



PATIENT

Cooper Benitez

SPECIES

Canine

BREED

Golden Doodle

SEX

Neutered Male

AGE

13 Years 5 Months

WEIGHT

50 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Ken Leal

HOSPITAL NAME

Long Valley Animal
Hospital

REFERRING VET

Dr. Russell Earl

INVOICE

13609

DATE

02/05/26

PRESENTING CLINICAL SIGNS

- history of splenic tumor (5.75 X 4.28 in head of spleen) on 7/4/25
- Lethargy, diarrhea
- mm light pink, mild anemia.
- HR = 180, T = 101.4
- Hyporexia, weight loss
- Medications: Yunnan Baiyao (2 capsules bid), Entyce (2.3 ml sid)

Abnormal PE/Chem/CBC/UA Results: HCT = 36.1 Hgb = 12.1 MH = 19.9 MCV = 59.2 WBC = 33.43 (neuts = 82.1%. mono = 12.7%) Fecal O/P and Ag = all negative.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

The area of the aortic trifurcation was free of pathology.

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

Normal size and margination was 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. Areas of mild medullary mineral were present bilaterally with mild left kidney pyelectasia and a right kidney caudal medial cortical cyst measuring 1.0 cm in diameter. The left kidney measured 5.8 cm in length. The right kidney measured 6.4 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 0.59 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 0.64 cm width at the caudal pole.

Spleen

The spleen revealed a mid to caudal mildly expansive nonhomogenous splenic mass measuring 6.2 cm in diameter with associated splenic capsule distortion. No evidence of splenic capsule rupture or parenchymal escape. Concurrent mildly expansive separate nonhomogenous mid to cranial splenic nodule was present measuring 1.2 cm in diameter.

Liver & Gallbladder

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.



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The gallbladder was non-distended in size with nonobstructive choleoliths present and nondependent nonorganized bile sediment. The common bile duct was not visualized. No evidence of pericholecystic inflammation.

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Gastrointestinal

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.

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Multiple variably sized intestinal masses were present exhibiting variably thickened hypoechoic wall and loss of segmental intestine mural detail involving the subjective mid abdomen intestinal segments consistent with jejunum and suspect ileum. An example of the largest small intestinal masses measured approximately 6.0 to 7.0 cm in length with a wall width of 1.2 cm. An example of a smaller intestinal mass measured 3.0 to 4.0 cm in length with a wall width of 0.70 cm. Mild associated metabolic or paralytic ileus within the intestinal masses without overt generalized intestinal obstructive criteria.

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The definitively visualized colon exhibited overtly normal intact wall layering and empty lumen.

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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.

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Free Abdomen

Regional mid abdomen peri-intestinal nonhomogenous hyperechoic omentum and minor volume of peritoneal effusion.

Intermittent mildly 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).

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

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ULTRASONOGRAPHIC FINDINGS

- Splenic mass with concurrent separate mildly expansive splenic nodule.
- Multiple intestinal masses.
- Associated peri-intestinal peritonitis and intermittent mesenteric lymphadenopathy.
- Sonographically normal liver.
- Nonobstructive choleoliths and nonorganized bile debris (non-mucocele).
- Chronic renal changes exhibiting mild medullary mineral, left kidney pyelectasia and right kidney cortical cyst.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Multicentric intestinal and splenic neoplastic criteria is met with potential for peri-intestinal omental seeding, reactive lymphadenitis or early metastatic lymphadenopathy. Non-obvious colon involvement is not definitively excluded. Curative surgical options are likely precluded. An unfavorable prognosis is unfortunately indicated.

