



**PATIENT PRESENTING CLINICAL SIGNS**

Vanilla Janowski Monitor liver- prev. AUS showed ill-defined hypoechoic nodules. HX of splenic sarcoma, hx of testicular tumors. WT gain, hx mild anemia, hx splenectomy, sq mass on chest, cyto=lipoma.

**SPECIES** Abnormal PE/Chem/CBC/UA Results: Glob-4.1 Chol-395 mono-870 hct-41.2 hb-14 rbc-5.7 PLT-178 UA prot-1 UPC-0.1 SG-1.053

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED *Urinary System***

Goldendoodle 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.

**SEX**

MN 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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 7.3 cm in length. The right kidney measured 7.0 cm in length.

**AGE**

10yr The area of the aortic trifurcation was free of pathology.

**WEIGHT**

75.6lb The residual prostate was sonographically normal with complete involution. No evidence of inflammatory or neoplastic criteria. The residual prostate measured 2.0 cm in diameter.

***Adrenal Glands***

**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline) 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 0.42 cm width at the caudal pole.

**IMAGING PERFORMED BY**

Kerri Becker

***Spleen***

The spleen is not visualized owing to previous splenectomy. No evidence of pathology in the area of the previous spleen.

**HOSPITAL NAME**

Park Ridge AH

***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 minor non-organized debris. The cystic and common bile ducts were normal.

**REFERRING VET**

Dr Rosenblum

***Gastrointestinal***

**INVOICE 23289**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

**DATE**

12/19/2025



**PATIENT**

Vanilla Janowski

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**

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.

**BREED**

Goldendoodle

***Free Abdomen***

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

**SEX**

MN

**ULTRASONOGRAPHIC FINDINGS**

**Primary**

- Sonographically normal urinary bladder and involuted prostate.
- Absent spleen-previous splenectomy.
- Sonographically normal liver.
- Minor non-organized gallbladder debris.
- Age-related renal changes.

**AGE**

10yr

**WEIGHT**

75.6lb

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Aside from the absent spleen owing to previous splenectomy, largely an unremarkable abdomen without evidence of previously noted pathology. Hepatosupportive medications may be considered if evidence of cholestasis. No evidence of abdominal primary or metastatic neoplastic criteria.

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Kerri Becker

**HOSPITAL NAME**

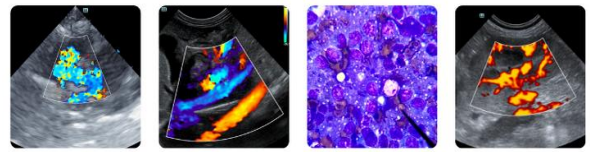
Park Ridge AH

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**PATIENT**

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**SPECIES**

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**BREED**

Goldendoodle

**SEX**

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**AGE**

10yr

**WEIGHT**

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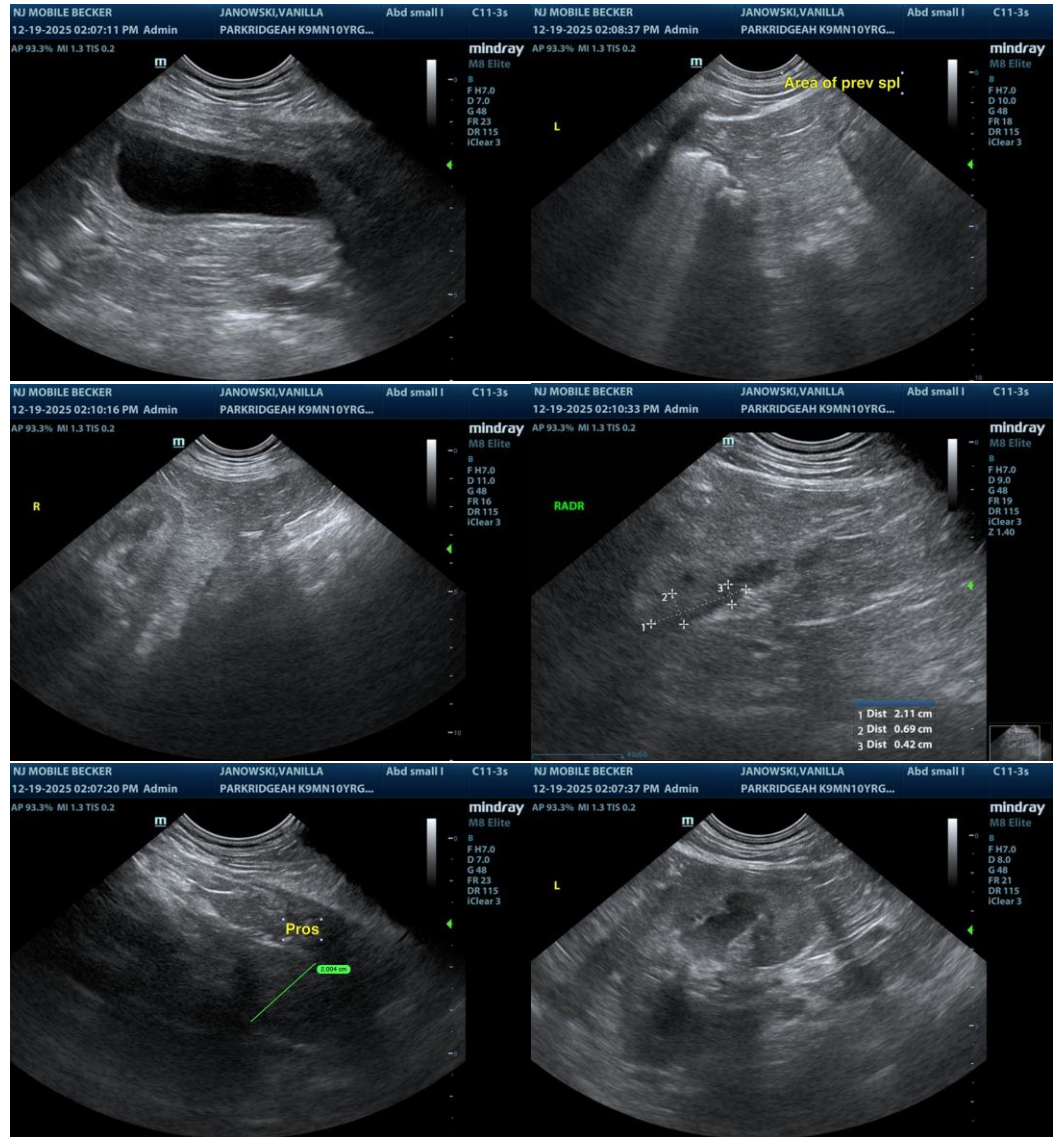
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**PATIENT**

