



PATIENT	PRESENTING CLINICAL SIGNS
Riley Walls	Bloodwork showed mild anemia (HCT 39.9%), hypoalbuminemia (2.6) and increased AST, ALT and ALP. Patient is currently on Doxycycline due to being Lyme positive. Patient does not allow good examination due to temperament. AUS to evaluate for any causes of bloodwork abnormalities. Chest rads clear
SPECIES	
Canine	
BREED	
Bernese Mountain Dog	
SEX	
FS	
AGE	
10y10m	
WEIGHT	
92 lb	
INTERPRETED BY	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Urinary System
	The urinary bladder was nondistended with urine, prohibiting full evaluation of the bladder wall. There is no evidence of urinary bladder tumors or calculi. The urethra exhibited normal structure and tone to a depth of 3.0 cm.
	The visualized medial iliac lymph nodes were sonographically normal without evidence of inflammatory or neoplastic criteria.
	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 7.2 cm in length.
	Adrenal Glands
	The left adrenal gland was uniform in size and contour with a uniformly hypochoic parenchyma. The left adrenal gland measured 0.45 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypochoic parenchyma. The right adrenal gland measured 0.44 cm width at the caudal pole.
	Spleen
	The spleen exhibited subjective mild splenomegaly with primarily symmetrical contour and mild nonhomogeneous parenchyma. A solitary, mildly expansive, nonhomogeneous hypochoic splenic mass was noted in the mid-caudal spleen with mild associated capsule distortion. No evidence of capsular escape. The splenic mass measured 3.3 cm diameter.
	Liver/ Gallbladder
	The liver was normal in size to possible borderline hepatomegaly with normal hepatic vascular volume.. The liver parenchyma was mildly nonuniform and hypochoic to the spleen with a moderate coarse echotexture and subjective mild parenchymal remodeling. Indistinct portal vascular borders were noted. There were no visualized hepatic masses or nodules. The gallbladder was non-distended in size containing primarily anechoic content with mild, nonorganized gallbladder debris. The cystic and common bile ducts were normal.
IMAGING PERFORMED BY	
Meghan Myers, VMD	
HOSPITAL NAME	
Hershire AH	
REFERRING VET	
Laura Wojcik, DVM	
INVOICE	
10338	
DATE	
11/12/25	



PATIENT	<i>Gastrointestinal</i>
Riley Walls	The stomach presented intact wall layering with a normal wall layer ratio. Mild retained fluid and chyme were noted.
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.
BREED	
Bernese Mountain Dog	Normal visible colon wall layers were present with apparent formed feces in lumen.
SEX	<i>Pancreas</i>
FS	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 were evident.
AGE	<i>Free Abdomen</i>
10y10m	No overt significant omental lymphadenopathy was visualized. No evidence of peritoneal effusion was present.
WEIGHT	
92 lb	Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<ul style="list-style-type: none">• Mildly expansive splenic mass with subjective generalized splenomegaly• Hepatopathy exhibiting mild parenchymal remodeling• Mild gallbladder debris (non-mucocele)• Nonspecific mild chronic renal changes• Normal bilateral adrenal glands• Normal gastrointestinal tract with mild retained gastric chyme / fluid
IMAGING PERFORMED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Meghan Myers, VMD	The splenic mass is nonspecific, with considerations including hyperplasia, hematopoiesis, granuloma, splenitis, or neoplasia (sarcoma, round cell neoplasia, other). Neoplastic criteria is favored. There is no obvious evidence of cardiac or intrabdominal major organ macrometastasis.
HOSPITAL NAME	
Hershire AH	
REFERRING VET	
Laura Wojcik, DVM	Assuming normal clotting status, screening splenic parenchyma / mass and hepatic FNA cytology, using a 25-gauge needle, could be considered for initial clarification. Assuming no evidence of pathology on three view chest radiographs, diagnostic or prophylactic splenectomy with suggested concurrent hepatic biopsies should be considered.
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PATIENT

Riley Walls

SPECIES

Canine

BREED

Bernese Mountain Dog

SEX

FS

AGE

10y10m

WEIGHT

92 lb

INTERPRETED BY

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DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Meghan Myers,
VMD

