



PATIENT

Bree Wilson

SPECIES

Canine

BREED

Pitbull Mix

SEX

FS

AGE

12yr

WEIGHT

20.7kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Blue Pearl Wyomissing,
ER

REFERRING VET

Blue Pearl Wyomissing,
ER

INVOICE

23199

DATE

12/10/2025

PRESENTING CLINICAL SIGNS

AUS to further evaluate acute vomiting- multiple times. Does have a history of chronic intermittent vomiting but starting last night, increased in frequency of vomiting. Currently in the ER. Meds: Cerenia

Abnormal PE/Chem/CBC/UA Results: ER Diagnostics: CBC/Chem: NSF No radiographs.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 6.7 cm in length. The right kidney measured 5.6 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was mildly enlarged in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 1.0 cm width in the caudal pole.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.61 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 mild non-organized debris. The cystic and common bile ducts were normal.

Gastrointestinal



PATIENT

Bree Wilson

SPECIES

Canine

BREED

Pitbull Mix

SEX

FS

AGE

12yr

WEIGHT

20.7kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Blue Pearl Wyomissing,
ER

REFERRING VET

Blue Pearl Wyomissing,
ER

INVOICE

23199

DATE

12/10/2025

The stomach presented intact wall layering with a normal wall layer ratio. The stomach contained a mild amount of retained anechoic fluid.

The small intestine presented intact borderline prominent wall layering with subjective mildly prominent submucosa and segmental muscularis layers.

The colon exhibited borderline thickened wall. The colon was non-distended and contained generalized soft and non-formed fecal matter.

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

Intermittent mildly prominent to enlarged mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

No evidence of peritoneal effusion.

Mild peri-intestinal hyperechoic omentum was present.

ULTRASONOGRAPHIC FINDINGS

Primary

- Acute gastroenteropathy pattern exhibiting mild non-obstructive hypomotile stomach and diffuse soft to non-formed fecal matter in colon
- Normal area of the pancreas
- Intermittent mild mesenteric lymphadenopathy-subjective benign

Secondary

- Age-related renal changes
- Mild enlarged non-homogenous left adrenal gland-age variant, benign hyperplasia, mild adenomatous change, minor potential for emerging left adrenal tumor

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Dietary intolerance/ indiscretion, infectious disease, enterotoxin, acute inflammatory bowel episode or IBD, occult parasitism, mild pancreatitis, occult neoplasia, less likely occult Addison's disease given adrenal presentation all potentials. No evidence of gastrointestinal obstructive pattern or foreign body. A GI panel to include PLI/TLI/Cobalamin/Folate, fresh fecal analysis +/- cortisol level could be considered.

Gastrointestinal support indicated with clinical monitoring and sonographic reassessment if persistent or progressive gastrointestinal signs. Concurrent sonographic monitoring the left adrenal gland for evidence of progressive enlargement is recommended.



PATIENT

Bree Wilson

SPECIES

Canine

BREED

Pitbull Mix

SEX

FS

AGE

12yr

WEIGHT

20.7kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Blue Pearl Wyomissing,
ER

