



PATIENT	PRESENTING CLINICAL SIGNS
Ruby Adelman	re check prev u/s 11/17 O reports since increasing Pred increased hunger and thirst waking up in the middle of night panting/thirsty normal energy levels
SPECIES	Abnormal PE/Chem/CBC/UA Results: BUN 40 ALT 205 ALP 528 GGT 17
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	<i>Urinary System</i>
Chi Mix	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 change were noted.
SEX	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 4.0 cm in length. The right kidney measured 4.0 cm in length.
Spayed Female	<i>Adrenal Glands</i>
AGE	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.37 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 0.54 cm width at the caudal pole.
12	<i>Spleen</i>
WEIGHT	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.
14	<i>Liver</i>
INTERPRETED BY	The liver revealed mild to moderate hepatomegaly. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion.
R. McKenzie Daniel, DVM, DABVP	The gallbladder was non distended in size with mild nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.
IMAGING PERFORMED BY	<i>Gastrointestinal</i>
Jenn	The stomach presented with persistent similar appearing thickened wall primarily in the gastric fundus and body owing to variably thickened nonhomogenous mucosa with potential mucosa cystic changes. Intact mildly thickened antrum and pylorus wall without evidence of obstruction to pyloric outflow
HOSPITAL NAME	
Rockaway Animal Hospital	
REFERRING VET	
Dr. Maniar	
INVOICE	
12708	
DATE	
12/16/25	



PATIENT

Ruby Adelman

SPECIES

Canine

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Chi Mix

SEX

Spayed Female

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and mild variably echogenic pyloric ingesta. Stomach wall measured approximately 2.0 cm wall width. Pylorus wall measured 0.41 cm wall width.

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 ileus, obstruction or foreign material.

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

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Similar appearing to subjective nonprogressive yet significant regional thickened gastric wall owing to nonhomogenous possibly cystic gastric mucosa hyperplasia.
- Static mild parenchymal remodeling.
- Benign hepatopathy pattern with mild static nonorganized gallbladder debris (non-mucocele).
- Normal empty small intestine.
- Static age-related renal changes.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Continued empirical therapy for gastritis is indicated. In conjunction with previous endoscopy, biopsy results, hepatopathy and clinical signs, secondary to steroid administration probable.



