



PATIENT

Dutch McArthur

SPECIES

Canine

BREED

English Lab

SEX

MN

AGE

4yr

WEIGHT

41.5kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield, DVM

HOSPITAL NAME

Sunriver Vet Clinic

REFERRING VET

Lindsay Smith, DVM

INVOICE

24273

DATE

03/23/2026

PRESENTING CLINICAL SIGNS

- patient presented for low energy, decreased interest in food, panting, and being “spacey” six days ago.
- clients report these clinical signs had been present for approximately two weeks
- mild anemia, was noted with no signs of regeneration
- patient returned four days ago, and HCT was slightly improved with mild reticulocytosis.
- today, Owner reports patient is doing much better and almost back to normal. The anemia also appears to be improving.
- Abnormal PE/Chem/CBC/UA Results: – normal physical exam find initial CBC and diagnostics: - HCT 32% - hematuria (likely from cysto) - 4Dx, fecal, Chem all WNL Recheck CBC (4 days ago): - HCT: 34% - mild reticulocytosis CBC (today): - HCT: 35% - PCV: 38%

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 6.2 cm in length. The right kidney measured 6.2 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.54 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 0.70 cm width at the caudal pole.

Spleen

The spleen exhibited subnormal size 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. No visualized masses or nodules were present.

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. 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.



PATIENT

Dutch McArthur

SPECIES

Canine

BREED

English Lab

SEX

MN

AGE

4yr

WEIGHT

41.5kg

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.

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 mechanical/metabolic ileus, obstruction or foreign material.

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 omental masses, overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary

- Subnormal splenic size suggestive of volume contraction
- Normal volume liver
- Normal bilateral kidneys/ adrenal glands
- Normal gastrointestinal tract

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield, DVM

HOSPITAL NAME

Sunriver Vet Clinic

REFERRING VET

Lindsay Smith, DVM

INVOICE

24273

DATE

03/23/2026

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of visceral pathology as a definitive cause of the patient's clinical signs and anemia. A GI panel to include PLI/TLI/Cobalamin/Folate and a screening cortisol level to assess for occult disease may be considered. Three view chest radiographs are recommended if not done to assess for occult thoracic pathology. No evidence of abdominal neoplastic criteria. A CBC pathology review +/- infectious disease serology may be considered.