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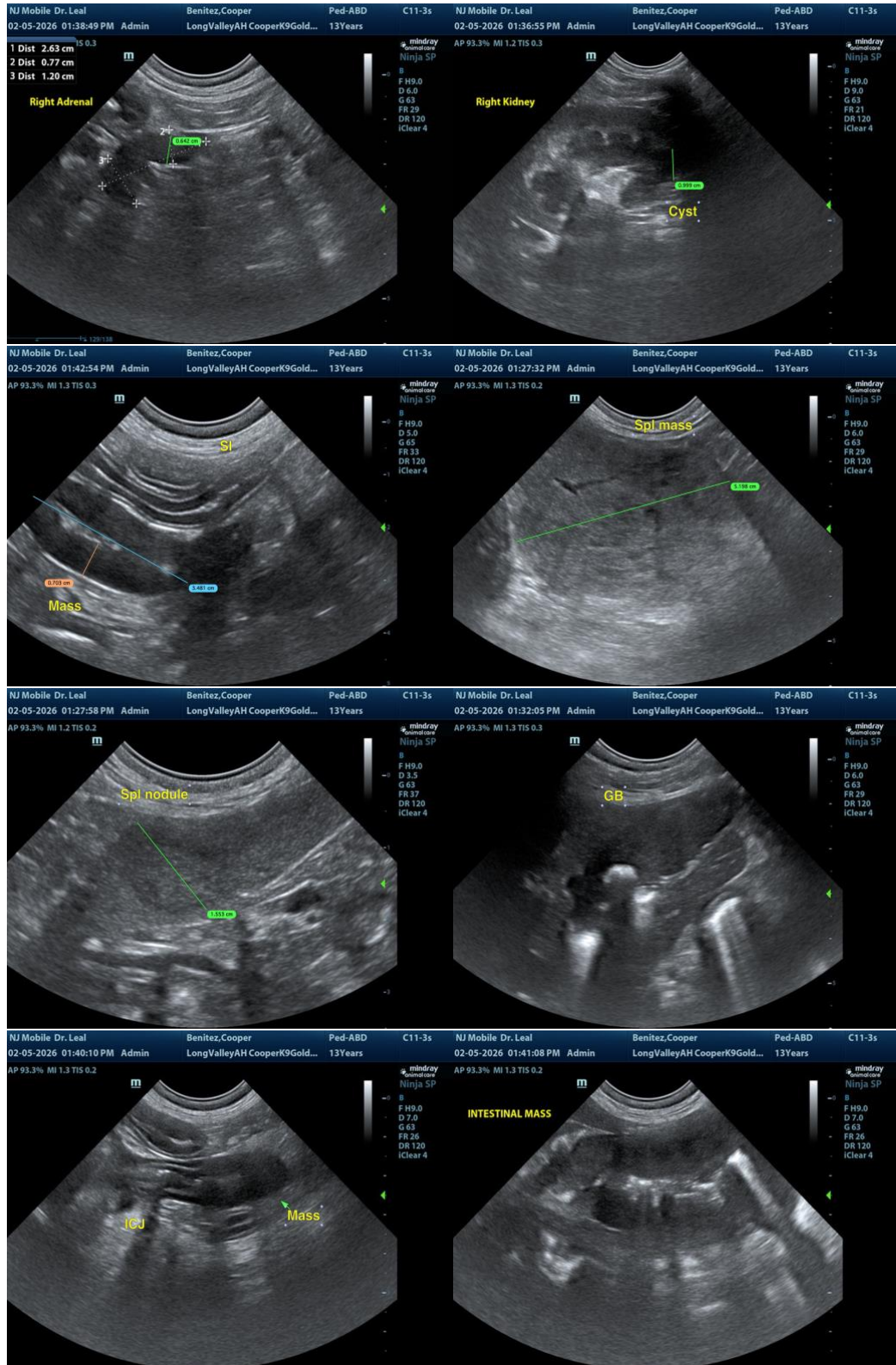
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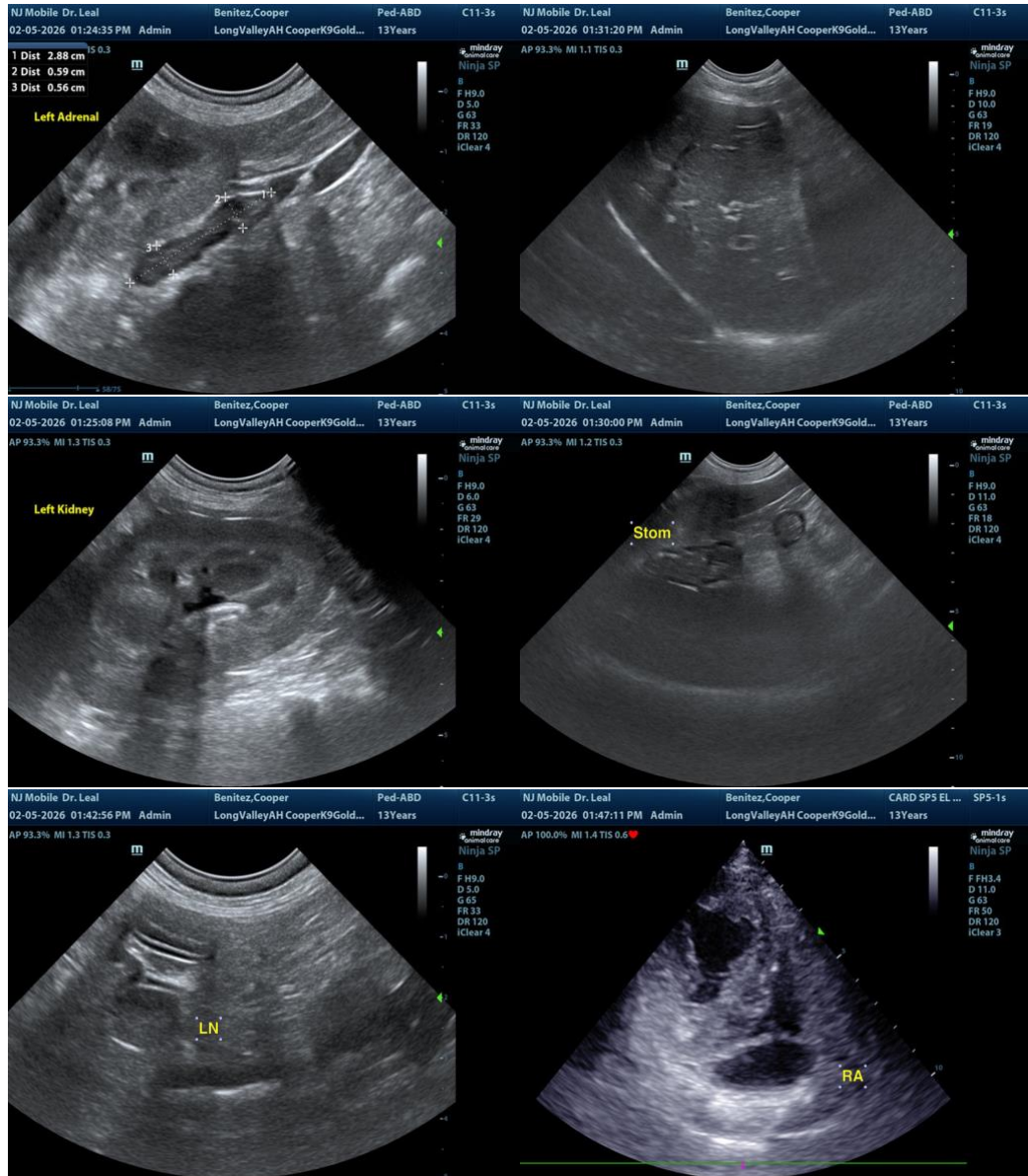
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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