



PATIENT

Finn Stoll

SPECIES

Canine

BREED

Mi-Ki

SEX

MN

AGE

7yr

WEIGHT

5.6lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

The Veterinary
 Hospital

REFERRING VET

Dr Shelton

INVOICE

23290

DATE

12/19/2025

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: Presented for QOL with intermittent nonspecific GI signs. Hadn't defecated in 5 days, decreased appetite, lost about 1lb, pacing at night. Exam mostly unremarkable, firm stools, manually evacuated with frank blood. Lip smacking, mild discomfort on abdominal palpation. Was receiving metcam but now discontinued as of today. **ABNORMAL** Labwork Values: cPL normal at 42, Globulin decreased at 1.8, stress leukogram. Current Medications: B12, cerenia, probiotics, subq fluids, miralax, gabapentin. Radiographic Findings: Normal radiographic findings.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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 3.1 cm in length. The right kidney measured 3.1 cm in length.

The area of the aortic trifurcation was free of pathology.

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 0.53 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 0.4 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 primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal



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The stomach presented intact, subjective mild prominent wall layering given patient body size, measuring 0.36 cm in width. The lumen of the stomach was empty with lumen gas no signs of ileus, obstruction or foreign material. The pylorus wall measured 0.44 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 jejunum wall measured 0.26 cm in width. The duodenum wall measured 0.31 cm in width.

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

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Pancreas

The area of the pancreas was sonographically normal.

SEX

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Free Abdomen

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

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Primary

- Borderline mild thickened intact stomach wall, empty stomach lumen
- Sonographically normal small intestine / pancreas
- Normal colon with foreign fecal matter

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The intact mildly thickened stomach is suggestive of mild gastritis criteria without evidence of additional intestinal or visceral pathology. No evidence of neoplastic criteria. A bland or hydrolyzed diet trial with possible long-term dietary therapy and gastric protectant protocol i.e., Omeprazole 1 mg/kg PO SID as empirical therapy for gastritis or possible esophagitis may prove beneficial. Given mild weight loss and despite cobalamin supplementation a GI panel to include PLI-TLI cobalamin and folate and if not done thoracic radiographs are suggested.