PATIENT

Dutch McArthur

SPECIES

Canine

BREED

English Lab

SEX

MN

AGE

4yr

WEIGHT

41.5kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Patti Mayfield, DVM

HOSPITAL NAME

Sunriver Vet Clinic

REFERRING VET

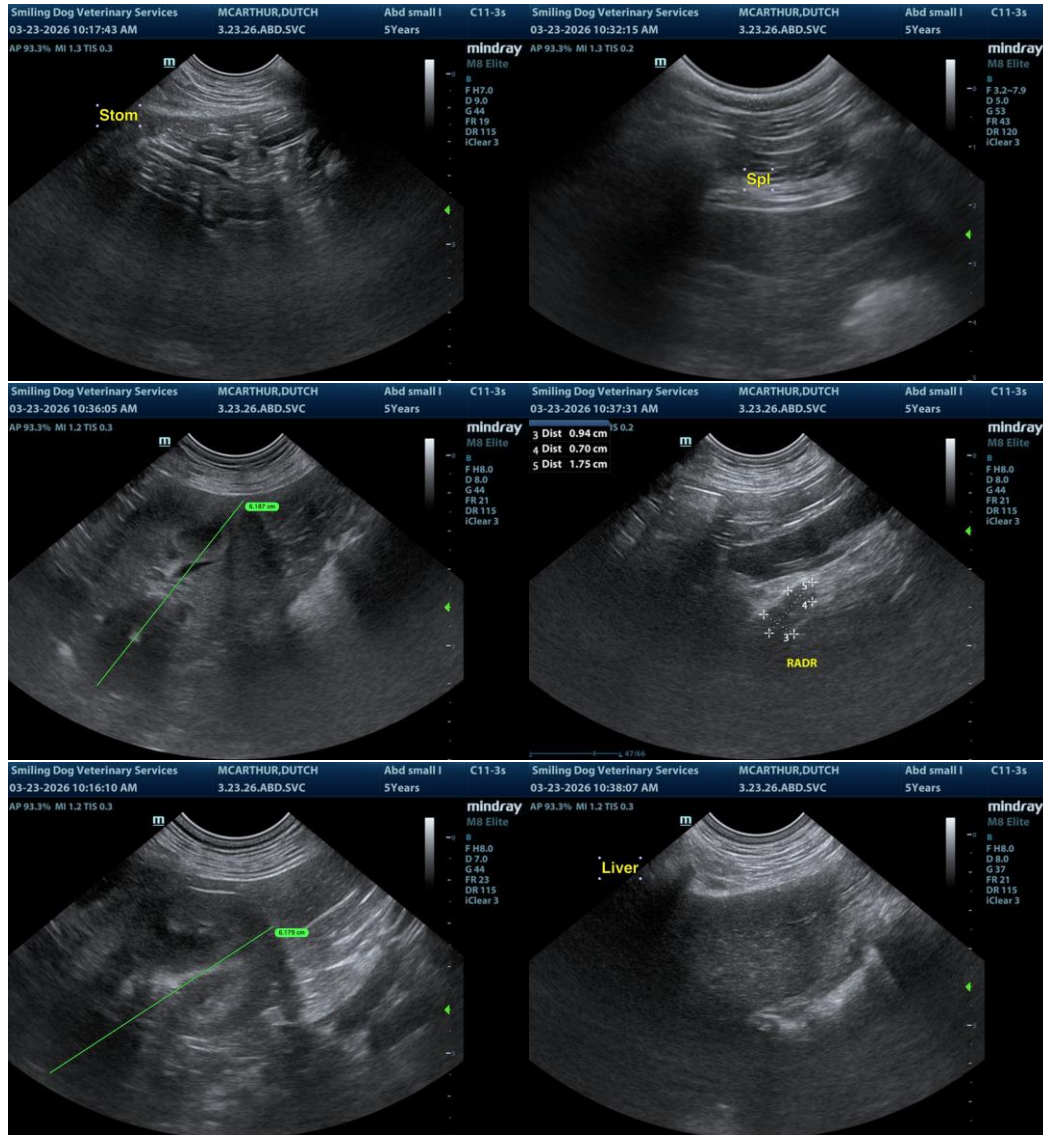
Lindsay Smith, DVM

INVOICE

24273

DATE

03/23/2026





PATIENT

Dutch McArthur

SPECIES

Canine

BREED

English Lab

SEX

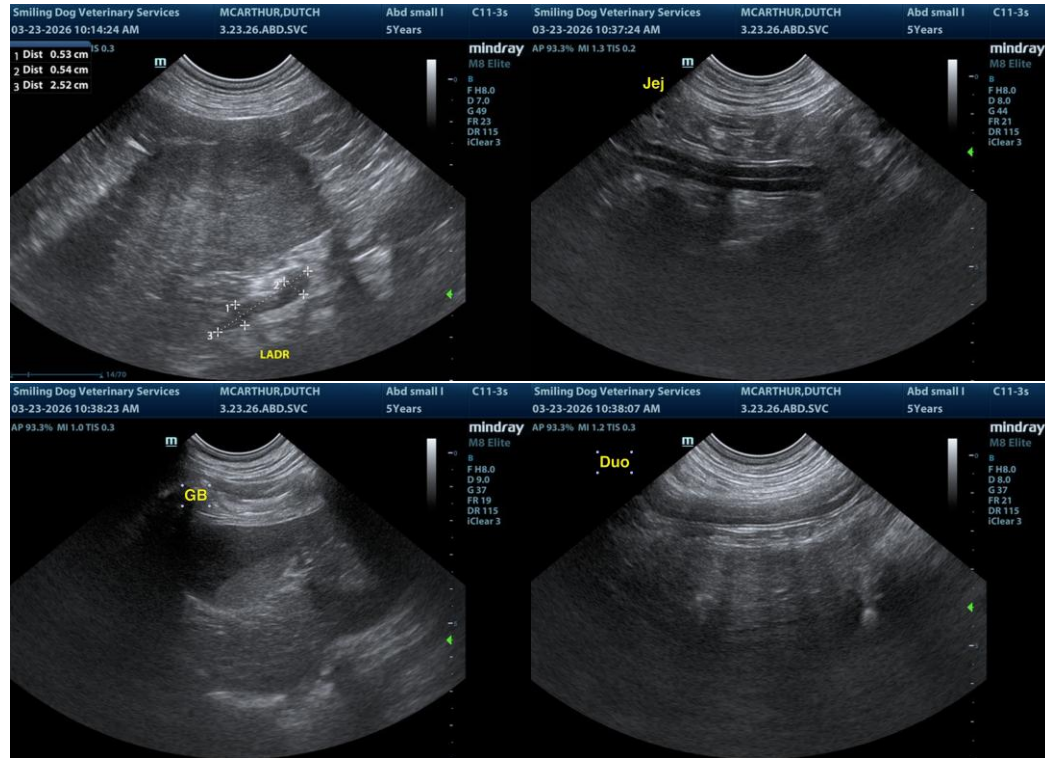
MN

AGE

4yr

WEIGHT

41.5kg



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.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Patti Mayfield, DVM

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)
info@sonopath.com

HOSPITAL NAME

Sunriver Vet Clinic

REFERRING VET

Lindsay Smith, DVM

INVOICE
24273

DATE
03/23/2026