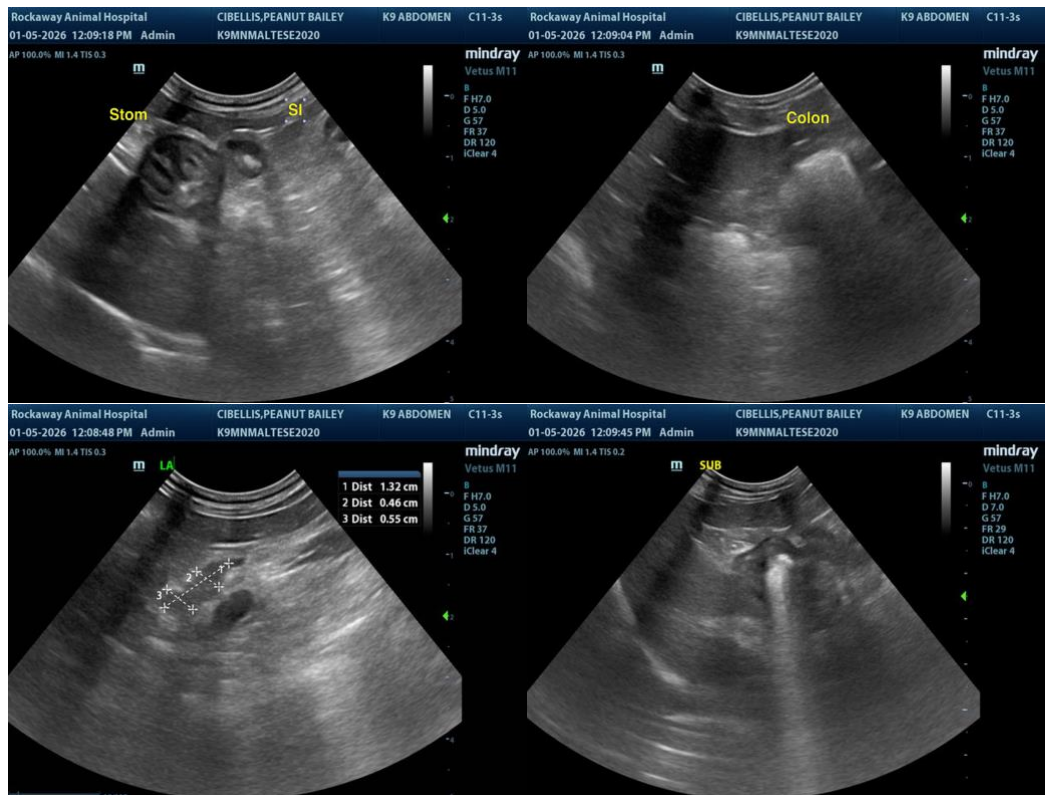
Dr. Maniar

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**PATIENT**

Peanut Bailey Cibellis

**SPECIES**

Canine

**BREED**

Maltese

**SEX**

Neutered Male

**AGE**

5

**WEIGHT**

6.6

**INTERPRETED BY**

R. McKenzie Daniel,  
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**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway Animal  
Hospital

**REFERRING VET**

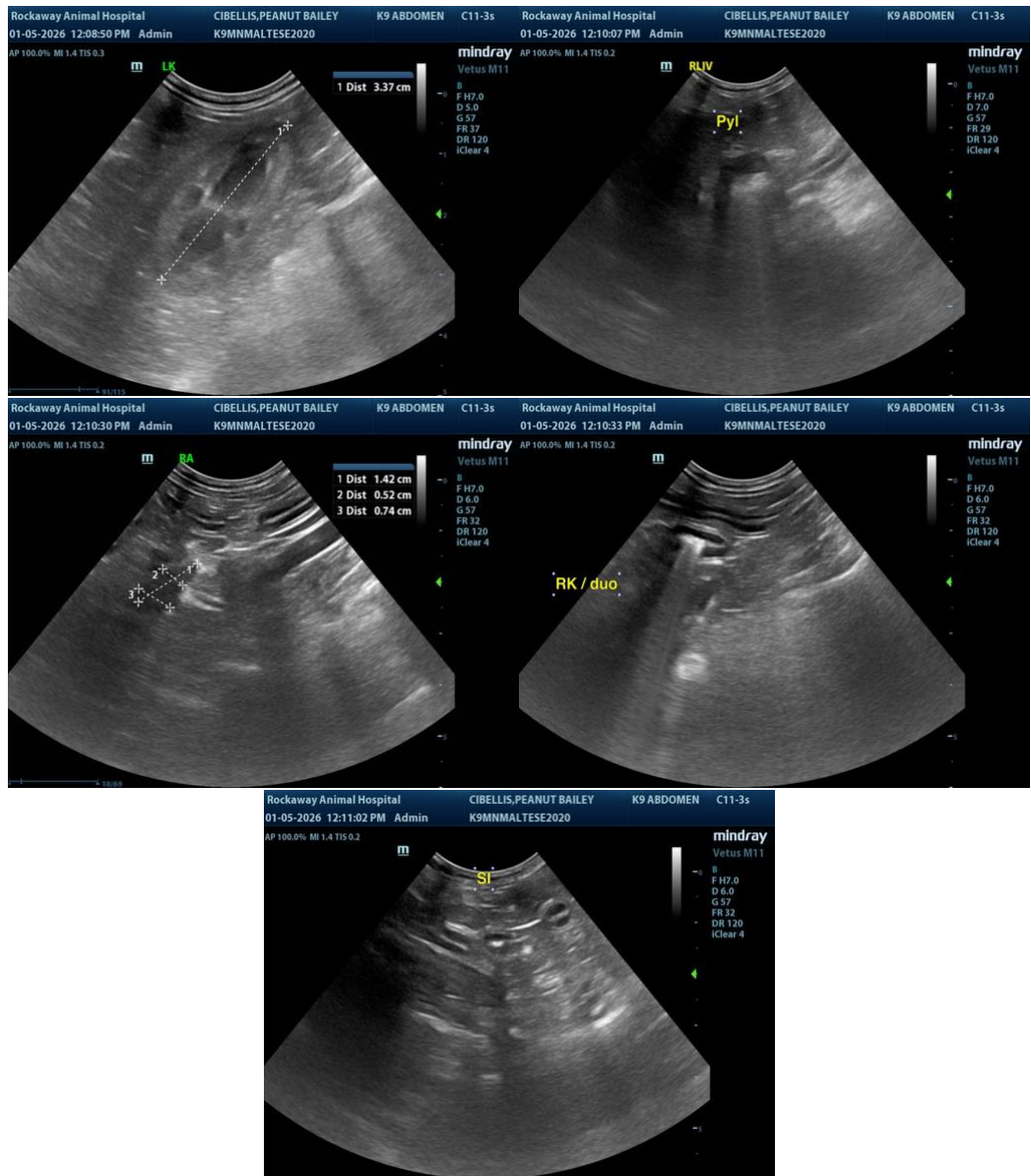
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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