

**PATIENT**

Scruffy Peloquin

**SPECIES**

Canine

**BREED**

Cocker Spaniel

**SEX**

Neutered Male

**AGE**

14 Years

**WEIGHT**

28 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Pamela Harrigan, RDCS,  
Certified Veterinary  
Sonographer

**HOSPITAL NAME**

Compassionate Care  
VC

**REFERRING VET**

Janeen Danenberg,  
DVM

**INVOICE**

35462

**DATE**

11/9/25

**PRESENTING CLINICAL SIGNS**

History: 5 lb weight loss since May 2025, cute gastroenteritis x 10 days, but intermittent vomiting and diarrhea over last 4 years. Painful mid and cranial abdomen on palpation, well hydrated, small volume, mucoid diarrhea and bilious vomiting. Low calcium 7.5, Alb low 1.7, normal pancreatic lipase. On cerenia, gabapentin, proviable, metronidazole.

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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.

No obvious pathology in the area of the residual prostate.

Normal size and margination was 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 5.5 cm in length. The right kidney measured 5.9 cm in length.

**Adrenal Glands**

Both adrenal glands were mildly enlarged in size with intact asymmetrical contour and nonhomogenous nonmineralized parenchyma. The left adrenal gland measured 1.0 cm width at the caudal pole. The right adrenal gland measured 0.86 cm width at the caudal pole.

**Spleen**

The spleen was not definitively visualized. This could be secondary to splenic volume contraction or previous splenectomy. Correlation with clinical history is recommended.

**Liver**

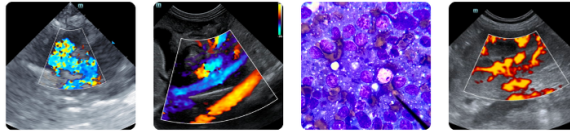
The liver was subjectively mildly enlarged with areas of asymmetrical hepatic capsule contour and nonhomogeneous mildly hypoechoic hepatic parenchyma. No visualized hepatic mass or nodule noted.

The gallbladder was non distended in size with moderate nonorganized debris No evidence of inflammation or wall edema. The common bile duct was not visualized.

**Gastrointestinal**

The stomach presented intact normal visible wall. The stomach was nondistended containing lumen gas.

The small intestine presented mild to variably thickened wall layering owing to propensity for generalized prominent duodenojejunal mucosa and increased mucosa echogenicity. A segment of mid abdomen jejunum exhibited thickened hypoechoic wall with loss of jejunal mural detail and associated ileus and segmental jejunal gas distention. No overt intestinal obstructive pattern to the level of the



**PATIENT**

Scruffy Peloquin

**SPECIES**

Canine

**BREED**

Cocker Spaniel

**SEX**

Neutered Male

**AGE**

14 Years

**WEIGHT**

28 Pounds

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Pamela Harrigan, RDCS,  
Certified Veterinary  
Sonographer

**HOSPITAL NAME**

Compassionate Care  
VC

**REFERRING VET**

Janeen Danenberg,  
DVM

**INVOICE**

35462

**DATE**

11/9/25

colon. The duodenum wall measured 0.69 cm. Intact jejunum wall measured 0.4 – 0.48 cm. Segmentally thickened jejunum exhibiting loss of mural detail measured 0.58 cm.

The visualized colon was empty to nondistended containing minor segmental soft fecal matter consistent with patient history.

***Pancreas***

The pancreas was mildly prominent in size with mild capsule asymmetry and nonhomogenous mildly hypoechoic parenchyma compared to adjacent omentum.

***Free Abdomen***

Variably enlarged, hypoechoic mesenteric lymph nodes were present. The lymph nodes exhibited symmetrical to rounded margination with abnormal width: length ratio (>0.5). The enlarged lymph nodes were bordered by perilymphatic to peri-intestine hyperechoic omentum. An example measured 3.4 cm x 2.3 cm. Mild volume peritoneal effusion was present.

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings**

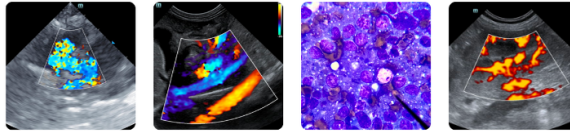
- Enteropathy, exhibiting mild duodenojejunal mucosa hyperechogenicity.
- Segmentally thickened jejunum, exhibiting hypoechoic mural echogenicity and loss of mural detail with associated ileus.
- Hypoechoic nonhomogenous liver
- Non-organized gallbladder debris (non-mucocele).
- Prominent nonhomogenous hypoechoic pancreas
- Hypoechoic swollen mesenteric lymphadenopathy
- Perilymphatic/peri-intestinal hyperechoic omentum and mild volume peritoneal effusion.