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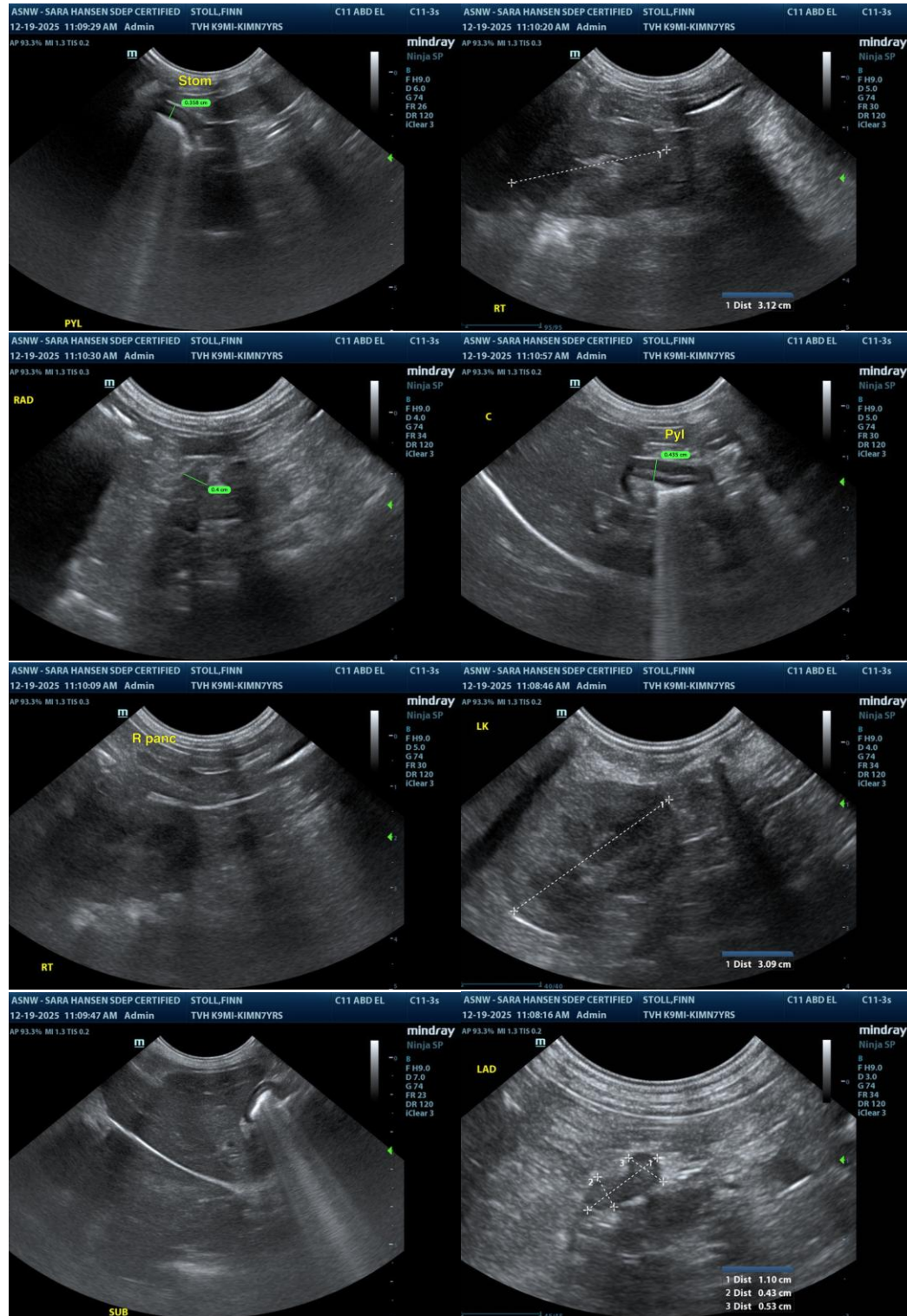
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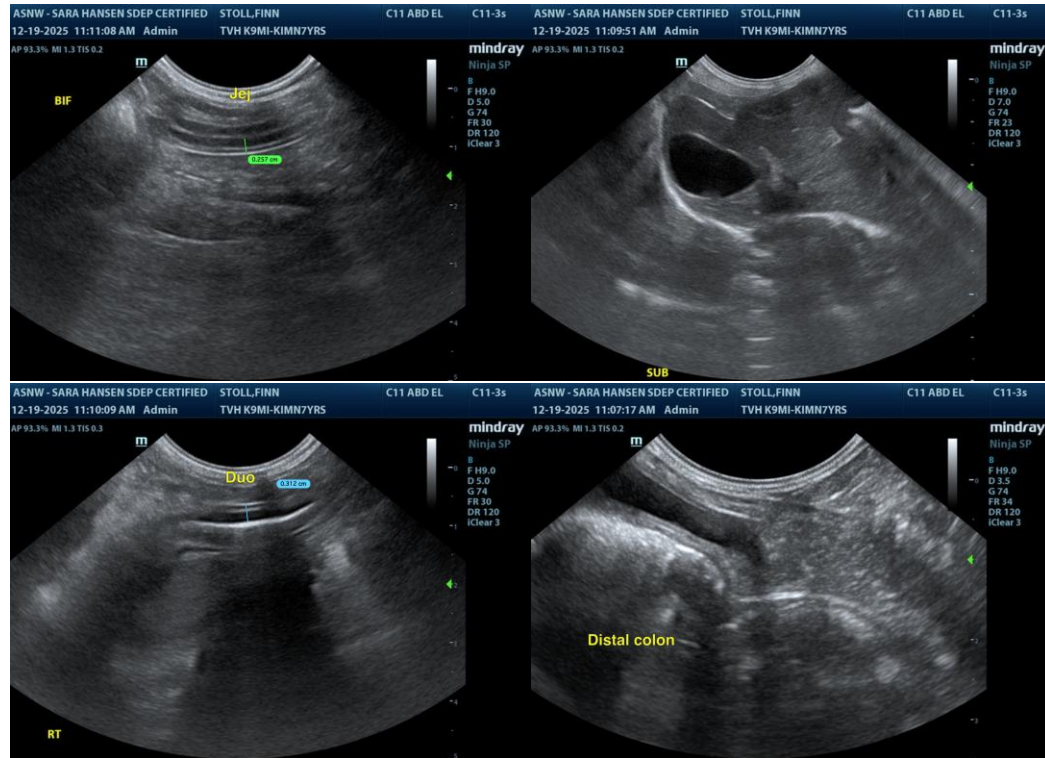
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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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