



PATIENT

Sully Shaw

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

MN

AGE

8

WEIGHT

5.10

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Kari Wilson, DVM

HOSPITAL NAME

Animal Emergency
Hospital Deland

REFERRING VET

Dr. Kari Wilson, DVM

INVOICE
23311

DATE
12/22/2025

PRESENTING CLINICAL SIGNS

Sully is an 8-9 YO MN Yorkshire Terrier who was presented for eating chocolate. Patient ingested 5 pieces of Santa and reindeer shaped chocolate along with their foil wrappers and cardboard along with wrapping paper. Owners found him around 7:30-7:45pm eating the chocolate, uncertain what time he initially ate them. He has not had any symptoms since. Chocolate ingestion
Hepatopathy/hepatomegaly - rule out endocrine (Cushing's) vs. benign vs. other Thickened small intestine: Open Hip dysplasia Historical heart murmur

Abnormal PE/Chem/CBC/UA Results: - CBC: NSF - Chem: alb 4.4, BG 129, ALT 124, ALP 226 - EPOC: lactate 3.13, BG 125 - CPLi: normal - UA: Struvite 1-2p/hpf, Cocci- scant, SG >1.050, Protein: +++

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

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. Left/right lateral diverticuli renoliths were present. The left kidney measured 3.9 cm in length. The right kidney measured 4.2 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

Bilateral symmetrical adrenal gland enlargement with uniformly hypoechoic parenchyma was present. The left adrenal gland measured 0.60 cm width at the caudal pole. The right adrenal gland measured 0.67 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. Suspect areas of emerging medial capsule fibrosis were present which is benign. 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 presented 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 gallbladder was non-distended in size with 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 was empty with mild lumen gas and no signs of ileus, obstruction or foreign material.

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. Segmental mild, non-obstructive gas pattern was present.

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

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

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

ULTRASONOGRAPHIC FINDINGS

Primary

- Mild hepatomegaly- consistent with benign criteria.
- Mild non-organized gallbladder debris.
- Normal empty gastrointestinal tract- mild gastric and segmental intestinal gas.
- Normal area of the pancreas.
- Mild bilateral adrenomegaly

Secondary

- Non-obstructive renolithiasis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although non-specific, the hepatopathy is consistent with benign criteria. Assuming normal clotting status a hepatic FNA for screening cytology could be considered for further assessment. Hepatosupportive medications may prove beneficial. Adrenal workup is indicated if clinical signs consistent with Cushing's syndrome are present. No evidence of gastrointestinal mural pathology, obstructive criteria, or foreign material.



