



PATIENT

Zoey Shanley

SPECIES

Canine

BREED

Corgi

SEX

Spayed Female

AGE

5

WEIGHT

23

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

Dr. Maniar

INVOICE

14474

DATE

03/20/26

PRESENTING CLINICAL SIGNS

- anorexia pale gums

Abnormal PE/Chem/CBC/UA Results: Lipase 333

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.

Normal size and margination was 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 4.5 cm in length. The right kidney measured 4.2 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 0.46 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 0.48 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.

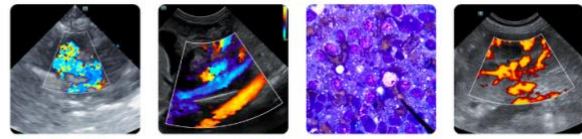
Liver & Gallbladder

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 thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented borderline prominent to mildly thickened wall with a normal wall layer ratio. The lumen of the stomach was empty with mild lumen gas and with no signs of ileus, obstruction or foreign material. The gastric wall measured 0.43 cm wall width.



PATIENT

Zoey Shanley

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material. The duodenum wall measured 0.38 cm wall width. The jejunum wall measured 0.33 cm wall width.

SPECIES

Canine

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

Pancreas

BREED

Corgi

The area of the pancreas was sonographically normal.

Free Abdomen

SEX

Spayed Female

No overt lymphadenopathy or peritoneal effusion was present.

AGE

5

ULTRASONOGRAPHIC FINDINGS

- Borderline thickened empty stomach.
- Sonographically normal empty small intestine.
- Normal area of the pancreas.
- Normal spleen.
- Normal bilateral adrenal glands.

WEIGHT

23

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

Aside from the borderline thickened empty stomach which may suggest mild gastric inflammation, no overt pathology as a definitive cause of the patient's clinical signs. No overt evidence of neoplastic criteria. Low-grade pancreatitis may present sonographically normal and may be suspected if cranial abdomen/subxiphoid discomfort on palpation. Correlation with a spec cPL could be considered. Gastrointestinal support including empirical therapy for mild gastritis and pancreatitis with clinical monitoring is recommended.

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

Dr. Maniar

INVOICE

14474

DATE

03/20/26





PATIENT

Zoey Shanley

SPECIES

Canine

BREED

Corgi

SEX

Spayed Female

AGE

5

WEIGHT

23

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

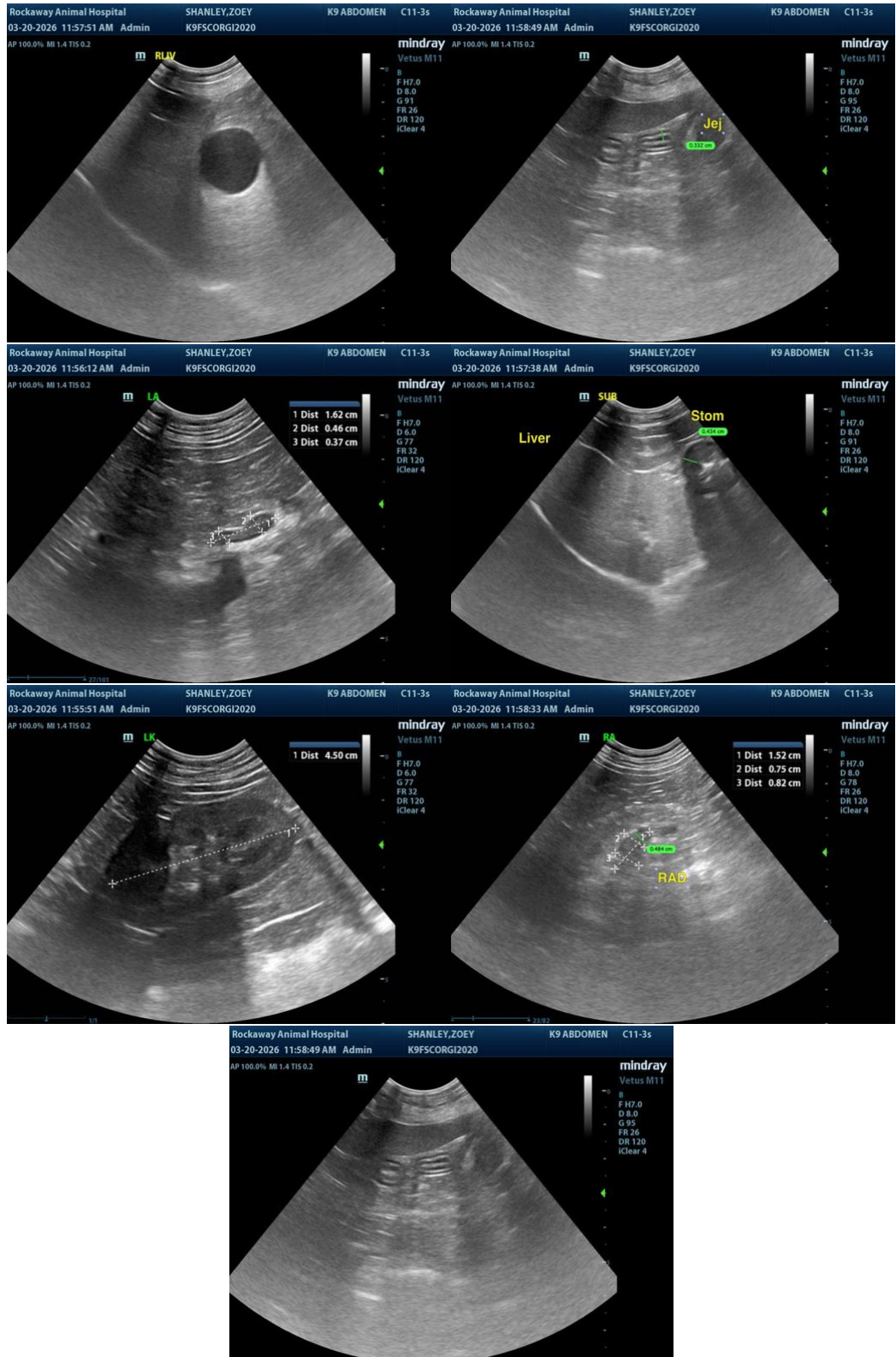
Dr. Maniar

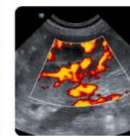
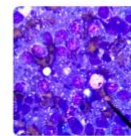
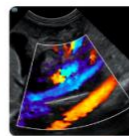
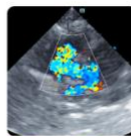
INVOICE

14474

DATE

03/20/26





PATIENT

Zoey Shanley

SPECIES

Canine

BREED

Corgi

SEX

Spayed Female

AGE

5

WEIGHT

23

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

Dr. Maniar

INVOICE

14474

DATE

03/20/26

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