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**SPECIES**

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**BREED**

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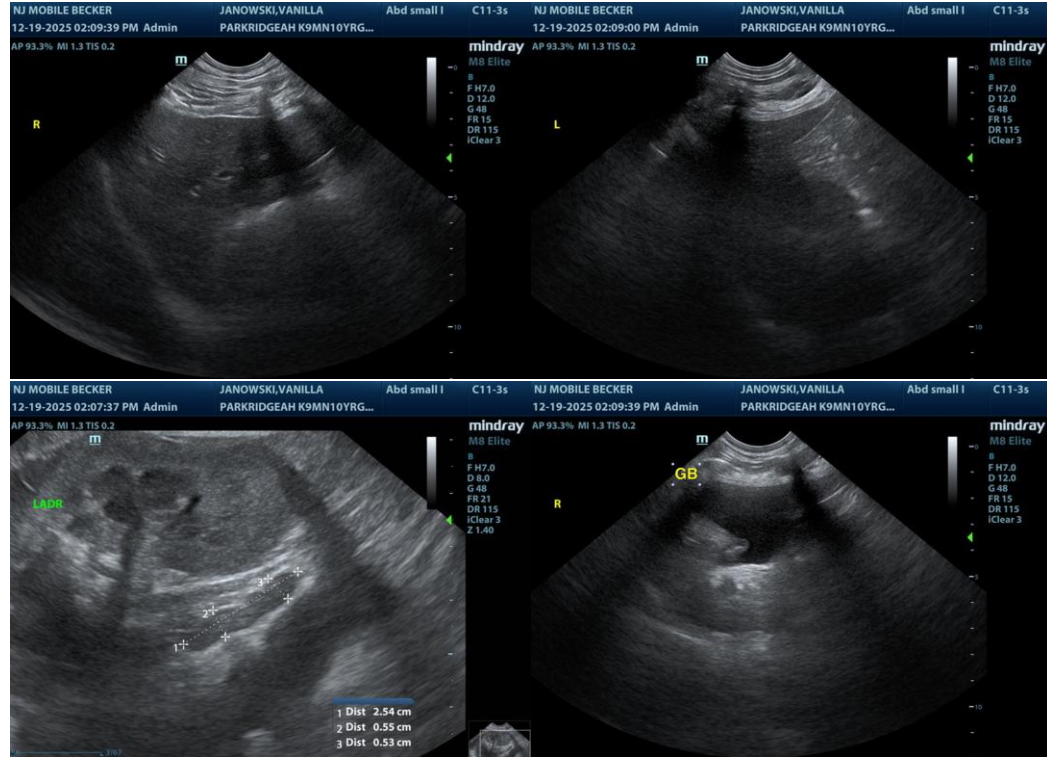
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**AGE**

10yr

**WEIGHT**

75.6lb



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 DVM, DABVP  
 (Canine and Feline)

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.

**IMAGING PERFORMED BY**

Kerri Becker

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