



PATIENT	PRESENTING CLINICAL SIGNS
Tucker Beyer	Vomited several times on 12/23, none since. Has had significantly decreased appetite & BM since then. Drinking more water, unsure if urinating more. PE unremarkable, no pain or tensing on abdominal palpation. Current Medications: None
SPECIES	
Canine	Abnormal PE/Chem/CBC/UA Results: Laboratory Abnormalities (please indicate if WNL): CBC - neut 17.3k, mono 1.63k, all else wnl Chem 17 - glob 5.0 (H), all else wnl SDMA 0.11 (wnl) Lytes - all wnl Panc Lipase - all wnl UA - SpGrav 1.020, 1+ protein, no other abnormalities No rads at this time
BREED	
Australian Shepherd	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
SEX	Urinary System
Neutered Male	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm 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.
AGE	
4 Years 2 Months	The visualized medial iliac lymph nodes were sonographically normal.
WEIGHT	The area of the residual prostate appeared normal and free of pathology.
63 pounds	Normal size and margination was 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 6.3 cm in length. The right kidney measured 6.6 cm in length.
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.58 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.
IMAGING PERFORMED BY	Spleen
Amanda Crook	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.
HOSPITAL NAME	Liver
River's Edge Pet Medical Center	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. 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.
REFERRING VET	Gastrointestinal
Dr. Shelby Young	
INVOICE	
12895	
DATE	
12/30/25	



PATIENT

The stomach presented with intact visible wall. The stomach exhibited mild gas distention.

Tucker Beyer

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. Mild segmental nonobstructive jejunal ileus.

SPECIES

Canine

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

BREED

Pancreas

Australian Shepherd

The area of the pancreas was sonographically normal.

SEX

Free Abdomen

Neutered Male

Intermittent mildly prominent mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of the lymph nodes measured 2.7 cm x 0.68 cm. No evidence of peritoneal effusion.

AGE

4 Years 2 Months

ULTRASONOGRAPHIC FINDINGS

WEIGHT

63 pounds

- Sonographically unremarkable gastrointestinal tract with mild gastric gas distention and mild segmental nonobstructive jejunal ileus.
- Normal area of the pancreas.
- Intermittent mild mesenteric lymphadenopathy- subjective benign.
- Normal bilateral adrenal glands.

INTERPRETED BY

R. McKenzie Daniel,
DVM, DABVP

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

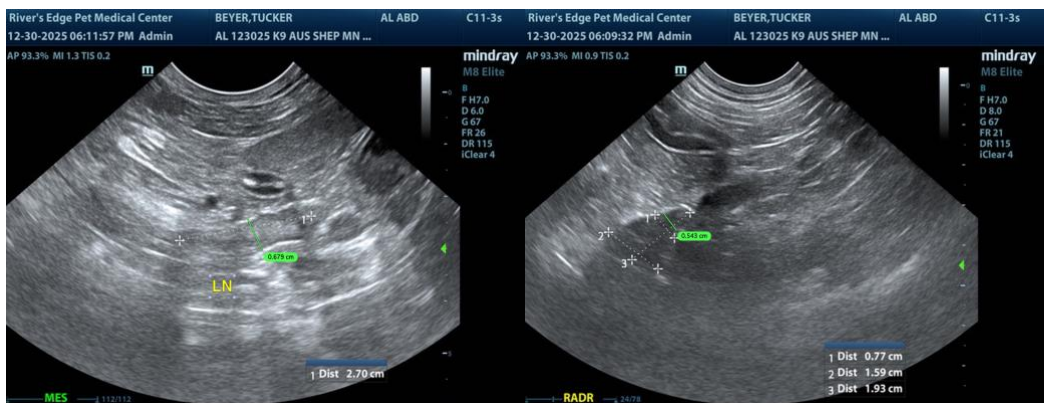
No evidence of mechanical gastrointestinal obstructive pattern or foreign material. Dietary intolerance, nonspecific gastroenteritis i.e. infectious disease, enterotoxin, nonstructural inflammatory bowel, occult parasitism, mild pancreatitis, less likely occult Addison's disease or neoplasia are all potentials. Gastrointestinal support is indicated. A GI panel to include PLI, TLI, cobalamin and folate, screening cortisol level and three view chest radiographs to rule out occult disease may be considered. Sonographic monitoring is indicated if nonresponsive or continued gastrointestinal signs.

