

PATIENT

Josie Gibson

SPECIES

Canine

BREED

Portuguese Water Dog

SEX

FS

AGE

9yr

WEIGHT

31lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Sara Hansen

HOSPITAL NAME

Countryside AC

REFERRING VET

Dr Cox

INVOICE
23958

DATE

02/23/2026

PRESENTING CLINICAL SIGNS

- restless
- eating grass
- r/o: pancreatitis, IBD, foreign body, metabolic disease, open
- mild dental disease
- ABNORMAL Labwork Values
- CBC: neutrophilia, monocytosis
- Chem: Cystatin B >2,500, ALT 926, AST 589, ALP 789, GGT 42, Tbil 0.4
- spec cPL
- Urinalysis: 1.025, ph = 7.5, 2+ protein, inactive sediment
- T4 is wnl at 2.1
- Prothrombin Time & PTT sent out today 2/18

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 was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 5.4 cm in length. The right kidney measured 5.9 cm in length.

Adrenal Glands

The bilateral adrenal glands were normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.57 cm width in the caudal pole. The right adrenal gland measured 0.79 cm width in the caudal pole.

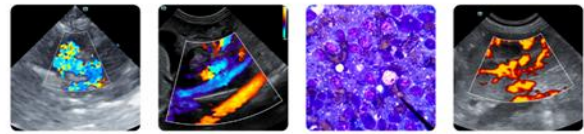
Spleen

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.

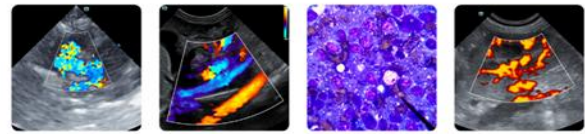
Liver/Gallbladder

Asymmetrical hepatomegaly with multiple indistinctly marginated to variably sized non-homogenous liver masses. An example of a larger liver mass of ~ 7 cm in diameter. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal



PATIENT	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.
Josie Gibson	
SPECIES	The visualized segments of 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.
Canine	Normal visible colon wall layers were present with semi formed feces in lumen.
BREED	Pancreas
Portuguese Water Dog	The pancreas was indistinctly visualized owing to cranial abdomen nodular omentum and increased periadrenal omental artifact.
SEX	Free Abdomen
FS	Perihepatic to cranial abdomen non-homogenous nodular omentum exhibiting potential for indistinctly marginated hypoechoic to swollen non-homogenous omental lymphadenopathy or undifferentiated mass in the cranial abdomen and area of pancreas measuring ~ 10 cm in diameter.
AGE	Concurrent mildly echogenic peritoneal effusion
9yr	ULTRASONOGRAPHIC FINDINGS
WEIGHT	Primary
31lb	<ul style="list-style-type: none">Asymmetrical hepatomegaly with non-homogenous hepatic massesNormal gallbladderNodular perihepatic/ cranial abdomen omentum with potential indistinct hypoechoic/ swollen cranial omental lymphadenopathy or undifferentiated cranial omental or possible pancreatic massEmpty gastrointestinal tractPeritoneal effusion
INTERPRETED BY	Secondary
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<ul style="list-style-type: none">Age related renal changes
IMAGING PERFORMED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Sara Hansen	Unfortunately, pending cytology multicentric neoplastic criteria is met involving the liver, cranial omentum with potential for regional perihepatic omental seeding, regional lymphadenopathy and potential pancreatic pathology. Correlation with pending cytology recommended. Curative surgical options appear precluded. An unfavorable prognosis is indicated.
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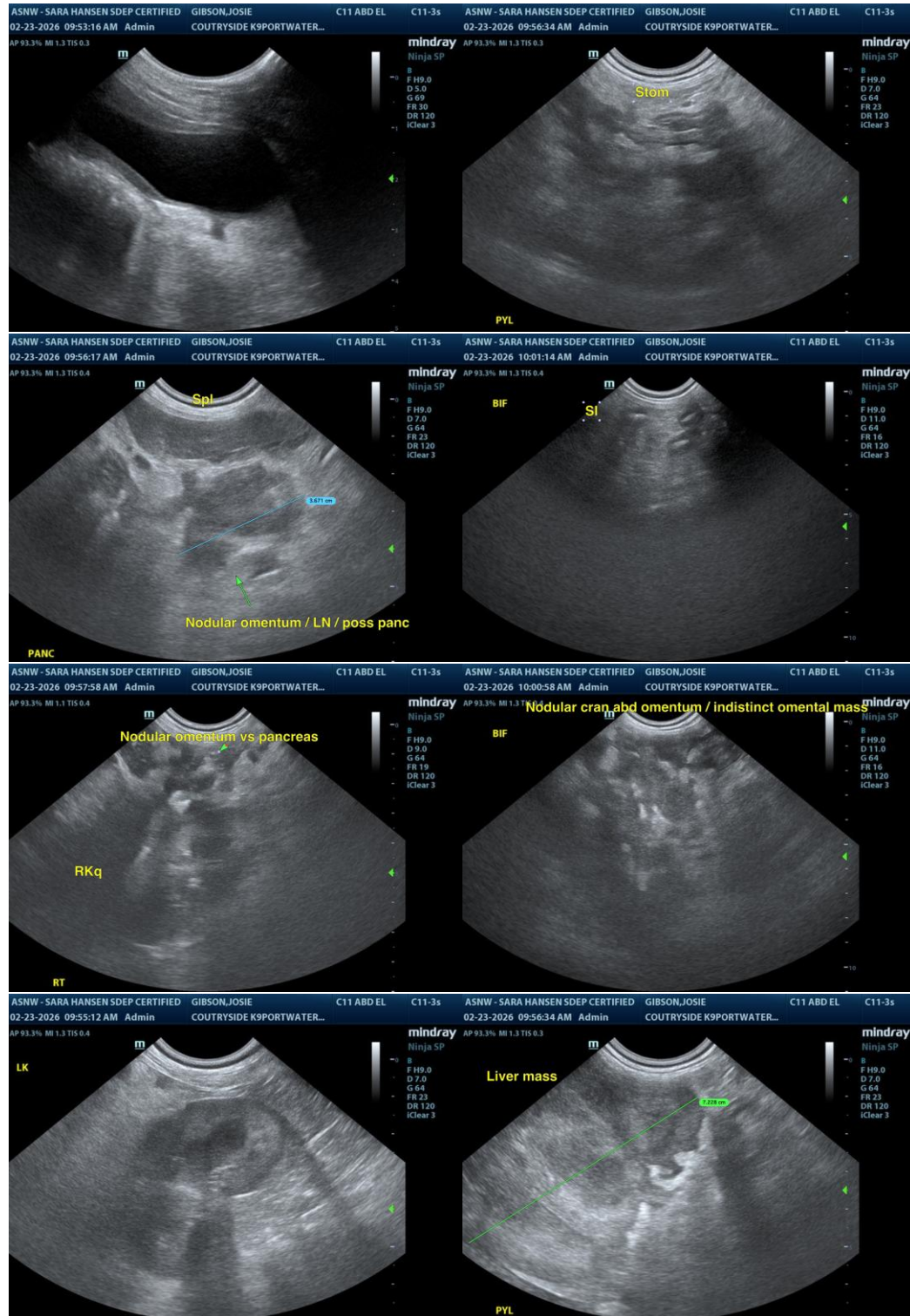
Countryside AC