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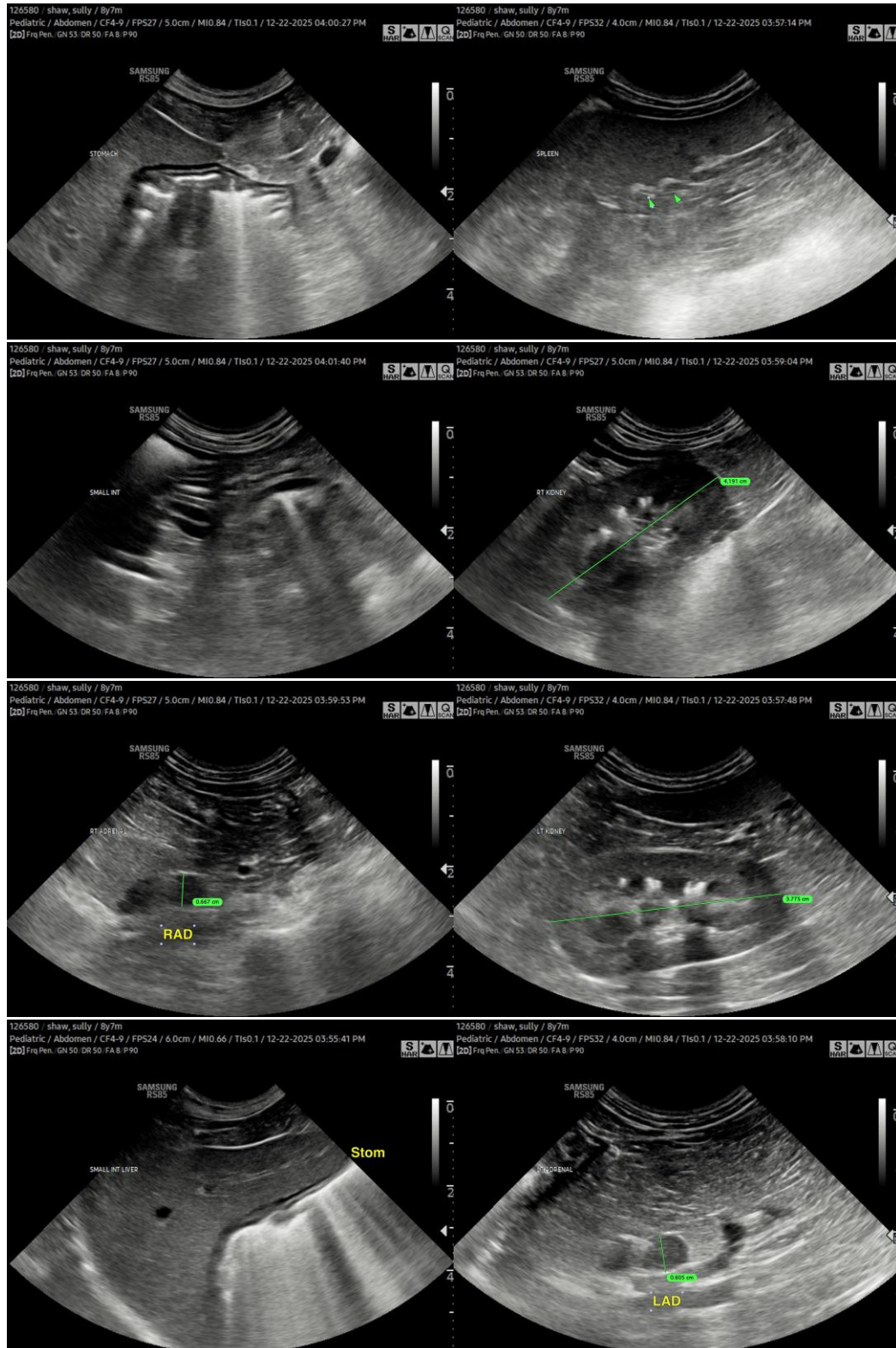
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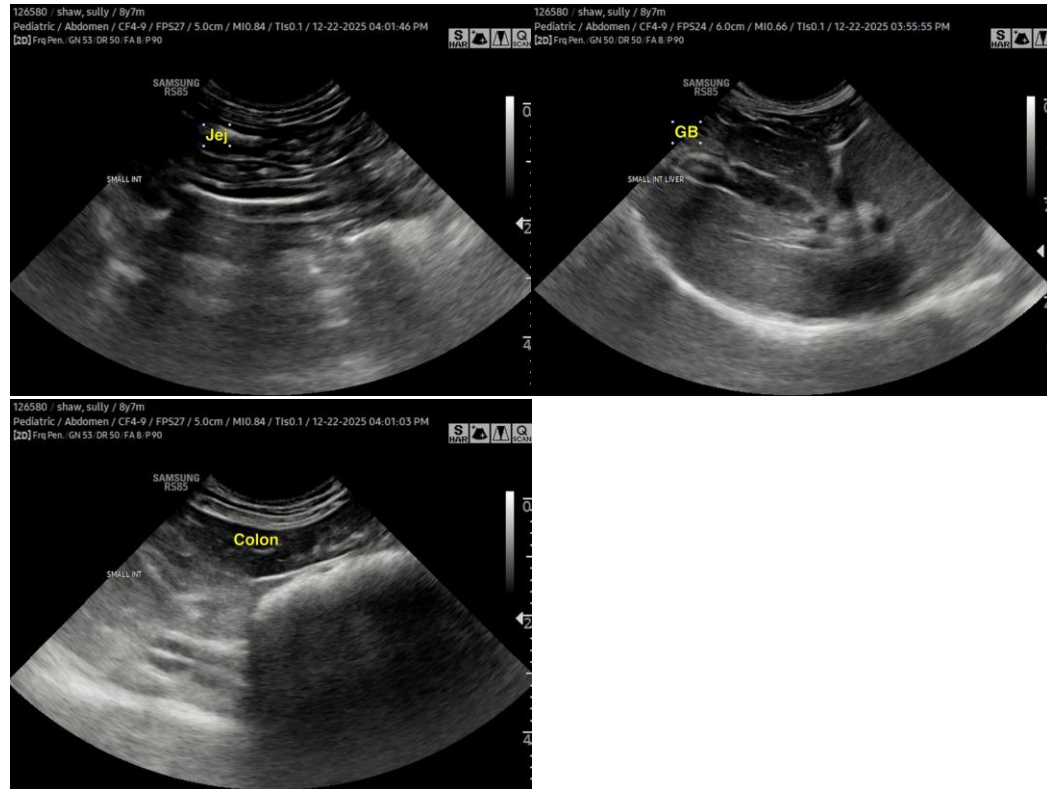
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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