



PATIENT

Kenji Morrill

PRESENTING CLINICAL SIGNS

Eating only treats since Saturday 10/22. Vomiting 1x a day, lethargic. No risk for FB per owner. Normal BM. Better w/ entyce, started eating a little bit yesterday. On Selegeline 5 mg SID.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and cystourethral junction 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 changes was noted.

BREED

Shiba Inu

SEX

MN

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 0.92 cm in diameter.

AGE

14 y

The area of the aortic trifurcation was free of pathology.

WEIGHT

16.6 lbs.

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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Minor bilateral pyelectasia was present. Right kidney small cortical cysts were present. The left kidney measured 4.5 cm in length. The right kidney measured 4.5 cm in length.

Adrenal Glands

No overt pathology was noted in the area of the left or right adrenal glands.

INTERPRETED BY

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

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

**IMAGING
 PERFORMED BY**

Pamela Horgan, RDCS

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 parenchymal remodeling. The hepatic and portal vasculature was normal in appearance without signs of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild, nondependent yet nonorganized, echogenic gallbladder debris. No evidence of gallbladder or peripheral gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.

HOSPITAL NAME

Norfolk County
 Veterinary Services

REFERRING VET

Aurora Richards, DVM

INVOICE

15293

DATE

10/27/22



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Gastrointestinal

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The stomach presented intact wall layering with a normal wall layer ratio. Minor retained nonshadowing ingesta / chyme and luminal gas were present. The ventral gastric body wall width measured 0.32 cm.

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 ileus, obstruction, or foreign material. The duodenum wall measured 0.31 cm width. The jejunum wall measured 0.35 cm width.

BREED

Shiba Inu

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

SEX

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

MN

Free Abdomen

AGE

No omental masses, lymphadenopathy, or evidence of peritoneal free fluid were noted.

14 y

ULTRASONOGRAPHIC FINDINGS

WEIGHT

16.6 lbs.

- Sonographically unremarkable gastrointestinal tract with mild gastric ingesta / chyme
- Mild heterogeneous pancreas - suspect minor remodeling secondary to age or potential previous inflammatory episode, potential for low-grade or chronic pancreatitis is possible
- Mild gallbladder debris (non-mucocele)
- Bilateral mild chronic renal changes with minor pyelectasia and small right kidney cortical cyst

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING

PERFORMED BY

Pamela Harrigan, RDCS

Largely geriatric abdomen without evidence of significant visceral pathology.

Potential for low-grade to chronic pancreatitis may be suspected if evidence of cranial abdominal or subxiphoid discomfort on palpation. Correlation with a Spec cPL could be considered. Potential for resolving inflammatory bowel episode could be possible. Continued GI supportive care is recommended.

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Three-view chest radiographs may be considered to rule out occult thoracic or esophageal pathology as a contributing factor.

