



## PATIENT

Harvie Robertson

## SPECIES

Canine

## BREED

Goldendoodle

## SEX

FS

## AGE

4yr

## WEIGHT

13.1

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Dr. Mariusz  
Chmielinski

## HOSPITAL NAME

Apex Veterinary  
Services

## REFERRING VET

Alpine 24/7

## INVOICE

23928

## DATE

02/19/2026

## PRESENTING CLINICAL SIGNS

Acute vomiting with lethargy and inappetence

Abnormal PE/Chem/CBC/UA Results: Vital Parameters: T: 38.2°C, HR: 128 bpm (1:1 pulse ratio), RR: 32/min, Respiratory Effort: Normal, Blood Pressure: 130/71 (MAP 86), Mentation: QAR, Hydration: ~6% dehydrated Mucous Membranes: Pink, dry/tacky, CRT: < 2 sec Bloodwork Correlation: Mild hemoconcentration (HCT 0.601) Mild hyperbilirubinemia (20 µmol/L) ALT normal-high Electrolytes normal No azotemia AXR: Stomach: Largely empty.: No obvious foreign body silhouette. No significant gastric distension. Small Intestines: Mild to moderate focal small intestinal distension., A few loops appear gas-filled and slightly enlarged., Gas distribution is segmental, not diffusely uniform. No obvious gravel sign. No clear radiopaque foreign material identified. Cecum / Colon: moderately gas distended. Some fecal material,

## 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 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. The left kidney measured 5.0 cm in length. The right kidney measured 4.7 cm in length.

The area of the aortic trifurcation was free of pathology.

The area of the residual prostate appeared normal and free of pathology.

### Adrenal Glands

The left adrenal gland was mildly subnormal in size with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.35 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 0.55 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. 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/Gallbladder



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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. Normal vascular volume. 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.

### **Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained lumen gas and minor retained fluid. No evidence of obstruction to pyloric outflow.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Mild, non-obstructive duodenal ileus and segmental intestinal gas, no evidence of mechanical/ metabolic ileus to the level of the colon.

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 was evident.

### **Free Abdomen**

No peritoneal effusion was present.

Intermittent mildly prominent to enlarged 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).

## **ULTRASONOGRAPHIC FINDINGS**

### **Primary**

- Overall, sonographically unremarkable empty gastrointestinal tract- acute gastroenteritis pattern
- Normal area of pancreas
- Sonographically normal liver/ gallbladder
- Mild subnormal left adrenal gland- non-specific

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of mechanical gastrointestinal obstruction or foreign material. Dietary intolerance, enterotoxin, inflammatory bowel, mild pancreatitis, Addison's disease, all potentials. Gastrointestinal support indicated. A screening cortisol level to assess for or rule out Addison's disease is recommended.

Sonographic monitoring or reassessment recommended if non-responsive or continued gastrointestinal signs or evidence of emerging hepatopathy.



