

PATIENT

Max Pisarek

SPECIES

Canine

BREED

Beagle Mix

SEX

NM

AGE

12 years

WEIGHT

40.1 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebecca Hamilton

HOSPITAL NAME

West Eugene AH -
Oregon

REFERRING VET

Dr. Powers

INVOICE

10394

DATE

12/2/25

PRESENTING CLINICAL SIGNS

Painful abdomen and slight weight loss noted during exam on 11/12/25, otherwise doing well at home with no changes in appetite, thirst, or urination. No V/D. Subtle micronodular spleen with expansive lesion noted on AUS 11/13. Request FNA of spleen to clarify changes.

Meds: Denamarin, Ursodiol, Keppra, Zonisamide, Rimadyl, Gaba, Phycos, Triheart, Torb sedation.

Abnormal PE/Chem/CBC/UA Results: PKT 447 (mildly increased), ALP 325 (mild inc.) remainder of BW WNL. Clotting times normal.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine or 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.

The residual prostate was free of pathology.

No evidence of pathology in the area of the aortic trifurcation.

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 loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Minor bilateral medullary mineral was noted. The left kidney measured 5.7 cm in length. The right kidney measured 6.0 cm in length.

Adrenal Glands

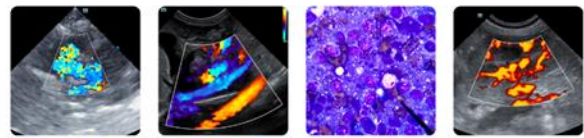
The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry were present without suspicion for overt neoplasia. The left adrenal gland measured 0.74 cm width in the caudal pole. The right adrenal gland measured 0.50 cm width in the caudal pole.

Spleen

The spleen exhibited a similar appearing, mild, nonhomogeneous, subtle micronodular parenchyma. Static-appearing mildly expansive, nonhomogeneous, possible mild fluid-filled lateral splenic lesion with subtle associated symmetrical lateral splenic capsule distortion, measuring ~2.8 cm in diameter, was present.

Liver/ Gallbladder

The liver presented as mildly enlarged in size. 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. The



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gallbladder was mildly distended in size with normal wall. There is no evidence of edema. Moderate, nonorganized, gravity-dependent to nondependent bile debris. The common bile duct was not definitively visualized.

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Gastrointestinal

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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of retained ingesta, fluid, 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 ileus, obstruction, or foreign material.

SEX

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

NM

Pancreas

AGE

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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 were evident.

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Free Abdomen

No significant omental lymphadenopathy was visualized. There is no evidence of previously noted perisplenic mesenteric lymph nodes. No evidence of peritoneal effusion was noted. Generalized normal omental echogenicity was present.

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ULTRASONOGRAPHIC FINDINGS

- Static subtle nonhomogeneous micronodular splenic parenchyma and mildly expansive possible mild fluid-filled lateral splenic lesion - lymphoid hyperplasia, hematopoiesis, inflammation, cyst, abscess, neoplasia possible
- Static hepatomegaly - subjective benign, suggestive of mild vacuolar or nonobstructive cholestatic hepatopathy
- Mild distended gallbladder with nonorganized bile debris
- Age-related renal changes exhibiting minor medullary mineral
- Normal gastrointestinal tract / pancreas

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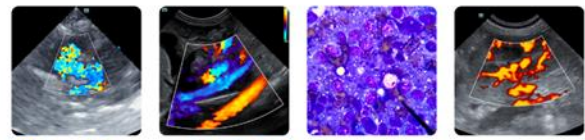
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Correlation with pending splenic FNA cytology is recommended.

