



PATIENT

Tank Reid

SPECIES

Canine

BREED

Boxer

SEX

Male Intact

AGE

3 yrs

WEIGHT

58 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Shallowford AH

REFERRING VET

Dr. Eads

INVOICE

12887

DATE

12/4/25

PRESENTING CLINICAL SIGNS

History: P presented for not eating that well for a few weeks. fever 103F Gave a small amount of propofol to sedate for US. P drank water this morning and ate a milk bone. Will send rads separately.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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 changes were noted.

The prostate was enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic without parenchymal mineralization. The prostate measured – cm x – cm.

Sonographically normal descended right testicle measuring 3.6 cm in diameter. The left testicle was visualized in the area of the iliac vasculature or potential inguinal space measuring ~2.0 cm in diameter.

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 6.8 cm in length. The right kidney measured 7.2 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.49 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 – cm width at the caudal pole and – cm width at the cranial 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

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 mild, non-organized, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.



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Gastrointestinal

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The stomach presented intact wall layering in the fundus and gastric body. Thickened pyloric wall exhibiting mild mural hypoechogenicity and indistinct pyloric mural detail measuring ~ 1.1 cm in diameter. No evidence of obstruction to pyloric outflow.

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The visualized duodenum exhibited intact borderline prominent wall layering. Duodenum wall measured 0.55 cm. The jejunum to the level of the ileum and colon was sonographically normal exhibiting intact wall layer ratio and empty jejunum. Jejunum wall measured 0.27 cm. No evidence of intestinal obstructive pattern.

BREED

Boxer

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

SEX

Pancreas

Male Intact

The area of the pancreas was sonographically normal.

AGE

Free Abdomen

3 yrs

Intermittent, mildly prominent to enlarged mesenteric 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 lymph node measured 2.9 cm x 0.4 cm.

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ULTRASONOGRAPHIC FINDINGS

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R. McKenzie Daniel,
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- Thickened pylorus and possible upper duodenum – non-obstructive, remainder of gastrointestinal tract sonographically unremarkable
- Intermittent mild mesenteric lymphadenopathy – consistent with benign criteria
- Retained normal appearing left testicle level of iliac vasculature or potential cranial inguinal space
- Mild benign prostatic hyperplasia

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The thickened pylorus and possible upper duodenum wall may indicate inflammatory, infectious, hyperplastic, granulomatous or emerging neoplastic etiologies. This did not appear to be currently obstructive to pyloric outflow, Smaller more frequent feedings of canned or slurried hydrolyzed diet, gastro protectants with consideration for empirical helicobacter coverage with clinical and sonographic monitoring would be reasonable. Upper gastrointestinal endoscopic or surgical biopsy is required for definitive diagnosis.

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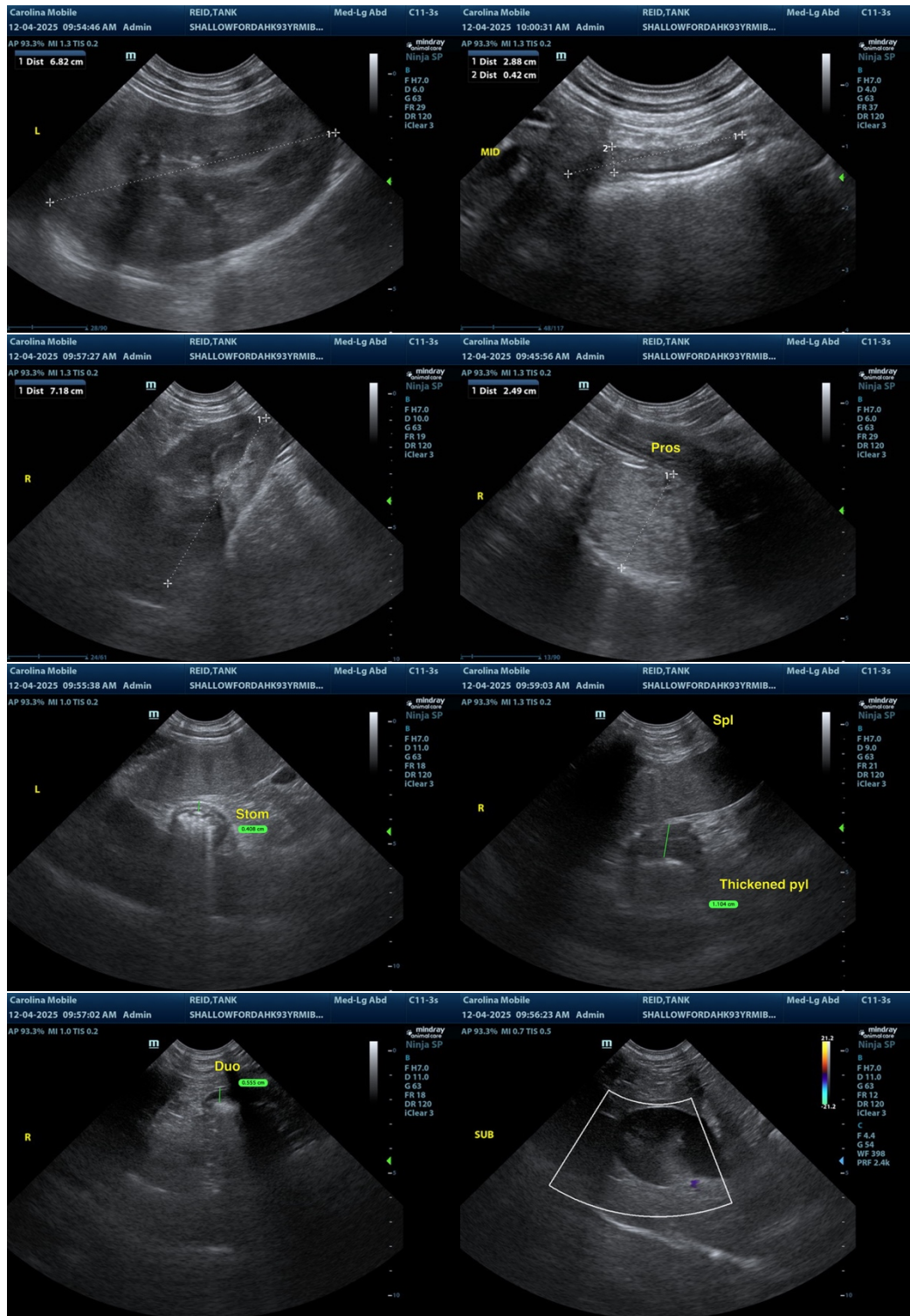
Dr. Eads

