



## PATIENT

Quill Karr

## SPECIES

Canine

## BREED

Lab Mix

## SEX

MN

## AGE

3yr

## WEIGHT

84lb

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Rodriguez

## HOSPITAL NAME

Foxfield Veterinary  
Services

## REFERRING VET

Rodriguez

## INVOICE 23217

## DATE

12/11/2025

## PRESENTING CLINICAL SIGNS

Lethargic abdominal effusion. Bloodwork pending. .T=103

Abnormal PE/Chem/CBC/UA Results: Pending.

## 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 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 7.1 cm in length. The right kidney measured 7.4 cm in length.

The area of the iliac trifurcation was free of pathology including no evidence of medial iliac or sublumbar lymphadenopathy or masses.

The area of the residual prostate appeared normal and 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 1.0 cm width at the caudal pole. The right adrenal gland was not definitively visualized, no overt pathology in the area of the right adrenal gland.

### *Spleen*

The spleen exhibited marked enlargement with rounded contour and heterogeneous splenic parenchyma.

### *Liver/Gallbladder*

Subjective generalized hepatomegaly. Non-homogenous parenchyma exhibiting variable coarse echotexture. Indistinct non-homogenous non-capsule deforming intraparenchymal nodule was present in the ventral liver measuring 2.2 cm in diameter. The gallbladder was non-distended in size with mildly prominent hyperechoic gallbladder wall. Primarily anechoic bile with mild non-organized bile sediment was present. The common bile duct was not visualized without overt evidence of dilation or post hepatic obstructive criteria.

### *Gastrointestinal*

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild variably echogenic non-shadowing ingesta sonographically suggestive of food echogenicity with no signs of obstruction or foreign material.



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The visualized segments of 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.

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

## SPECIES

Canine

### *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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### *Free Abdomen*

Significant volume peritoneal effusion was present.

## SEX

Generalized mild non-homogenous hyperechoic omentum.

MN

No overt visualized significant omental lymphadenopathy.

## AGE

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Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

## ULTRASONOGRAPHIC FINDINGS

### Primary

- Marked splenomegaly exhibiting non-homogenous parenchyma.
- Hepatomegaly exhibiting non-homogenous parenchyma and indistinct intraparenchymal nodule / nodules.
- Non-distended gallbladder with mildly thickened hyperechoic wall and mild non-organized bile debris
- Significant peritoneal effusion.
- Generalized non-homogenous hyperechoic omentum.

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although sampling is required for further clarification, the hepatosplenic presentation is highly suggestive of multicentric hepatosplenic neoplastic criteria, i.e. round cell neoplasia, sarcoma, or other. Assuming normal clotting status and using 25ga needle, further assessment may include hepatosplenic FNA cytology in conjunction with effusion analysis cytology +/- C/S.

