

PATIENT PRESENTING CLINICAL SIGNS

Brody Province History: Routine scan to evaluate for any cardiac dz. Progression since previous echo Sept 2023

SPECIES Abnormal PE/Chem/CBC/UA Results: Amy-1399 PSL-540 USG-1.057

Canine **ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

BREED *Urinary System*

Boxer 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 changes were noted.

SEX Male Neutered No evidence of pathology in the area of the residual prostate.

AGE 5yrs 6mos 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 7.2 cm in length. The right kidney measured 7.0 cm in length.

WEIGHT 81 lbs *Adrenal Glands*

INTERPRETED BY R. McKenzie Daniel, DVM, DABVP (Canine and Feline) The left and right adrenal glands were overtly normal in size, position and shape. The left adrenal gland measured 0.45 cm width at the caudal pole. The right adrenal gland measured 0.40 cm width at the caudal pole.

Spleen

IMAGING PERFORMED BY Kerri Becker 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.

HOSPITAL NAME *Liver*

Marsh AH 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.

REFERRING VET *Gastrointestinal*

Dr. Armani 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.

INVOICE 12831 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.

DATE 11/18/25 Normal visible colon wall layers were present with apparent formed feces in lumen.



PATIENT

Pancreas

Brody Province

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.

SPECIES

Canine

Free Abdomen

BREED

Boxer

No overt lymphadenopathy or peritoneal effusion was present.

SEX

ULTRASONOGRAPHIC FINDINGS

- Sonographically normal abdomen

Male Neutered

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

No evidence of visceral pathology present. Given elevated PSL, mild to chronic pancreatitis at times may present sonographically normal, if clinical signs suggestive of mild pancreatitis are present.

5yrs 6mos

WEIGHT

81 lbs

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 DVM, DABVP
 (Canine and Feline)