REFERRING VET

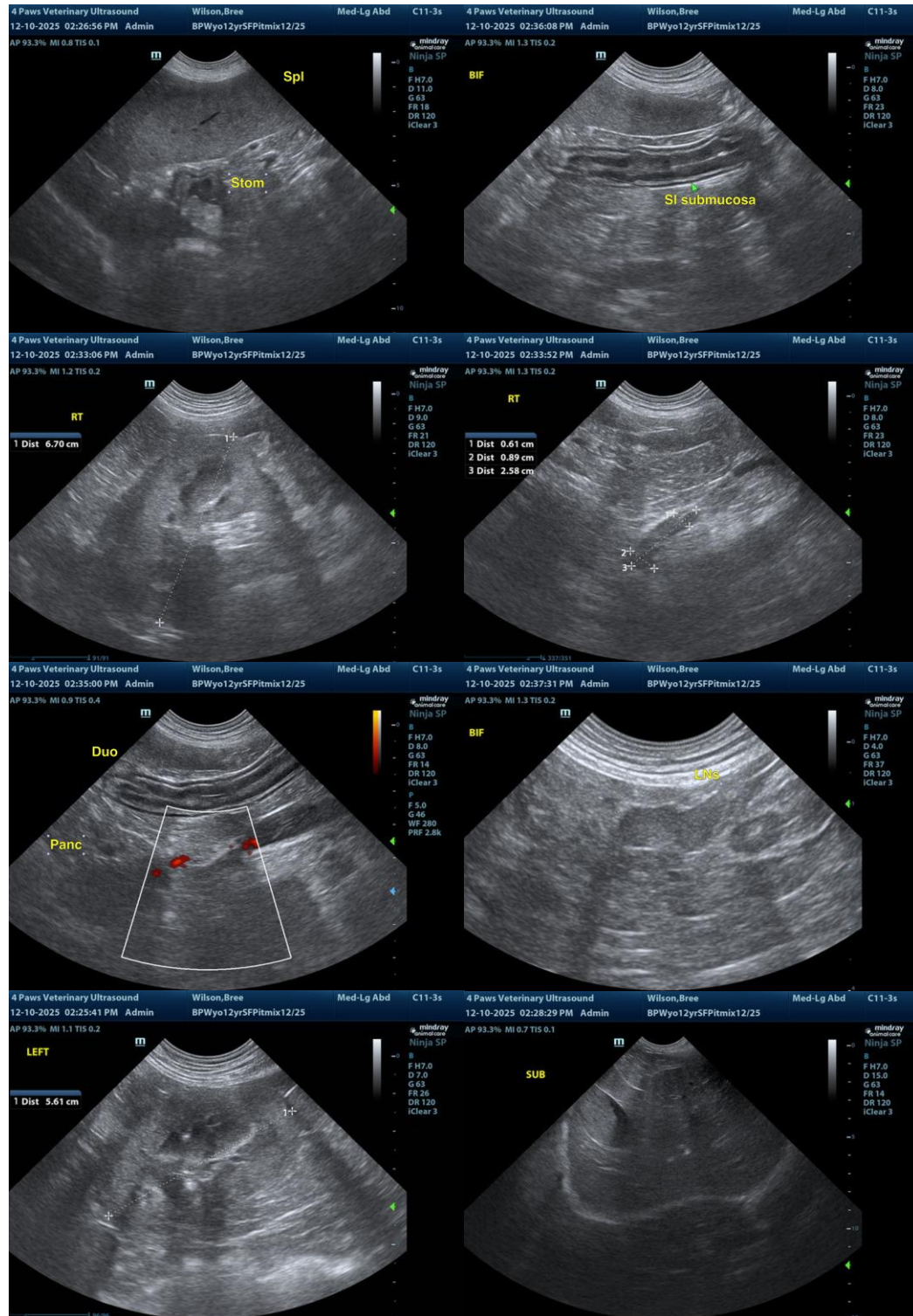
Blue Pearl Wyomissing,
ER

INVOICE

23199

DATE

12/10/2025





PATIENT

Bree Wilson

SPECIES

Canine

BREED

Pitbull Mix

SEX

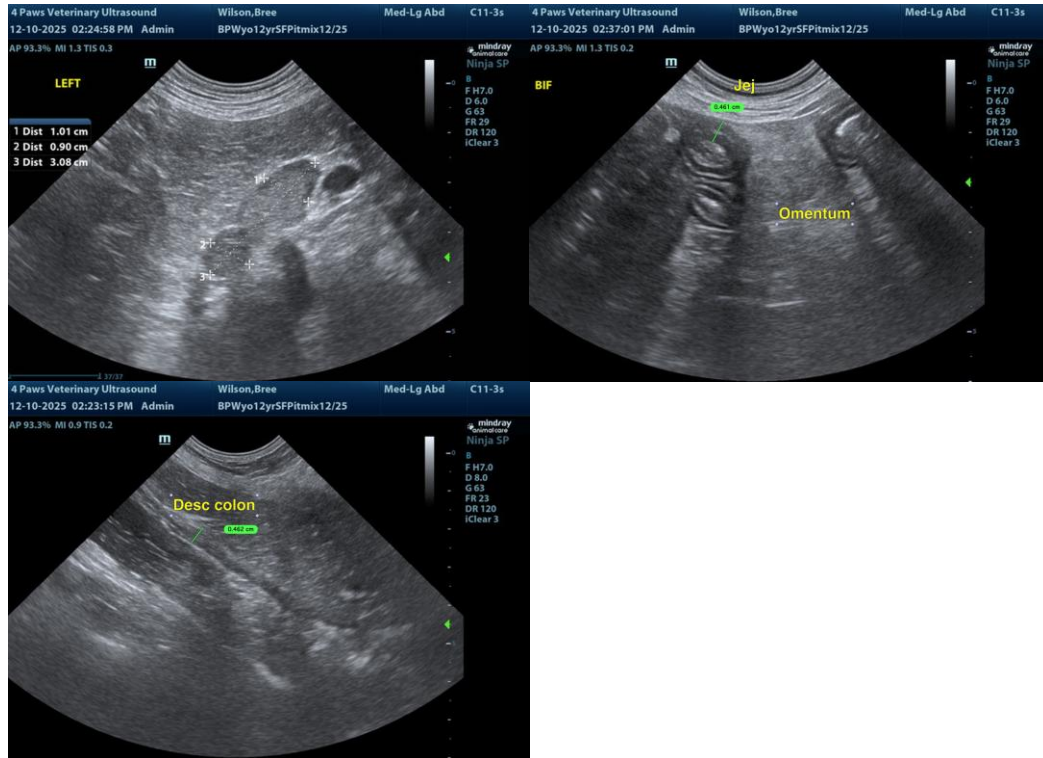
FS

AGE

12yr

WEIGHT

20.7kg



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.

INTERPRETED BY

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

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

IMAGING PERFORMED BY

Renee Trionfetti, VMD

HOSPITAL NAME

Blue Pearl Wyomissing,
ER

REFERRING VET

Blue Pearl Wyomissing,
ER

INVOICE
23199

DATE
12/10/2025