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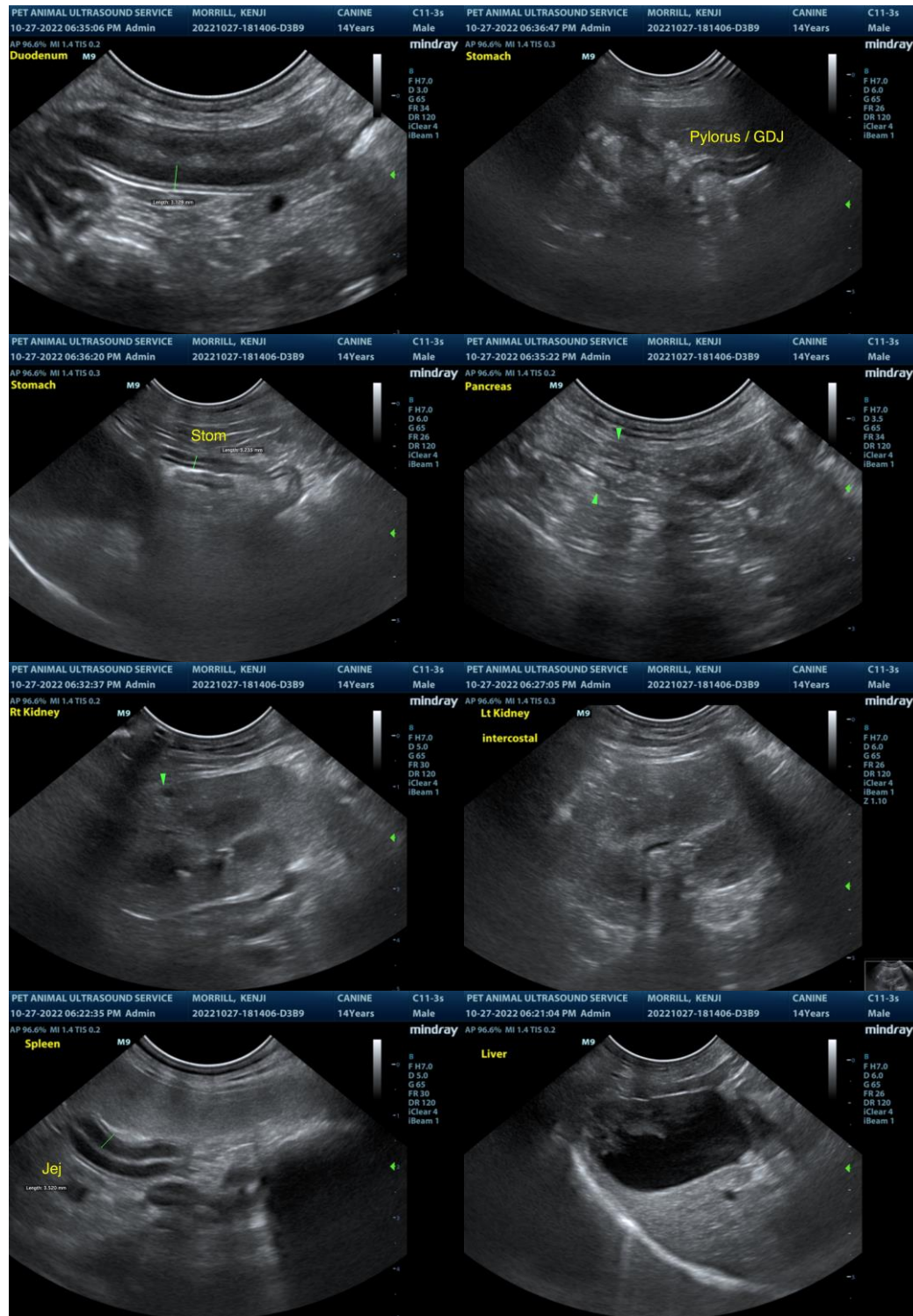
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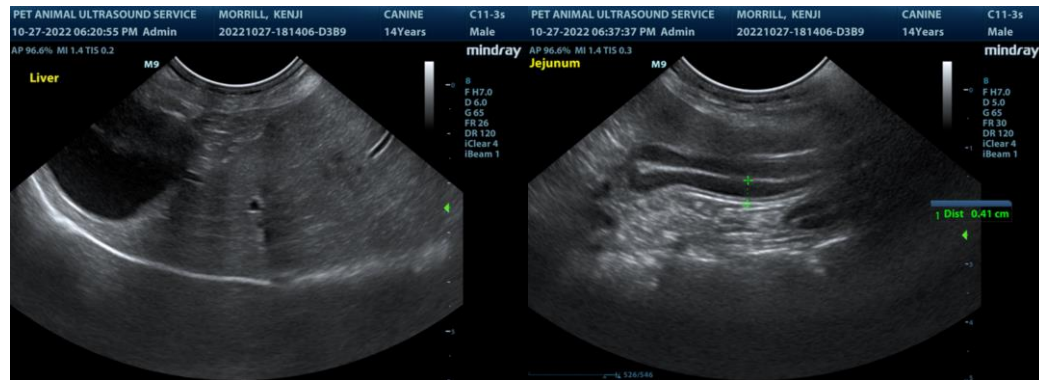
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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