HOSPITAL NAME

Hershire AH

REFERRING VET

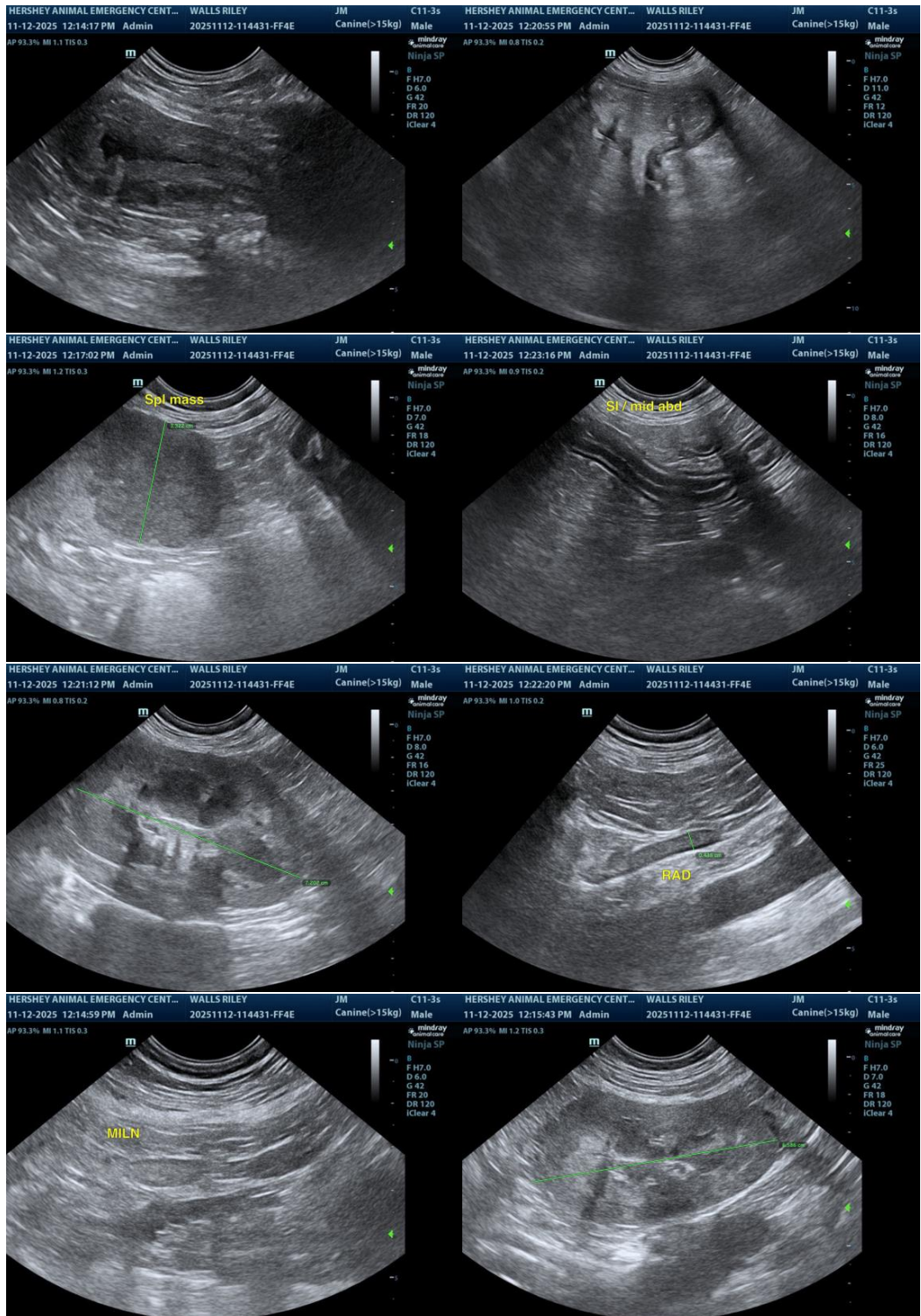
Laura Wojcik, DVM

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Riley Walls

SPECIES

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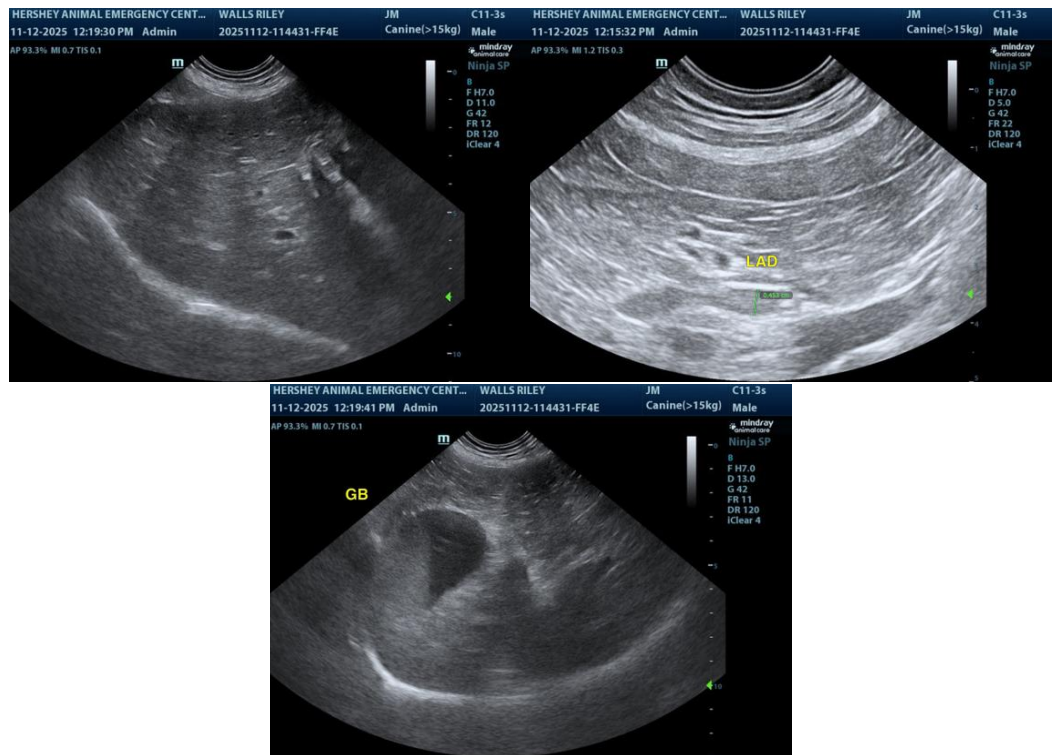
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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