



PATIENT

Elvis Dahl

SPECIES

Canine

BREED

Brittany Spaniel

SEX

MN

AGE

12yr

WEIGHT

49.6

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Jessica Evoniuk

HOSPITAL NAME

State Avenue Vet
Clinic

REFERRING VET

Dr. Jessica Evoniuk

INVOICE

22938

DATE

11/12/2025

PRESENTING CLINICAL SIGNS

2 days ADR, not eating, drinking less, less active V/D none S/C none

Abnormal PE/Chem/CBC/UA Results: CBC - RWDc 21, LYM 0.73 Chemistry - Chloride 106, Total Protein 8.3, Globulin 4.6, ALT 229, ALP 520 X-rays

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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.

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 6.6 cm in length. The right kidney measured 6.1 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 0.65 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 0.59 cm width at the caudal pole.

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Subtle well-defined, symmetrical, echogenic nodules were present throughout the perihilar 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

Liver/Gallbladder

The liver presented increased in size. The parenchyma of the liver was subjectively mildly increased and non-homogenous in echogenicity compared to the spleen and renal cortices. The echotexture of the liver parenchyma was with a mild coarse echotexture. No visualized masses or nodules were present. The capsule of the liver was symmetrical to rounded 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 debris. The cystic and common bile ducts were normal.

Gastrointestinal



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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.

The small intestine presented intact wall layering with normal muscularis/mucosa ratio. Subjective mild prominent duodenum wall with mild duodenal ileus and subtle duodenal mucosal speckling. The duodenum wall measured 0.62 cm width. The jejunum wall measured 0.38 cm width. No evidence of mechanical intestinal obstructive pattern 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

- Mildly enlarged non-homogenous echogenic liver-consistent with probable benign criteria
- Mild gallbladder debris (non-mucocele)
- Age related renal changes
- Subjective mild duodenitis to non-specific enteritis
- Normal area of pancreas
- Sonographically normal adrenal glands

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology could be considered for further clarification. Hepatic and gastrointestinal support is indicated. A spec cPL in conjunction with assessment for evidence of cranial abdominal/subxiphoid discomfort on palpation which may correlate with mild or chronic pancreatitis which may present sonographically normal is recommended. Sonographic reassessment indicated if progressive hepatopathy or non-responsive gastrointestinal signs.