**Secondary Findings**

- Bilateral chronic renal changes
- Nonspecific mildly enlarged nonhomogenous adrenal glands.
- Non-visualized spleen

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

The mesenteric lymphadenopathy meets neoplastic criteria with multicentric lymphatic and intestinal neoplasia highly suspected in conjunction with segmental loss of jejunal mural detail. Assuming normal clotting status, accessible lymph node and screening hepatic FNA cytology is recommended for further clarification and potential for oncology consult. Diffuse inflammatory/infectious enteropathy with significant mesenteric hyperplasia or lymphadenitis is considered less likely. Definitive diagnosis may require biopsies for histopathology.



**PATIENT**

Scruffy Peloquin

**SPECIES**

Canine

**BREED**

Cocker Spaniel

**SEX**

Neutered Male

**AGE**

14 Years

**WEIGHT**

28 Pounds

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Pamela Harrigan, RDCS,  
Certified Veterinary  
Sonographer

**HOSPITAL NAME**

Compassionate Care  
VC

**REFERRING VET**

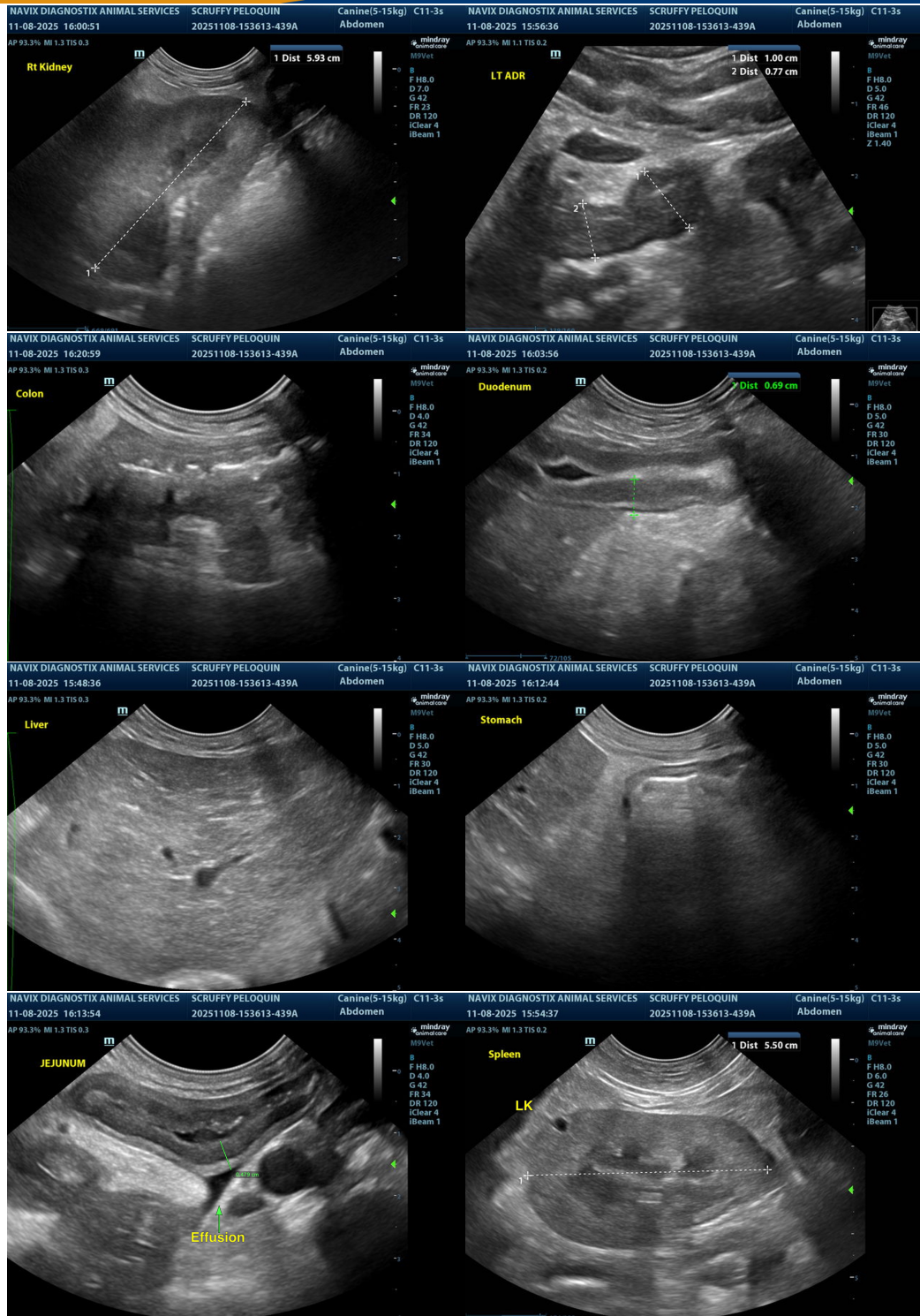
Janeen Danenberg,  
DVM

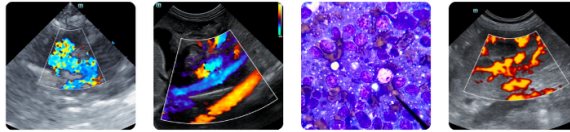
**INVOICE**

35462

**DATE**

11/9/25





**PATIENT**

Scruffy Peloquin

**SPECIES**

Canine

**BREED**

Cocker Spaniel

**SEX**

Neutered Male

**AGE**

14 Years

**WEIGHT**

28 Pounds

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Pamela Harrigan, RDCS,  
Certified Veterinary  
Sonographer

