



PATIENT

Johnny Kentta

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: Patient presented with: Irregular appetite Urinary concerns. ABNORMAL Labwork Values Platelets 494, Creatinine 0.4, ALT 845. Current Medications PetTinic Vitamin/Mineral

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Chihuahua

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.

SEX

MI

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 to moderate loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 3.7 cm in length. The right kidney measured 4.1 cm in length.

AGE

12yr

The area of the aortic trifurcation was free of pathology.

The descended left testicle was sonographically normal measuring 1.6 cm in diameter.

WEIGHT

3.58lb

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.37 cm width in the caudal pole. The right adrenal gland measured 0.37 cm width in the caudal pole.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Sara Hansen

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.

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate variably echogenic non-shadowing ingesta /chyme with no signs of obstruction or foreign material.

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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.

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

SPECIES

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Pancreas

The parenchyma of the right pancreas was hyperechoic to adjacent omental fat with diffuse parenchyma remodeling. The capsule of the pancreas was mildly asymmetrical in contour without evidence of peripancreatic inflammation. These changes may suggest chronic inflammation, fibrosis, or saponification if previous history of pancreatitis. No overt signs of pancreatic neoplasia. The area of the left pancreas was sonographically normal.

BREED

Chihuahua

Free Abdomen

SEX

MI

No additional evidence of lymphadenopathy or peritoneal effusion was present.

An ovoid mild non-homogenous to hypoechoic mass lesion was present in the caudal abdomen cranial to dorsocranial to the urinary bladder measuring 2.2 cm in diameter. This is likely consistent with a retained right testicle with possible for focal lymphadenopathy.

AGE

12yr

ULTRASONOGRAPHIC FINDINGS

Primary

- Sonographically normal urinary bladder
- Mild benign prostatic hyperplasia pattern
- Hepatopathy-subjective benign
- Non-organized gallbladder debris (non-mucocele)
- Normal gastrointestinal tract
- Suspect right limb chronic pancreatitis / fibrosis
- Probable mild enlarged non-homogenous / hypoechoic retained testicle -non-specific, concerning for neoplastic criteria with potential for hyperplasia

WEIGHT

3.58lb

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A spec CPL is warranted to correlate with suspect chronic pancreatitis or pancreatic fibrosis. Gastrointestinal support is indicated. Assuming normal clotting status and using a 25g needle, a hepatic FNA for screening cytology could be considered primarily to assess for inflammatory criteria in conjunction with ALT elevation and gallbladder debris.

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Alternatively, if no pathology on 3 view chest radiographs, laparotomy with resection of the retained testicle and assuming normal clotting status, hepatic biopsies with histopathology for definitive diagnosis is warranted.

