



PATIENT

Zoey Senft

SPECIES

Canine

BREED

Mixed Breed

SEX

FS

AGE

12

WEIGHT

35-40lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Michael Schacher

HOSPITAL NAME

Emergency
Veterinarians of Idaho

REFERRING VET

Tyler Senft

INVOICE

24290

DATE

03/24/2026

PRESENTING CLINICAL SIGNS

History of cutaneous mast cell tumors removed in the past (4 years ago) - no recurrence since

Patient has had progressive cachexia over the last several months after switching food

Abnormal PE/Chem/CBC/UA Results: Bloodwork unremarkable at mass removal (benign) 2 months ago

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was subnormal in size owing to lack of urine distension which prohibited full evaluation of the urinary bladder walls. Subjective mildly thickened urinary bladder wall most notable in the mid to cranial bladder measuring 0.67 cm in width. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Mild 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 definitive urinary bladder mass.

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 5.0 cm in length. The right kidney measured 5.3 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 0.46 cm width at the caudal pole.

The right adrenal gland was asymmetrically enlarged exhibiting non-homogenous hyperechoic parenchyma measuring 3.4 cm x 2.8 cm.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age related remodeling with minor potential for inflammatory or neoplastic disease.

Liver/Gallbladder

Mild subjective hepatomegaly. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to moderate parenchymal remodeling. The hepatic and portal vasculature were normal in appearance without signs of congestion. Normal



PATIENT

Zoey Senft

vascular volume. Intermittent small hyperechoic intraparenchymal nodules were present, an example measured 0.66 cm in diameter. The gallbladder was non-distended in size with thin walls and mild gravity dependent non-organized debris. The cystic and common bile ducts were normal.

SPECIES

Canine

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.

BREED

Mixed Breed

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

Pancreas

SEX

FS

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.

AGE

12

Free Abdomen

Small homogenous perisplenic omental lymph node or possible focal ectopic spleen adjacent to the medial spleen measuring 0.8 cm in diameter.

WEIGHT

35-40lb

No evidence of peritoneal effusion.

ULTRASONOGRAPHIC FINDINGS

Primary

- Right adrenal mass
- Enlarged non-homogenous liver exhibiting small hyperechoic parenchymal nodules
- Age-related spleen
- Focal small perisplenic lymph node vs ectopic spleen -subjective benign
- Non-organized gallbladder debris
- Sonographically normal gastrointestinal tract
- Mild chronic renal changes
- Thickened urinary bladder- lack of urine distention vs potential cystitis, urinary bladder neoplasia considered less likely

INTERPRETED BY

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

IMAGING PERFORMED BY

Michael Schacher

HOSPITAL NAME

Emergency
Veterinarians of Idaho

REFERRING VET

Tyler Senft

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Considerations for the right adrenal mass may include hyperplasia, functional vs non-functional adenoma or tumors such as carcinoma, pheochromocytoma, or other. Correlation with full lab work and UA is recommended. Assuming normal clotting status, hepatic FNA cytology could be considered if evidence of hepatic enzyme elevations and hepatosupportive medications may be beneficial if evidence of cholestasis.

INVOICE

24290

Given progressive cachexia, a GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological / musculoskeletal examination are recommended to assess for or