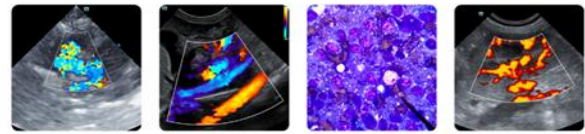
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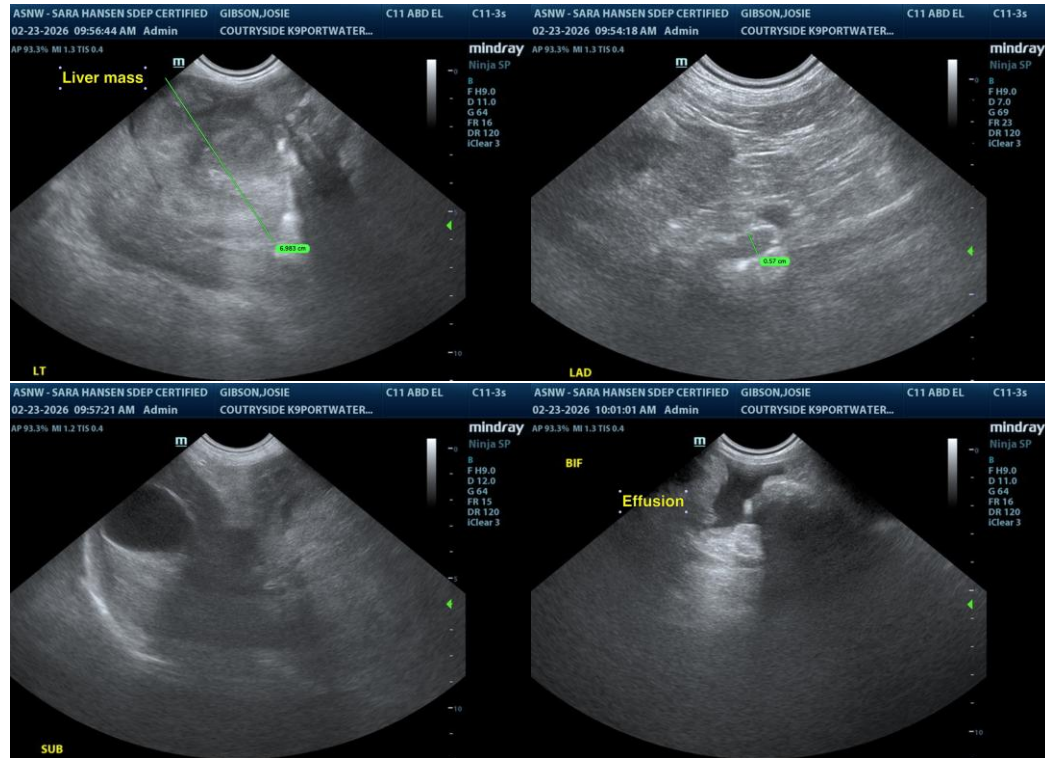
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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