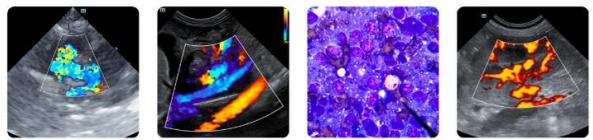




<p>PATIENT</p> <p>Zoi Rosamila</p> <p>SPECIES</p> <p>Canine</p> <p>BREED</p> <p>Rottweiler</p> <p>SEX</p> <p>FS</p> <p>AGE</p> <p>8</p> <p>WEIGHT</p> <p>92</p> <p>INTERPRETED BY</p> <p>R. McKenzie Daniel, DVM, DABVP (Canine and Feline)</p> <p>IMAGING PERFORMED BY</p> <p>Jenn</p> <p>HOSPITAL NAME</p> <p>Rockaway AH</p> <p>REFERRING VET</p> <p>Dr. Salazar</p> <p>INVOICE</p> <p>10414</p> <p>DATE</p> <p>12/4/25</p>	<p>PRESENTING CLINICAL SIGNS</p> <p>decreased appetite suspect pancreatitis and concern for intra abdominal neoplasia with suspected pulmonary nodule Current meds Pantoprazole Cerenia LRS all IV</p> <p>Abnormal PE/Chem/CBC/UA Results: TP 9.5 Glob 5.7 T bili 1.6 CPL 270</p> <p>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</p> <p>Urinary System</p> <p>The urinary bladder was distended in size with normal tone. Anechoic urine was present. There is no evidence of pathology in the area of the cystourethral junction or trigone. The urethra exhibited normal structure and tone to a depth of 3.0 cm. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.</p> <p>No evidence of medial Iliac or sublumbar lymphadenopathy/masses.</p> <p>Normal size and margination were present in the left kidney. 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 7.6 cm in length. The right kidney was indistinctly visualized owing to patient size and kidney depth.</p> <p>Adrenal Glands</p> <p>The left adrenal gland was overtly normal in size, position, and shape. The left adrenal gland measured 0.8 cm width at the caudal pole. The right adrenal gland was not definitively visualized owing to patient size and adrenal depth.</p> <p>Spleen</p> <p>The spleen exhibited multifocal, variably sized to expansive, nonhomogeneous, hypoechoic nodules to masses. An example measured 3.6 cm in diameter.</p> <p>Liver/ Gallbladder</p> <p>The liver exhibited generalized mild hepatomegaly with multifocal, expansive, nonhomogeneous, hypoechoic to centrally echogenic liver nodules. An example measured 2.6 cm in diameter. The gallbladder was indistinctly visualized. No evidence of gallbladder overdistention or post hepatic stasis. The cystic and common bile ducts were normal.</p> <p>Gastrointestinal</p> <p>The stomach presented intact wall layering with a normal wall layer ratio. Mild nonshadowing ingesta / chyme was present.</p>
--	---



PATIENT

Zoi Rosamila

SPECIES

Canine

BREED

Rottweiler

SEX

FS

AGE

8

WEIGHT

92

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Salazar

INVOICE

10414

DATE

12/4/25

The visualized segments of the small intestine presented intact wall layering with normal 1:3 muscularis/mucosa ratio and an empty intestinal lumen.

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

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 were evident.

Free Abdomen

No obvious significant omental lymphadenopathy was visualized. No evidence of peritoneal effusion was present.

Rapid view of the heart revealed no evidence of pericardial masses or effusion in the visible window.

ULTRASONOGRAPHIC FINDINGS

- Multicentric hepatosplenic neoplasia
- Sonographically normal gastrointestinal tract
- Normal area of pancreas

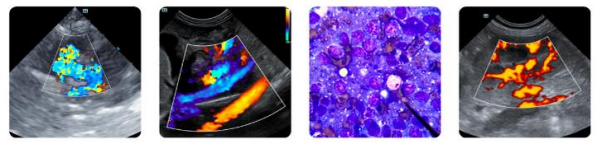
Secondary Findings

- Sonographically normal distended urinary bladder

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assuming normal clotting status, hepatosplenic nodule / mass FNA cytology and potential oncology consultation is recommended. Continued gastrointestinal support is recommended.