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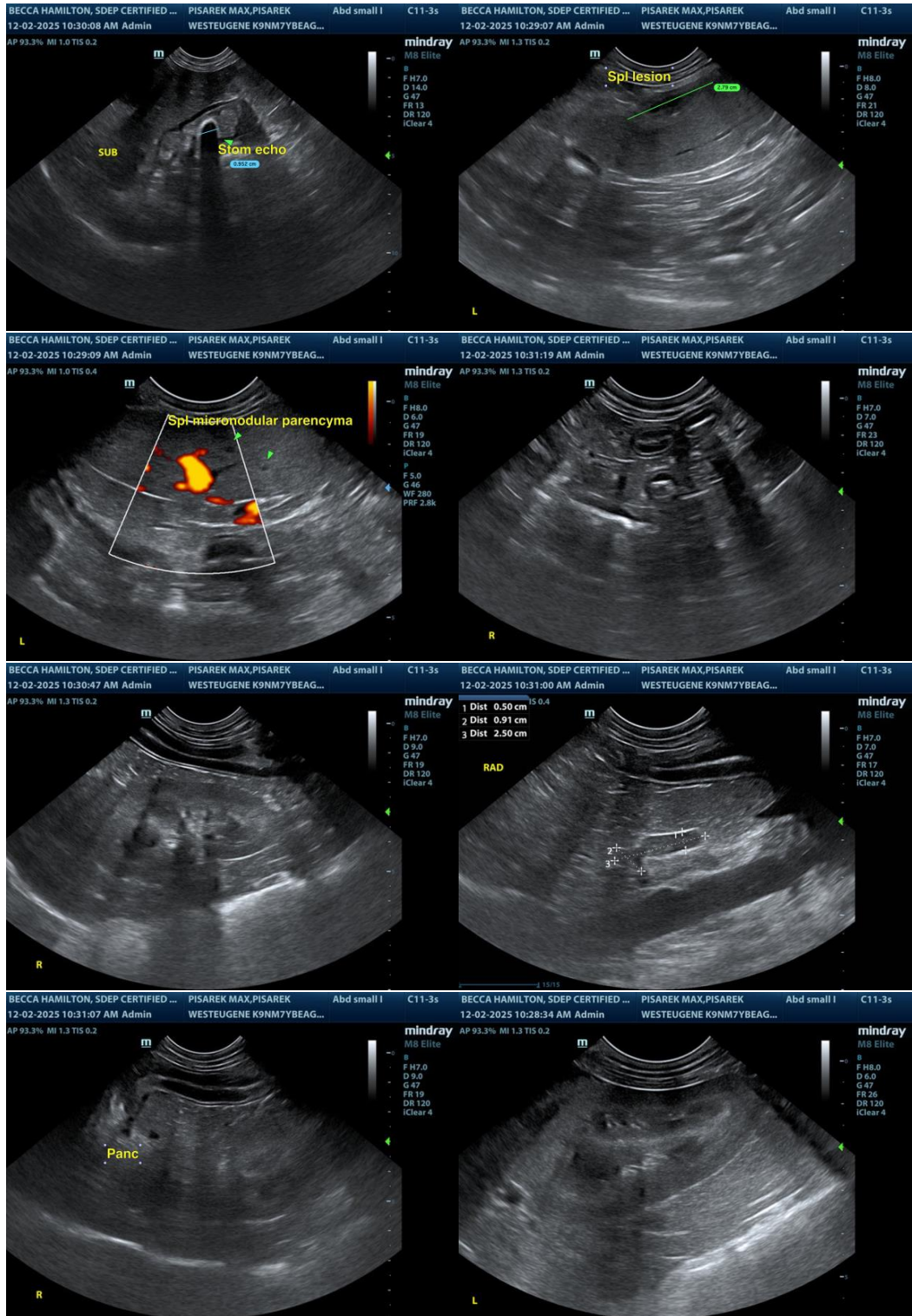
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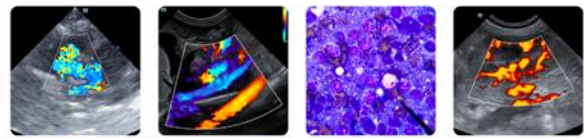
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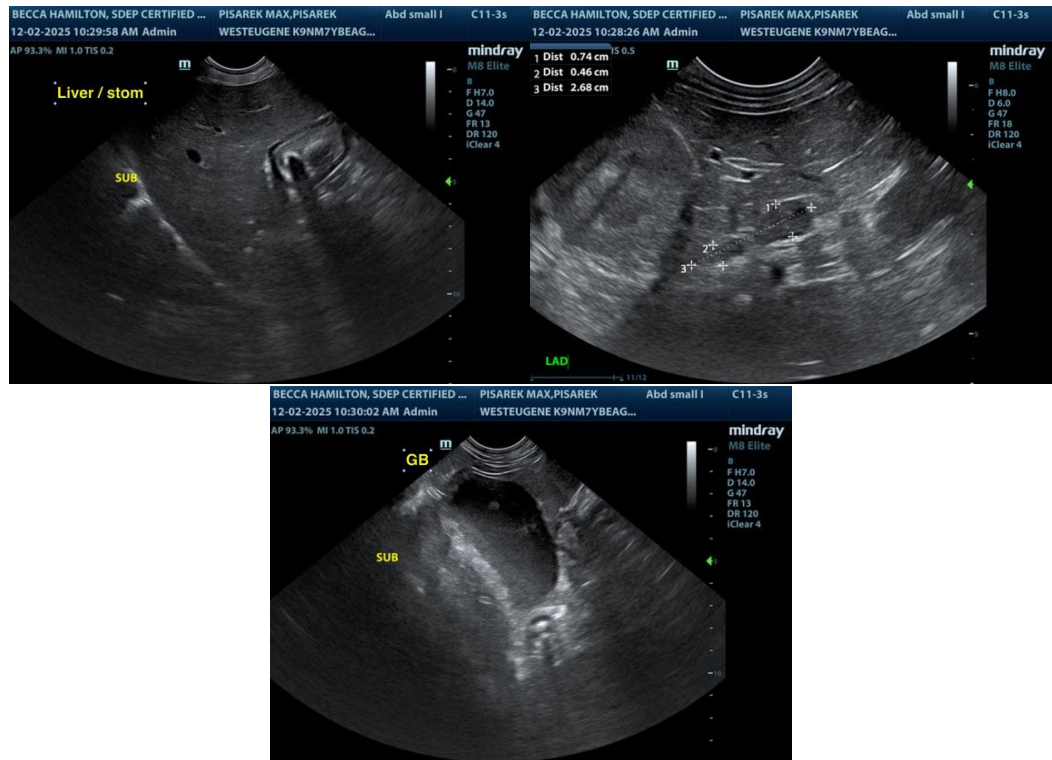
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@sonopath.com