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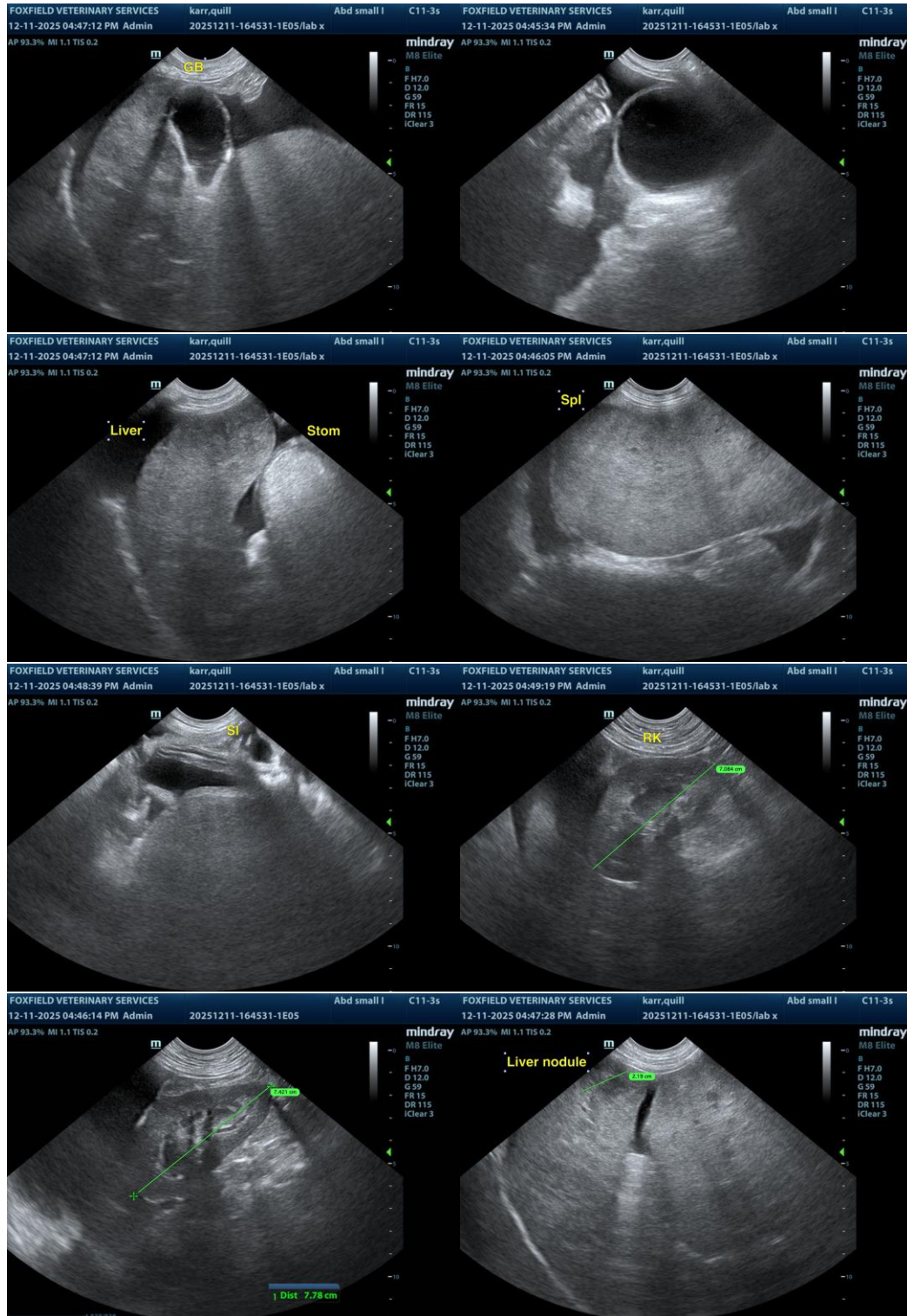
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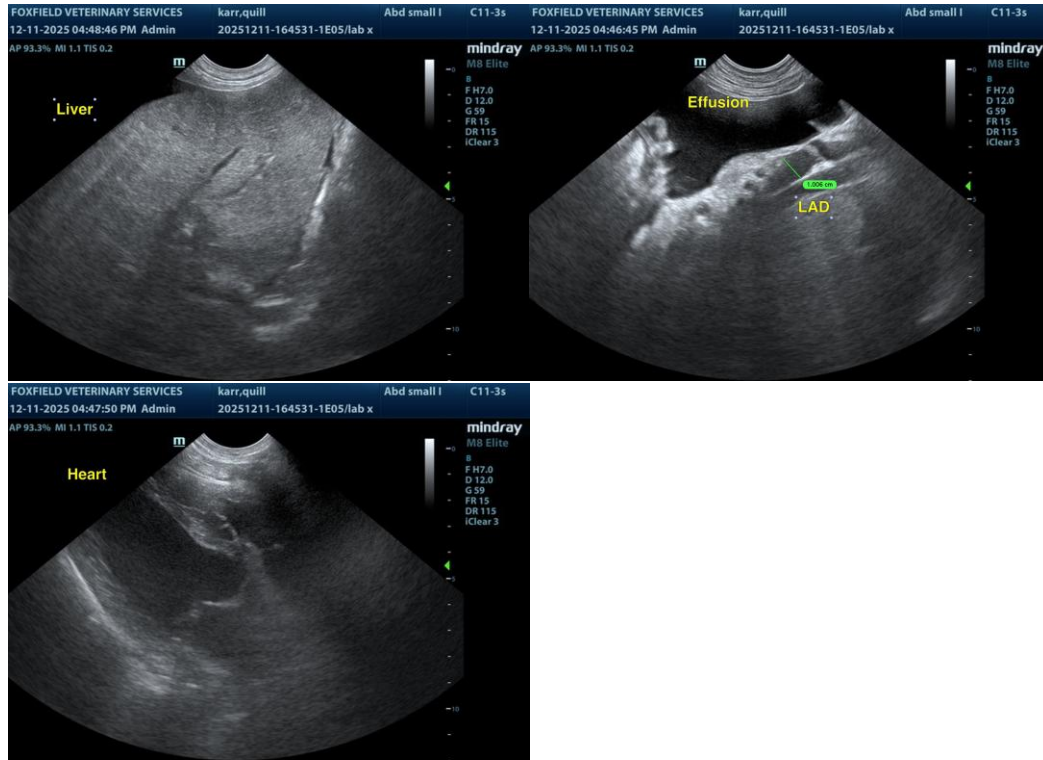
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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](mailto:info@sonopath.com)