IMAGING PERFORMED BY

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Tucker Beyer

SPECIES

Canine

BREED

Australian Shepherd

SEX

Neutered Male

AGE

4 Years 2 Months

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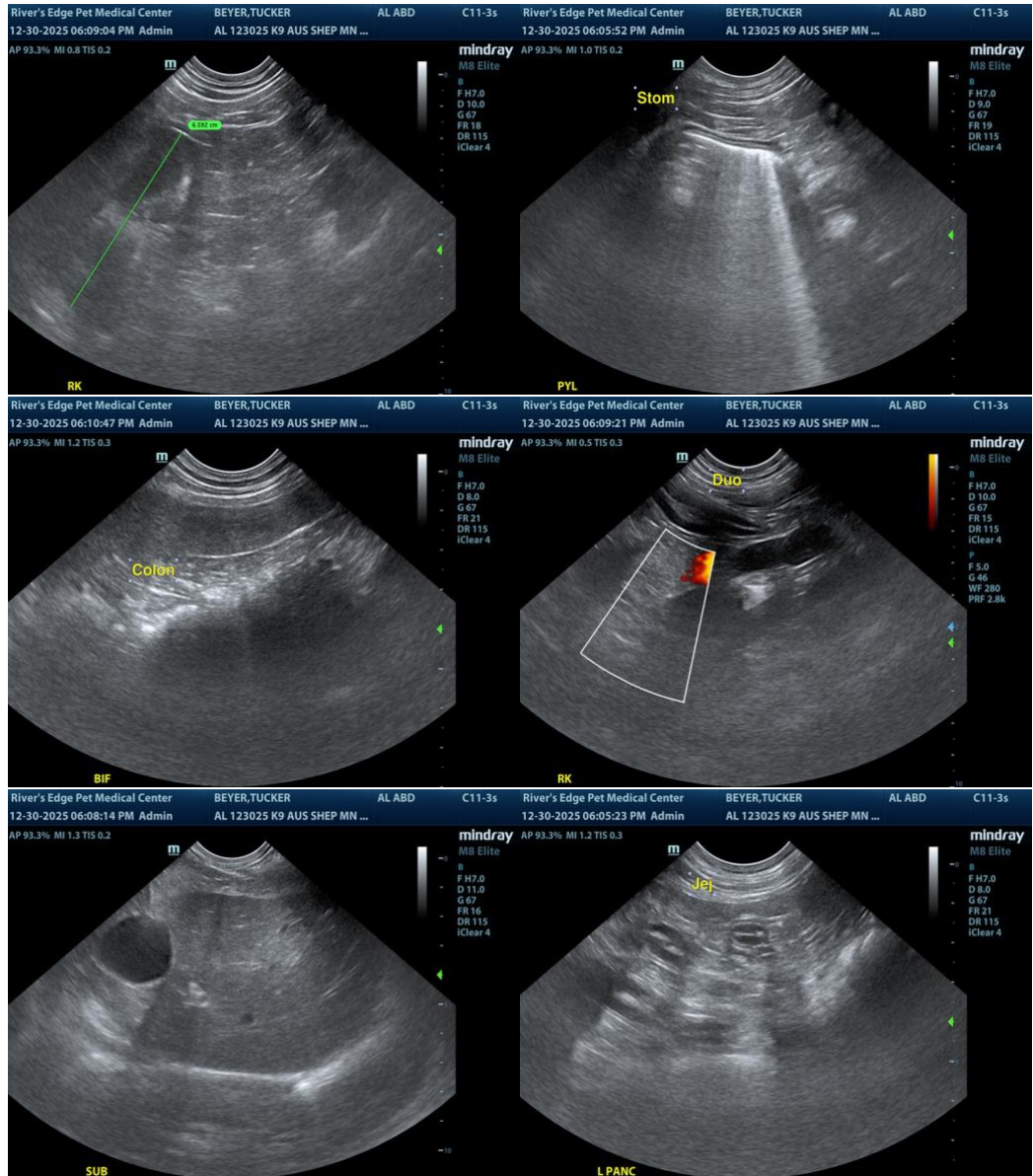
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SPECIES

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Australian Shepherd

SEX

Neutered Male

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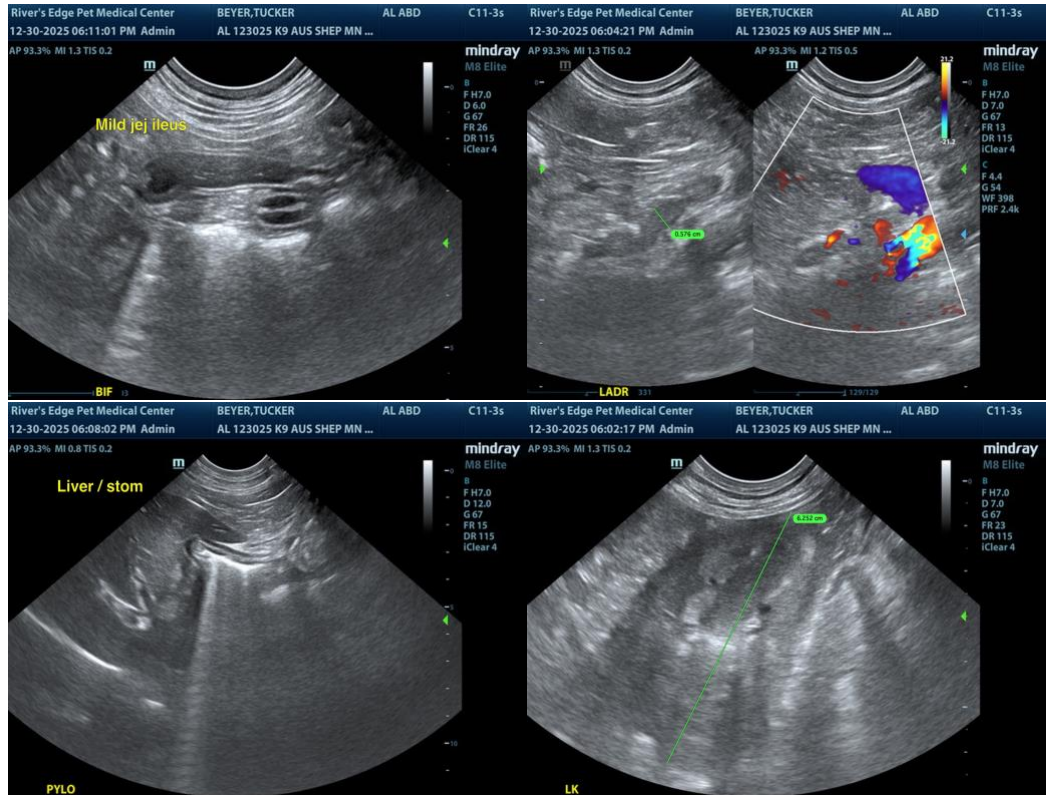
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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