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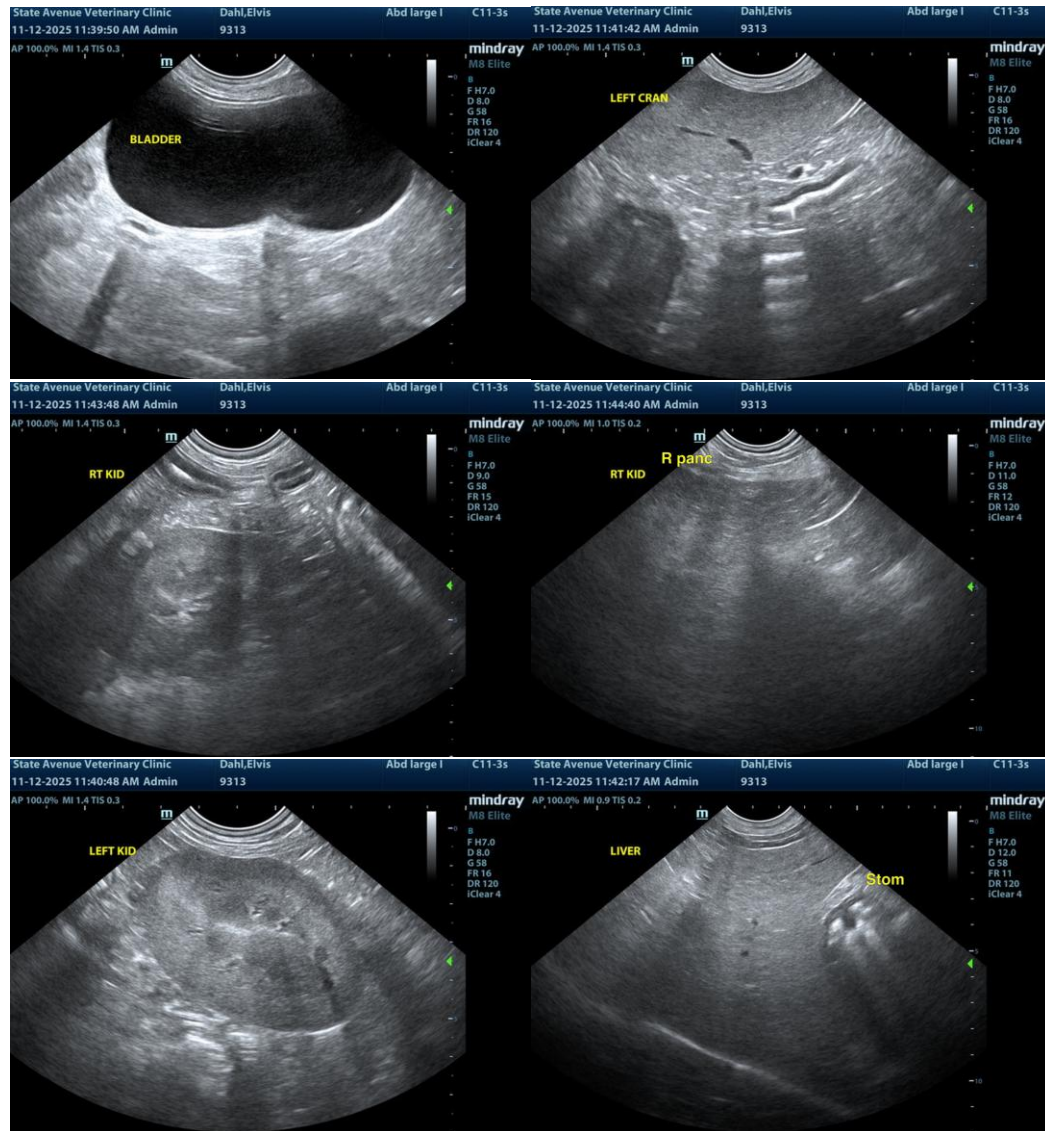
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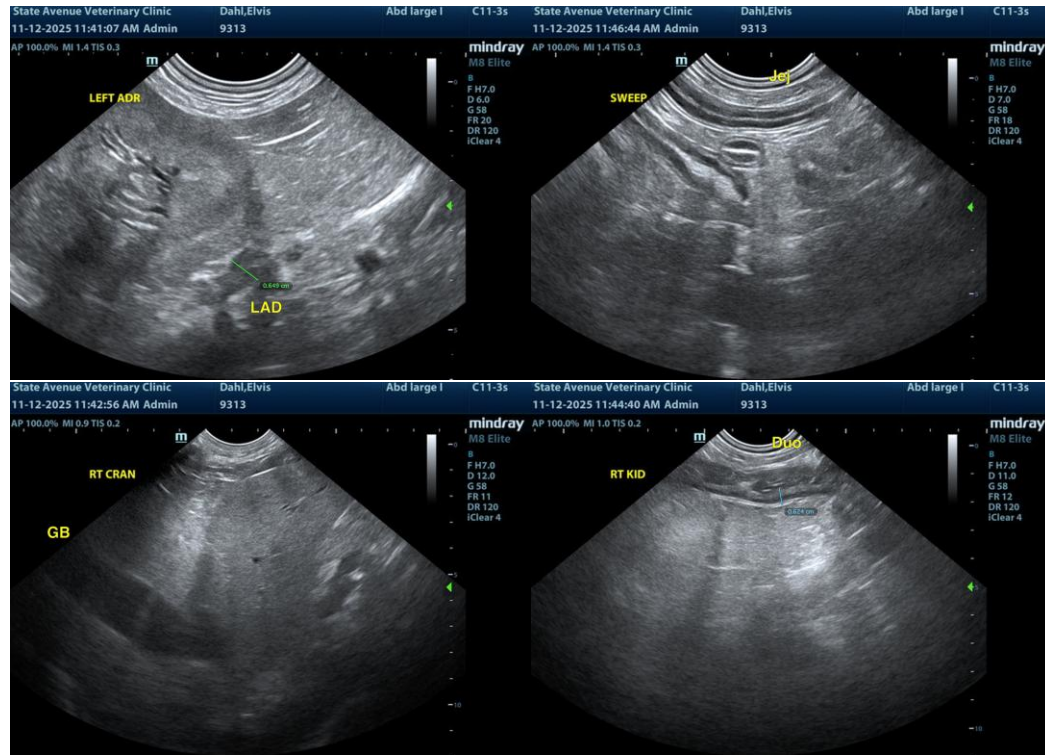
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)
info@sonopath.com