



PATIENT

Taylor Tasker

SPECIES

Canine

BREED

Goldendoodle

SEX

FS

AGE

1yr

WEIGHT

22.6lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Aaron Lucas

HOSPITAL NAME

Taylorville Veterinary
Clinic

REFERRING VET

Elizabeth Stiefvater

INVOICE

23083

DATE

12/1/2025

PRESENTING CLINICAL SIGNS

Taylor has a history of Giardia infection and diarrhea when she was 8 weeks old. Giardia resolved and stool was normal. Taylor started having urinary issues and had an AUS 10/28/2024 to evaluate for those. Since November of 2024 Taylor has continued to have GI issues, with vomiting and diarrhea occurring every few weeks or so. Taylor eats EN food and has been giving FortFlora daily for at least 6 months. Blood for a GI panel was collected today and sent out to the reference laboratory.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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 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 4.2 cm in length. The right kidney measured 4.9 cm in length.

The area of the aortic trifurcation was 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 0.42 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 0.55 cm width at the caudal pole.

Spleen

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.

Liver/Gallbladder

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. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and minor non-organized debris. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact non-thickened wall exhibiting subjective propensity for borderline prominent mucosal layer most notable in the area of the pylorus. The stomach contained minor retained anechoic fluid with no evidence of mechanical pyloric outflow obstruction or obstructive pyloric mural pathology. The pylorus wall measured 0.43 cm in width.



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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 mechanical/metabolic ileus, obstruction or foreign material. The duodenum wall measured 0.47 cm width. The jejunum wall measured 0.35 cm width.

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

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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.

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Goldendoodle

Free Abdomen

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

SEX

FS

ULTRASONOGRAPHIC FINDINGS

Primary

AGE

1yr

- Possible minor gastritis
- Sonographically unremarkable small intestine / colon
- Normal area of pancreas
- Normal bilateral adrenal glands

WEIGHT

22.6lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Dietary intolerance / hypersensitivity even with current dietary trial, non-structural gastroenteritis or inflammatory bowel, occult parasitism, less likely occult Addison's disease given normal adrenal presentation or pancreatitis possible. Correlation with pending GI panel is recommended. A hydrolyzed diet trial with potential long term dietary therapy, prophylactic deworming (Panacur 50 mg/kg SID x 5 consecutive days with repeat protocol in 3 weeks even if fecal testing is negative), high colony count probiotic (Provable or Visbiome), and as needed gastroprotectants may prove beneficial. Although considered unlikely, a screening cortisol level may be considered. Sonographic monitoring or reassessment recommended if continued or progressive gastrointestinal signs.