**HOSPITAL NAME**

Compassionate Care  
VC

**REFERRING VET**

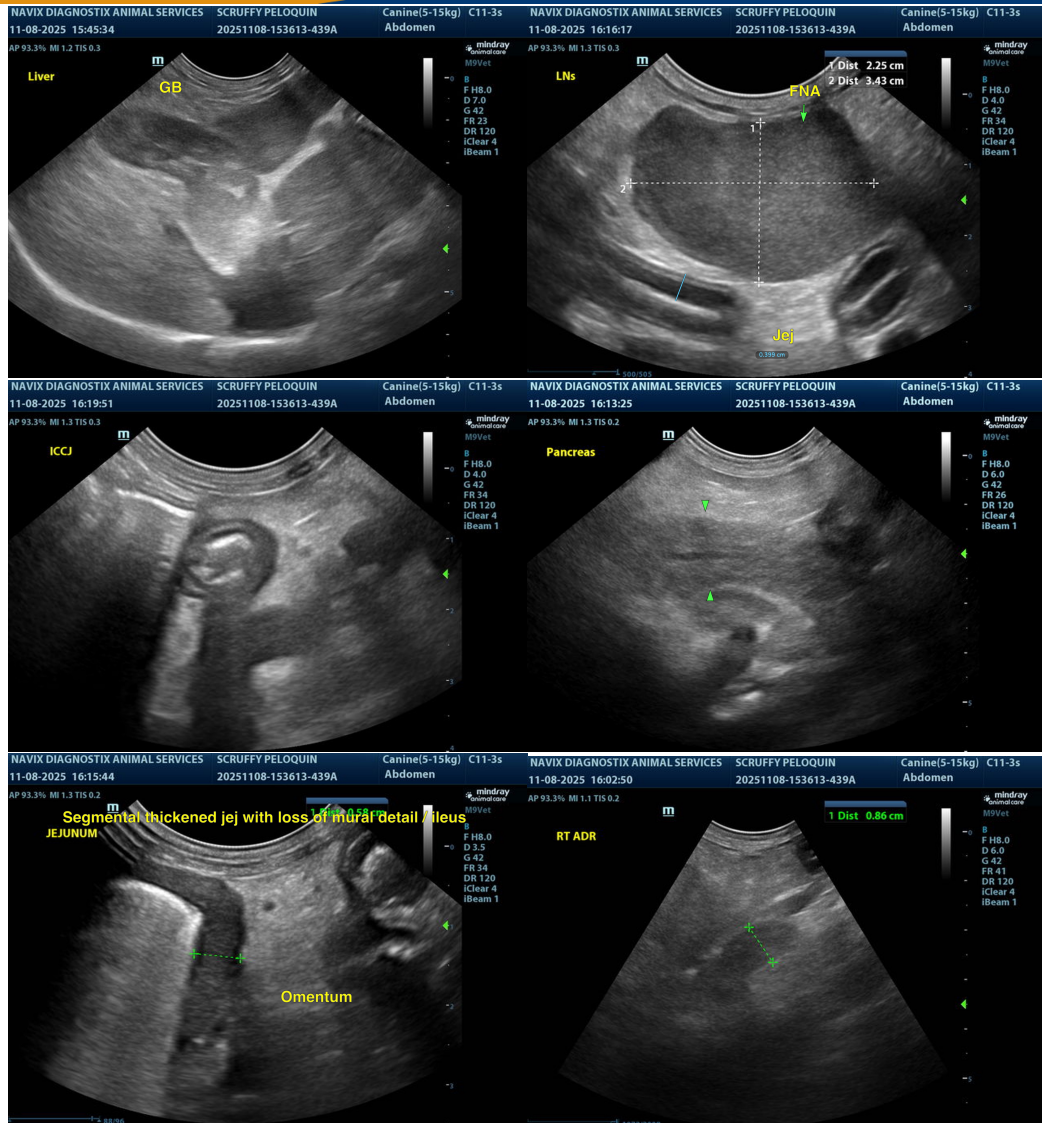
Janeen Danenberg,  
DVM

**INVOICE**

35462

**DATE**

11/9/25



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](mailto:info@SonoPath.com)