IMAGING PERFORMED BY

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HOSPITAL NAME

Marsh AH

REFERRING VET

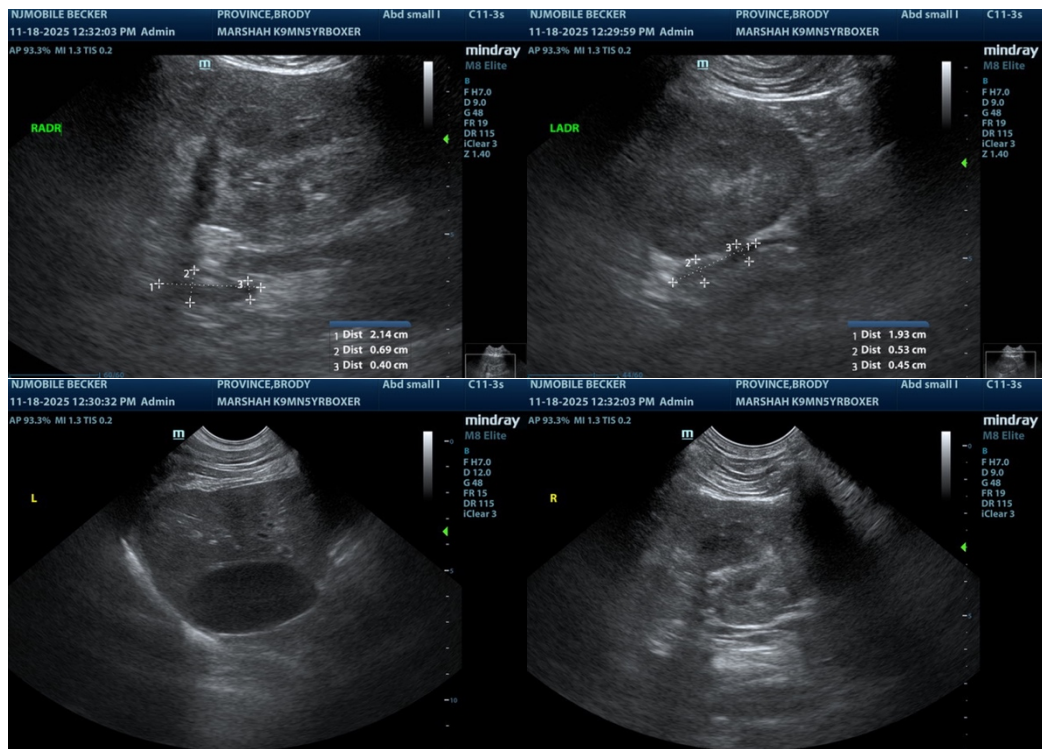
Dr. Armani

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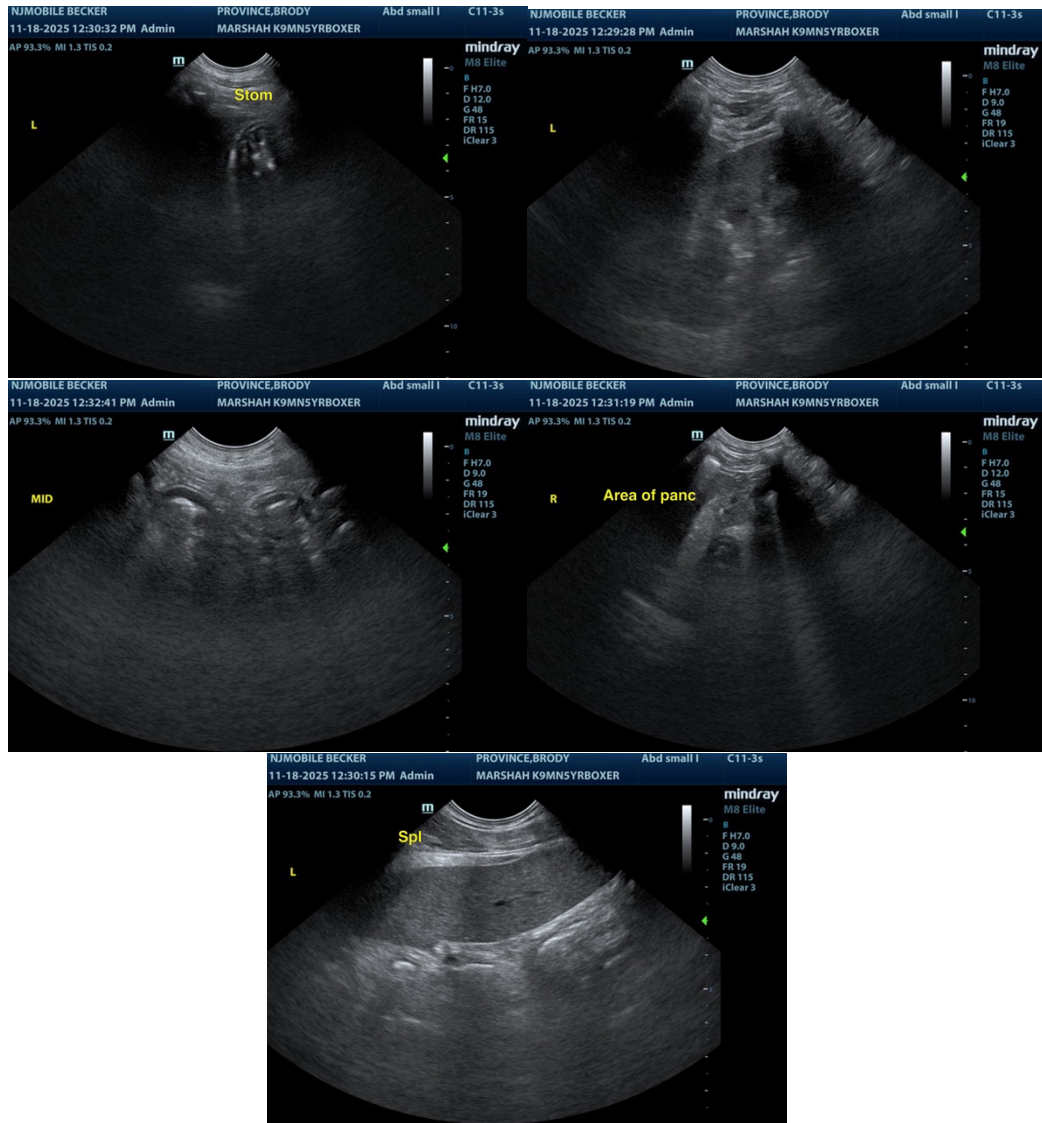
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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



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SPECIES

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SEX

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