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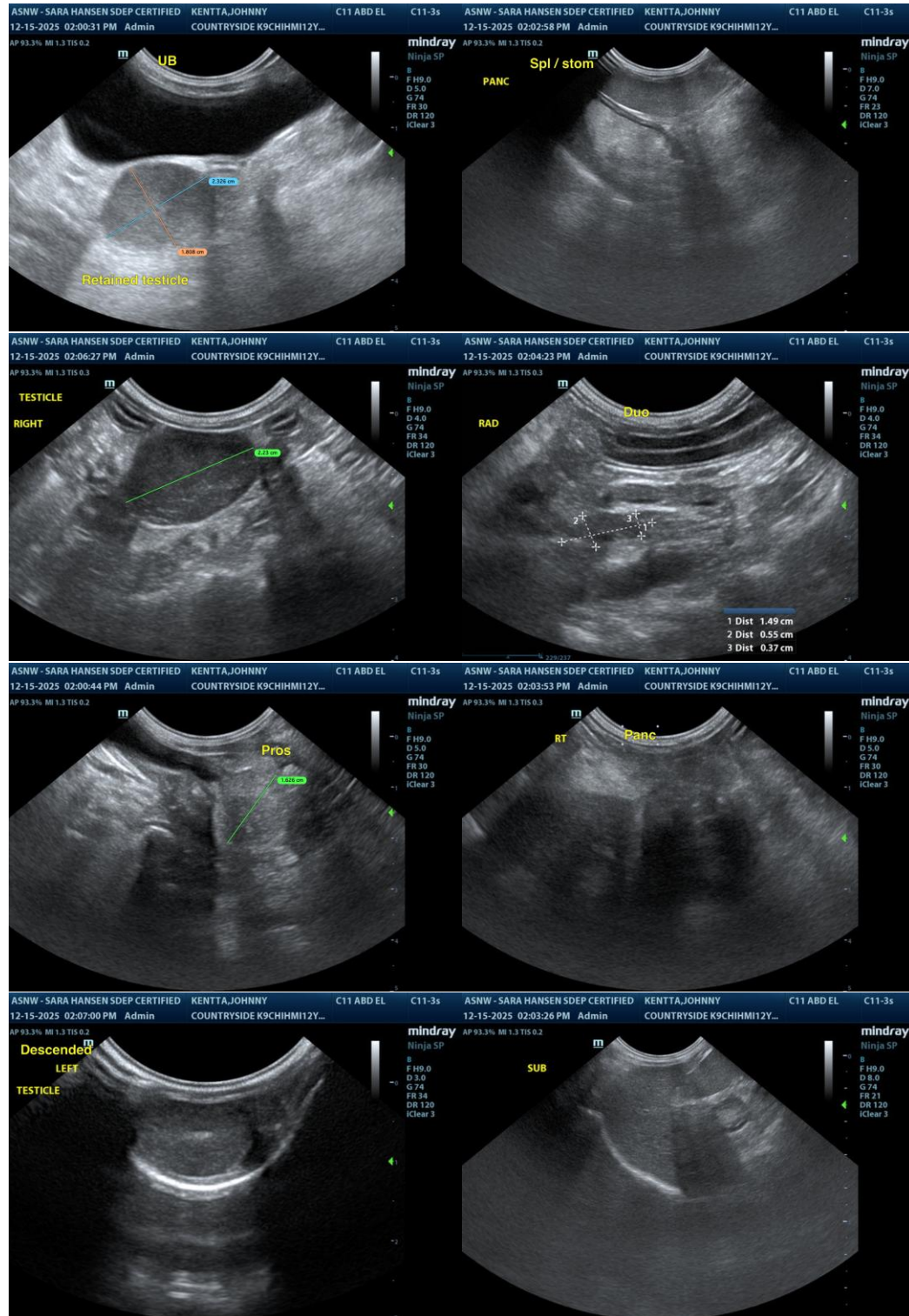
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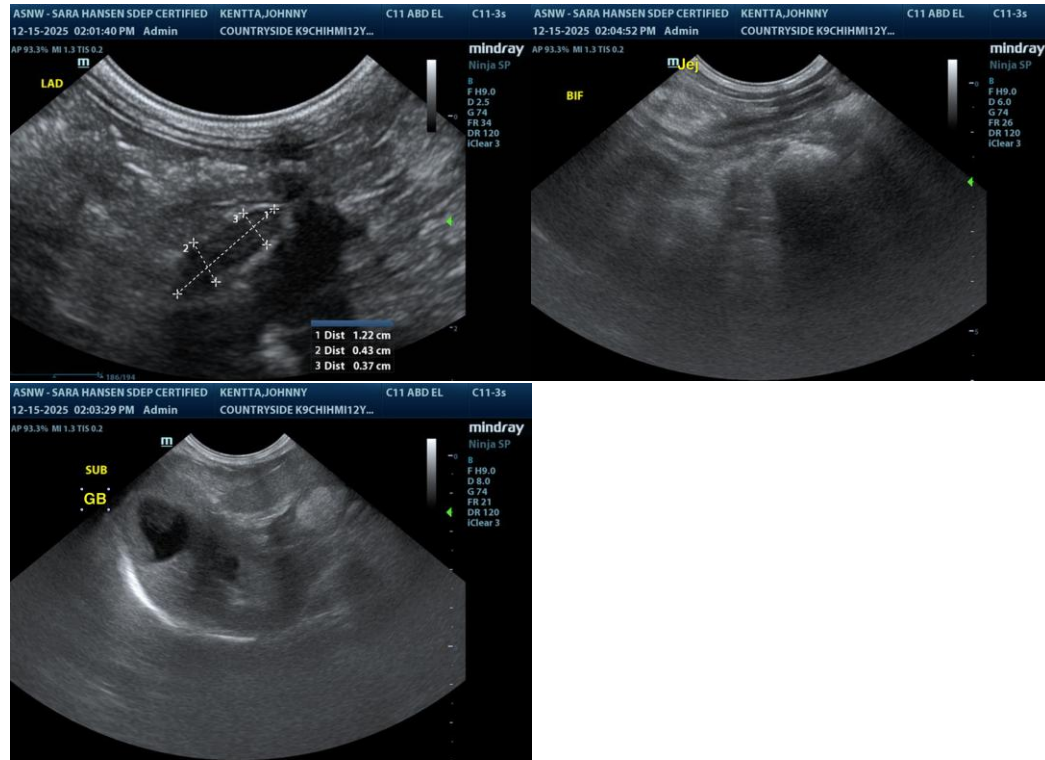
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@sonopath.com