PATIENT

Zoi Rosamila

SPECIES

Canine

BREED

Rottweiler

SEX

FS

AGE

8

WEIGHT

92

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

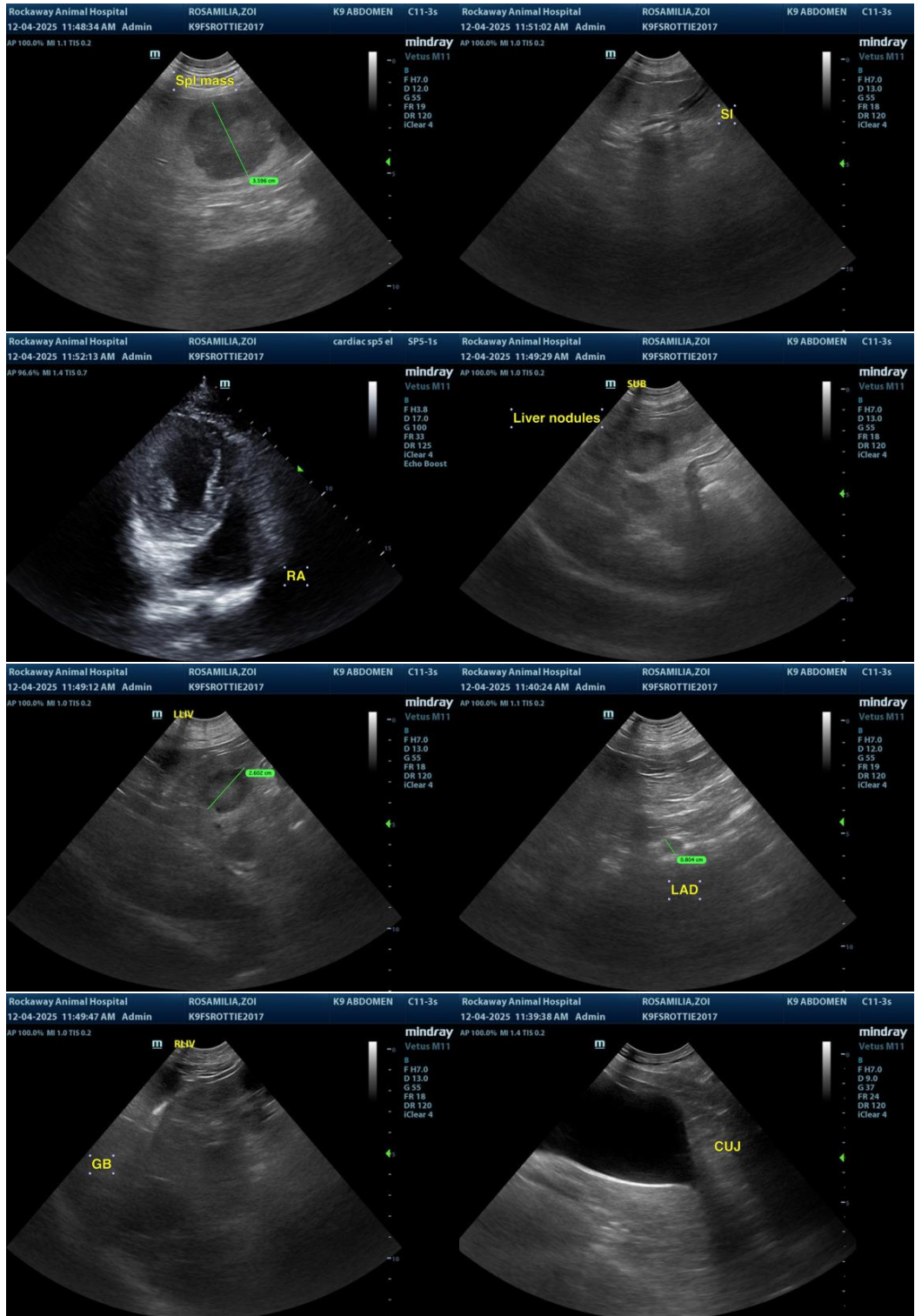
Dr. Salazar

INVOICE

10414

DATE

12/4/25





PATIENT

Zoi Rosamila

SPECIES

Canine

BREED

Rottweiler

SEX

FS

AGE

8

WEIGHT

92

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Salazar

INVOICE

10414

DATE

12/4/25

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