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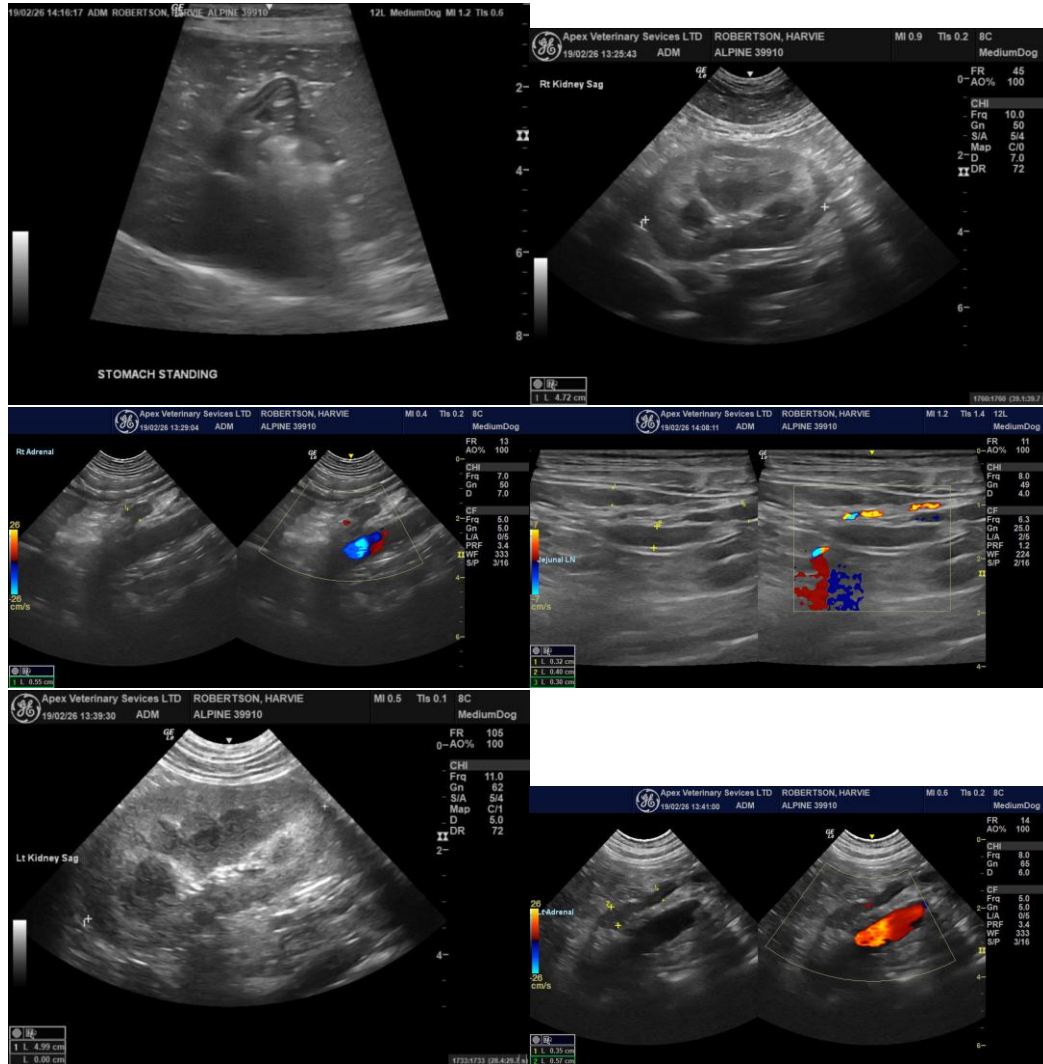
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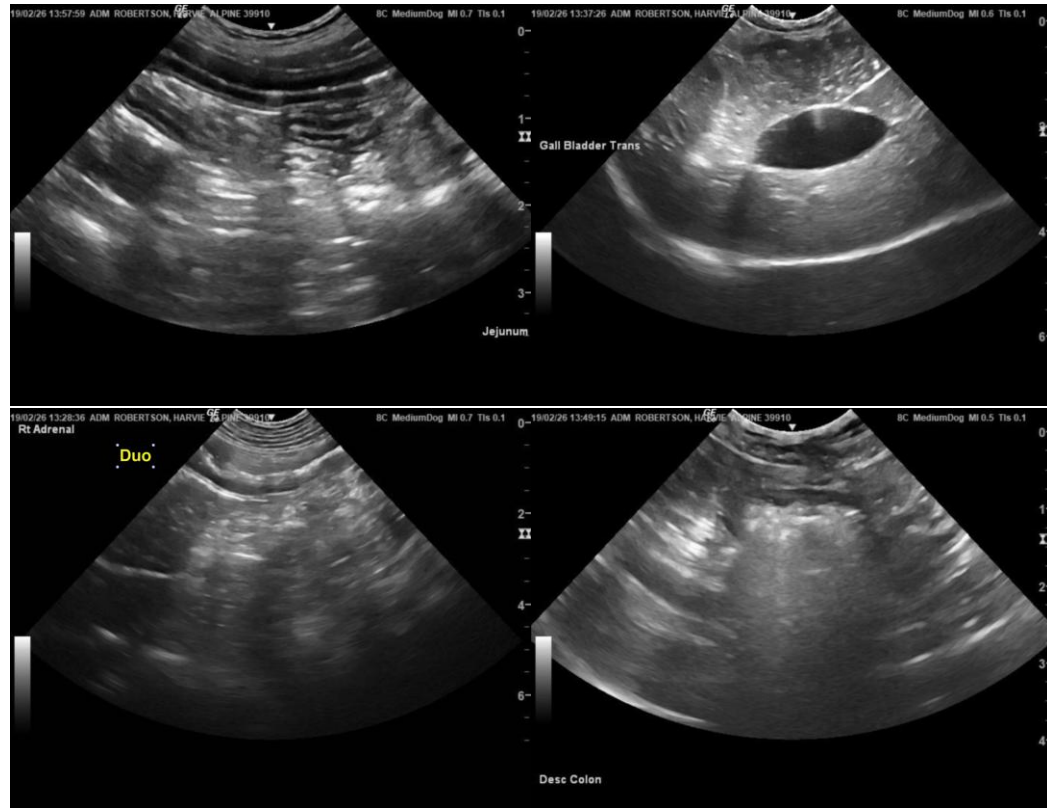
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)

[info@sonopath.com](mailto:info@sonopath.com)