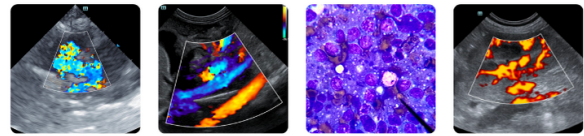
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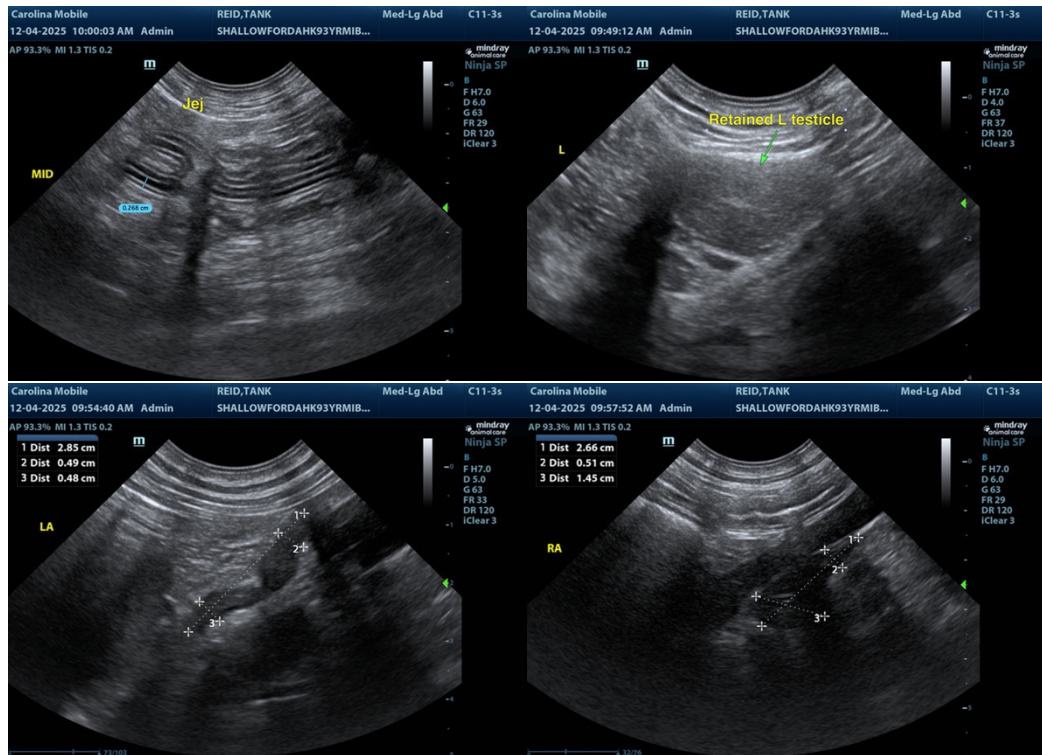
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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