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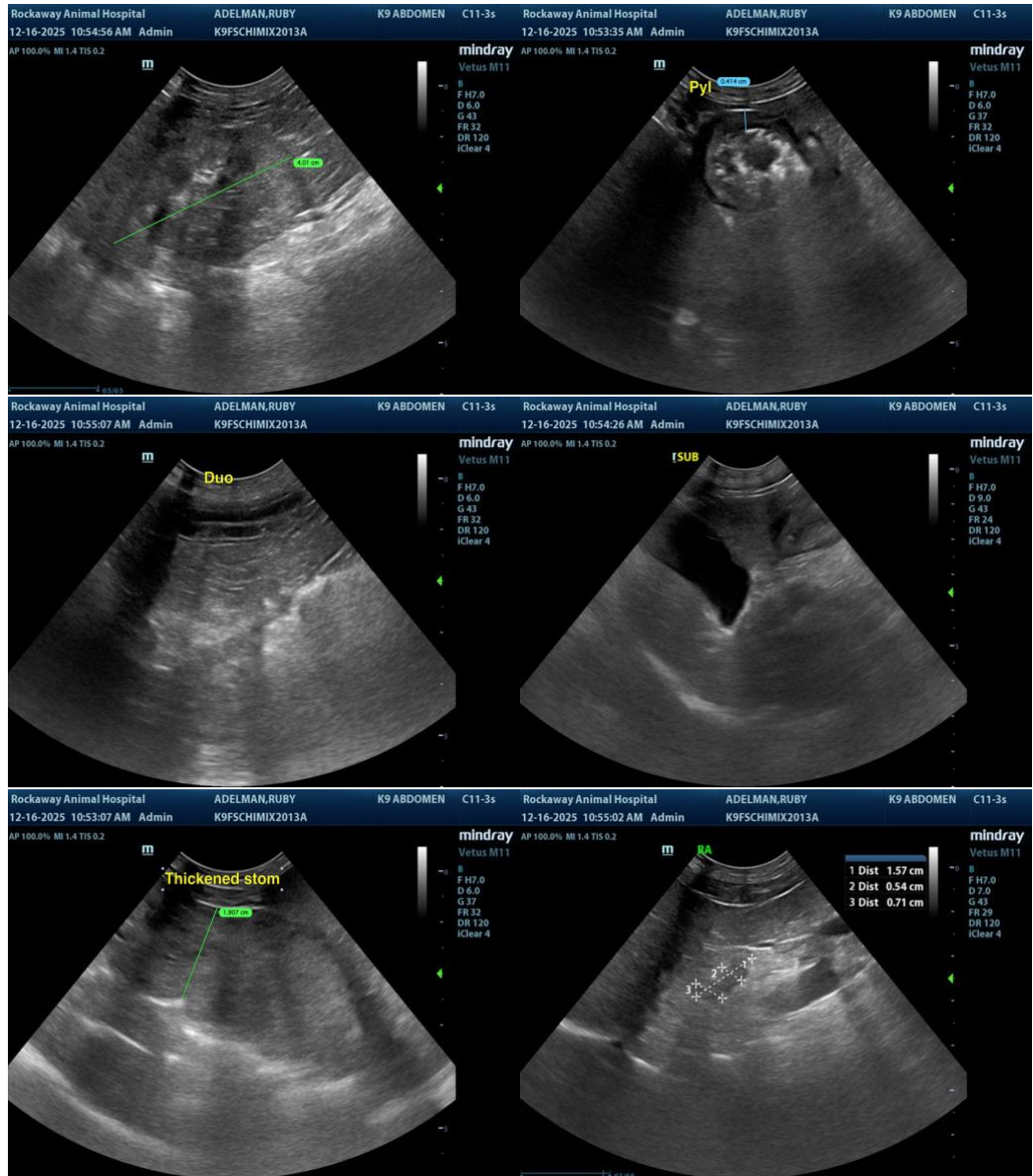
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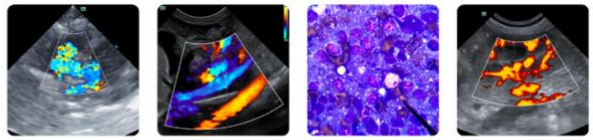
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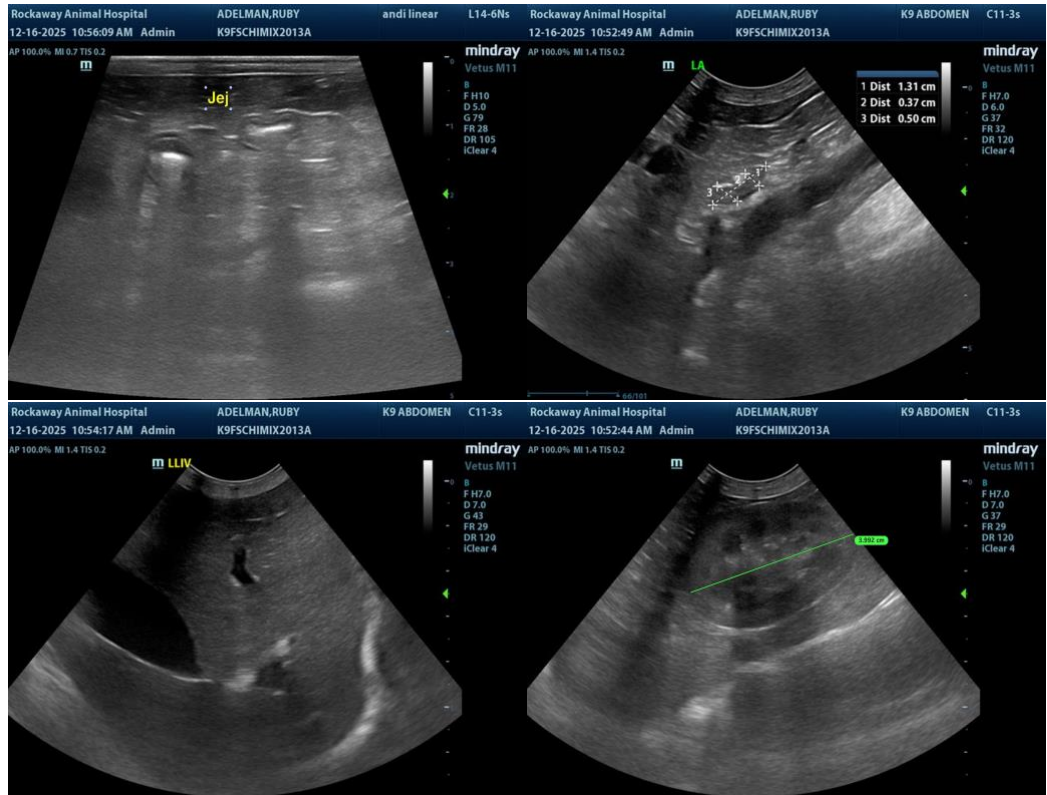
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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