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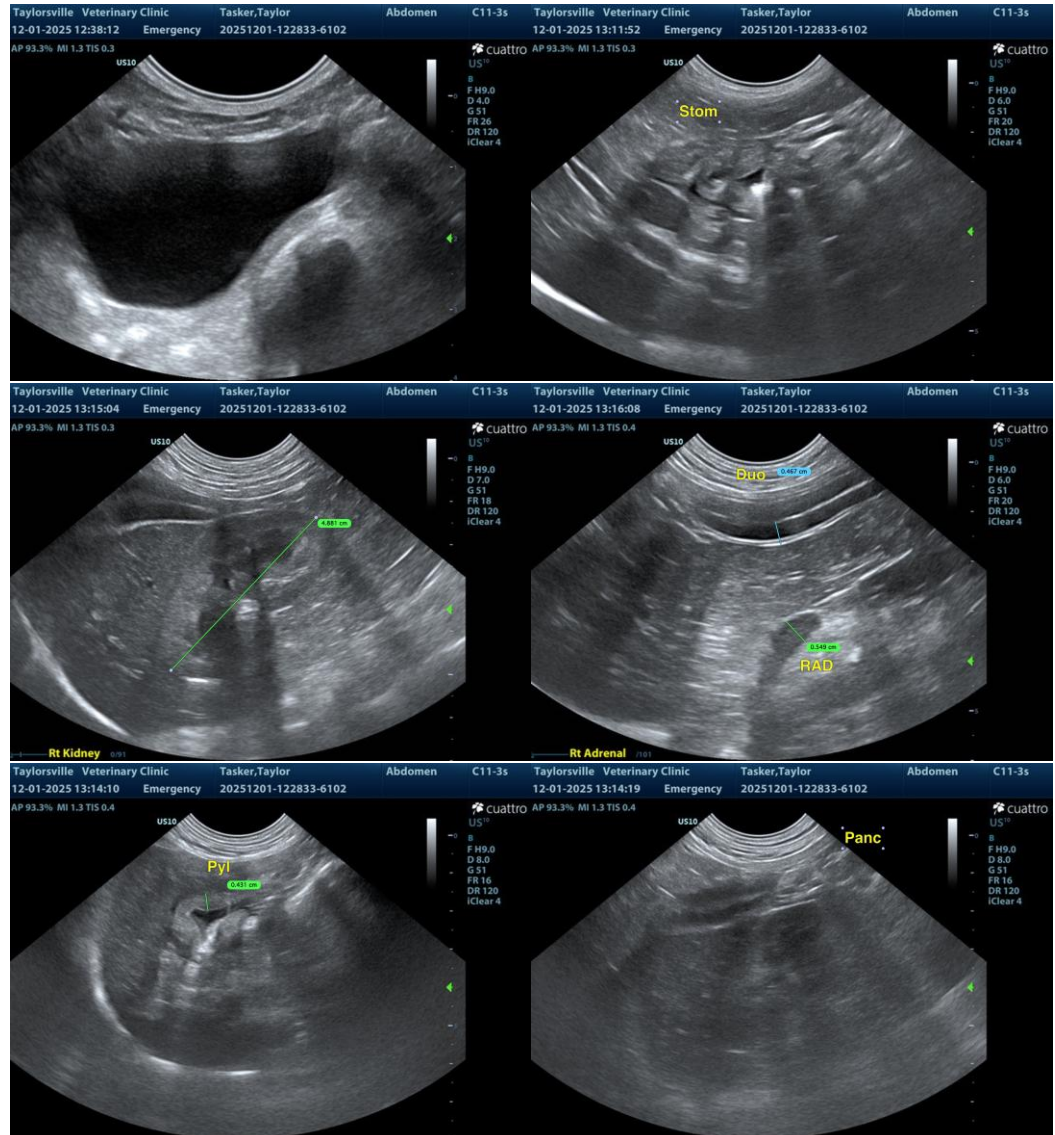
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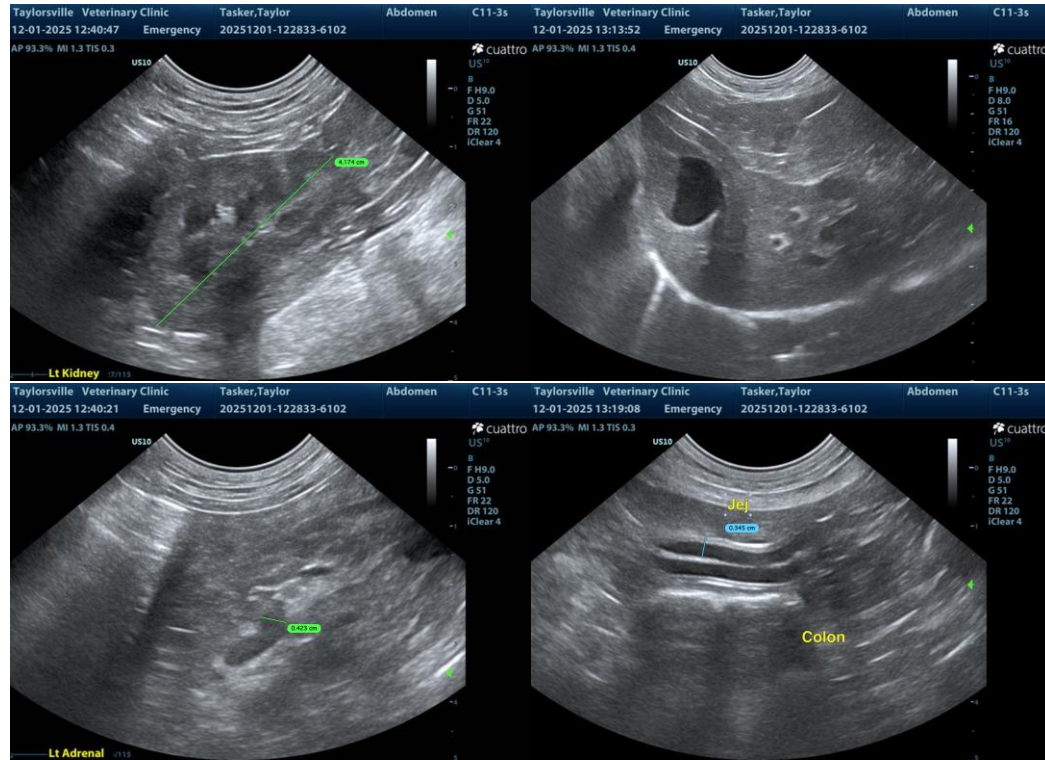
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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