DATE

03/24/2026



PATIENT

Zoey Senft

SPECIES

Canine

BREED

Mixed Breed

SEX

FS

AGE

12

WEIGHT

35-40lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Michael Schacher

HOSPITAL NAME

Emergency
Veterinarians of Idaho

REFERRING VET

Tyler Senft

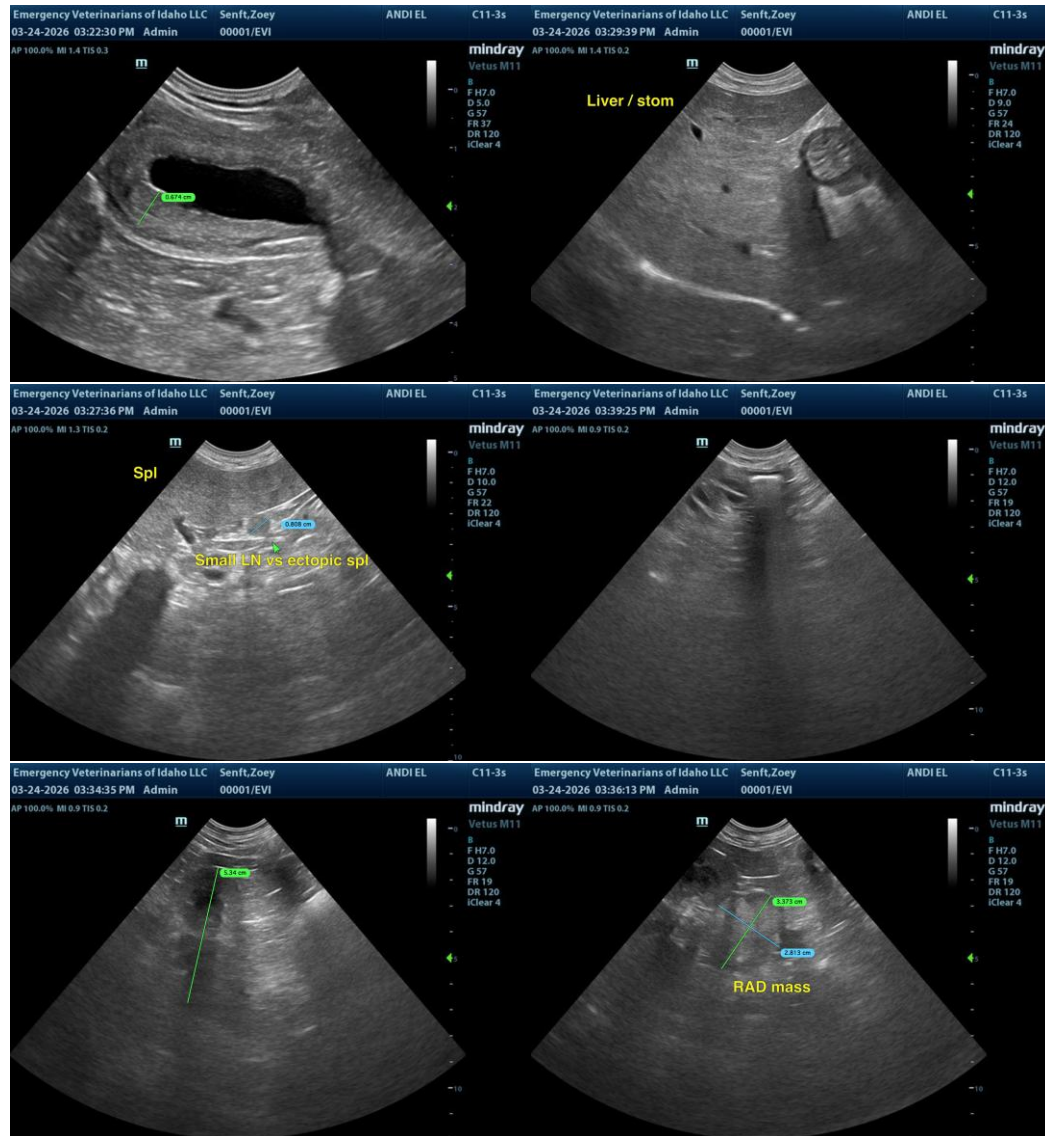
INVOICE

24290

DATE

03/24/2026

rule out occult disease which may cause weight loss. A full adrenal workup with LDDST may be considered if USG is <1.020 or if clinical signs consistent with Cushing's syndrome are present or arise.





PATIENT

Zoey Senft

SPECIES

Canine

BREED

Mixed Breed

SEX

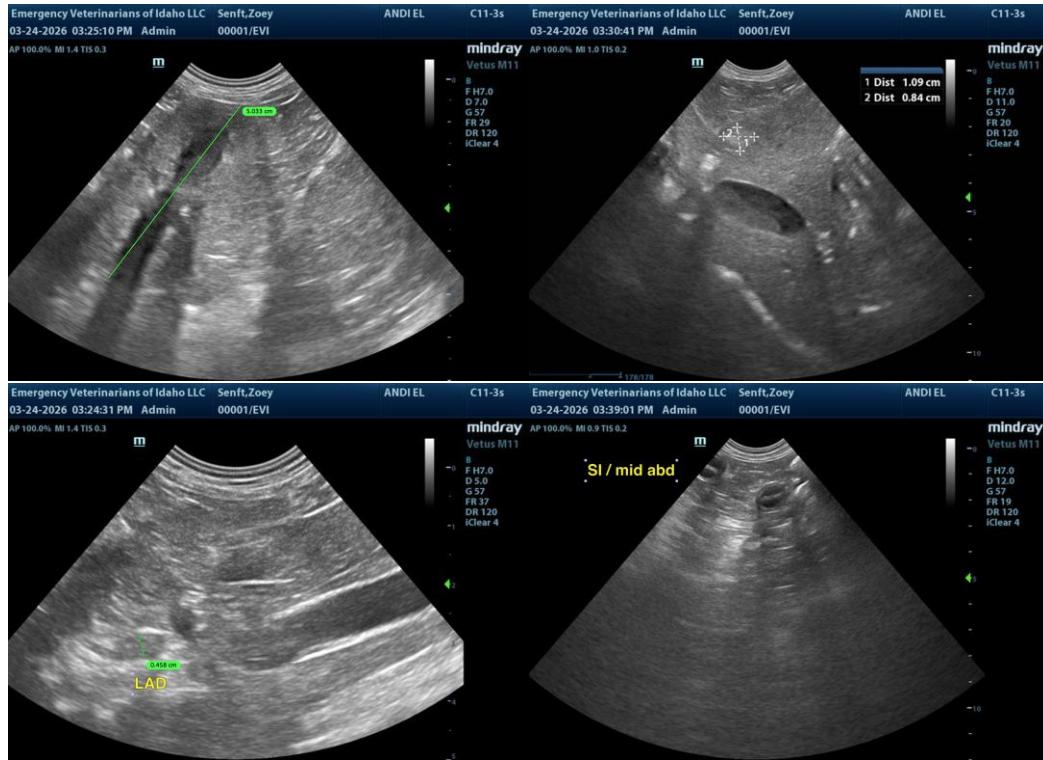
FS

AGE

12

WEIGHT

35-40lb



INTERPRETED BY

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

IMAGING PERFORMED BY

Michael Schacher

HOSPITAL NAME

Emergency Veterinarians of Idaho

REFERRING VET

Tyler Senft

INVOICE

24290

DATE

03/24/2026

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