



PATIENT

Bonnie Sepulveda

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spayed

AGE

10y

WEIGHT

8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Julissa Diaz, LVT

HOSPITAL NAME

Centro Veterinario del Norte

REFERRING VET

Carlos del Toro Garcia,
DVM

INVOICE

13342

DATE

3/26/26

PRESENTING CLINICAL SIGNS

History:

- Patient presented as referral for abdominal ultrasound. Referred for marked neutrophilia and distended abdomen. Referring vet was unable to interpret abdominal radiographs, due to fluid in the abdomen. No heart murmur reported at the time.

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 changes 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 was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. The left kidney measured 3.2 cm in length. The right kidney exhibited mild pyelectasia. The right kidney measured 3.7 cm in length.

Adrenal Glands

The left adrenal gland was indistinctly visualized exhibiting overtly normal size, position and shape subjectively measuring 0.46 cm width at the caudal pole. The right adrenal gland was indistinctly visualized exhibiting overtly normal size, position and shape subjectively measuring 0.39 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

The liver exhibited moderate to marked hepatomegaly with normal vascular volume. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was distended in size with normal wall and without evidence of inflammation or edema. The gallbladder contained moderate, hyperechoic to shadowing, non-organized content along with anechoic bile. The common bile duct was not visualized.



PATIENT

Bonnie Sepulveda

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spayed

AGE

10y

WEIGHT

8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Julissa Diaz, LVT

HOSPITAL NAME

Centro Veterinario del Norte

REFERRING VET

Carlos del Toro Garcia,
DVM

INVOICE

13342

DATE

3/26/26

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild, echogenic, non-shadowing ingesta without signs of obstruction to pyloric outflow.

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 colon exhibited intact normal visible wall and contained generalized semi-formed to soft fecal matter and lumen gas. Assessment of colon distention not always accurate with ultrasound.

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 overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Moderate to marked, non-congested hepatomegaly
- Distended gallbladder with non-organized, shadowing debris
- Normal gastrointestinal tract with mild, non-shadowing gastric ingesta – consistent with food echogenicity
- Generalized semi-formed to soft fecal matter in colon with possible colon distention
- Chronic renal changes with mild right kidney pyelectasia
- Overtly normal adrenal glands

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of abdominal masses or neoplastic/peritonitis criteria. A definitive cause of the neutrophilia was not obvious. The liver may indicate vacuolar or cholestatic hepatopathy, inflammatory disease, hyperplasia with occult hepatic neoplasia thought less likely. Correlation with hepatic enzyme levels is recommended. Hepato-supportive medications with sonographic monitoring of the gallbladder if progressive cholestasis is recommended. Cholecystectomy may be indicated if progressive hepatopathy, cholestasis, cranial abdomen/subxiphoid discomfort on palpation or gastrointestinal signs in conjunction with persistent neutrophilia.



PATIENT

Bonnie Sepulveda

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spayed

AGE

10y

WEIGHT

8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Julissa Diaz, LVT

HOSPITAL NAME

Centro Veterinario del Norte

REFERRING VET

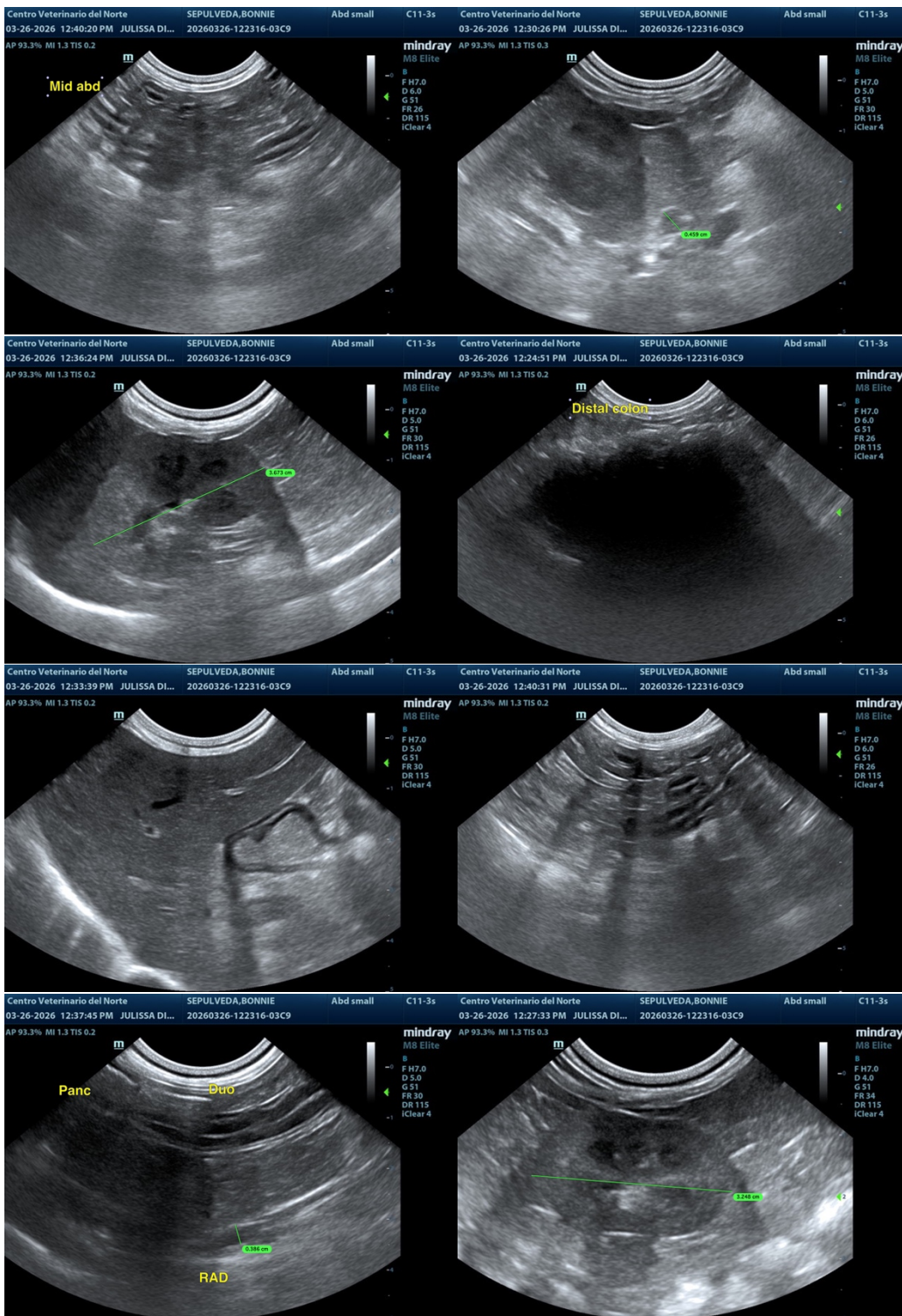
Carlos del Toro Garcia,
DVM

INVOICE

13342

DATE

3/26/26





PATIENT

Bonnie Sepulveda

SPECIES

Canine

BREED

Chihuahua

SEX

Female Spayed

AGE

10y

WEIGHT

8 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Julissa Diaz, LVT

HOSPITAL NAME

Centro Veterinario del Norte

REFERRING VET

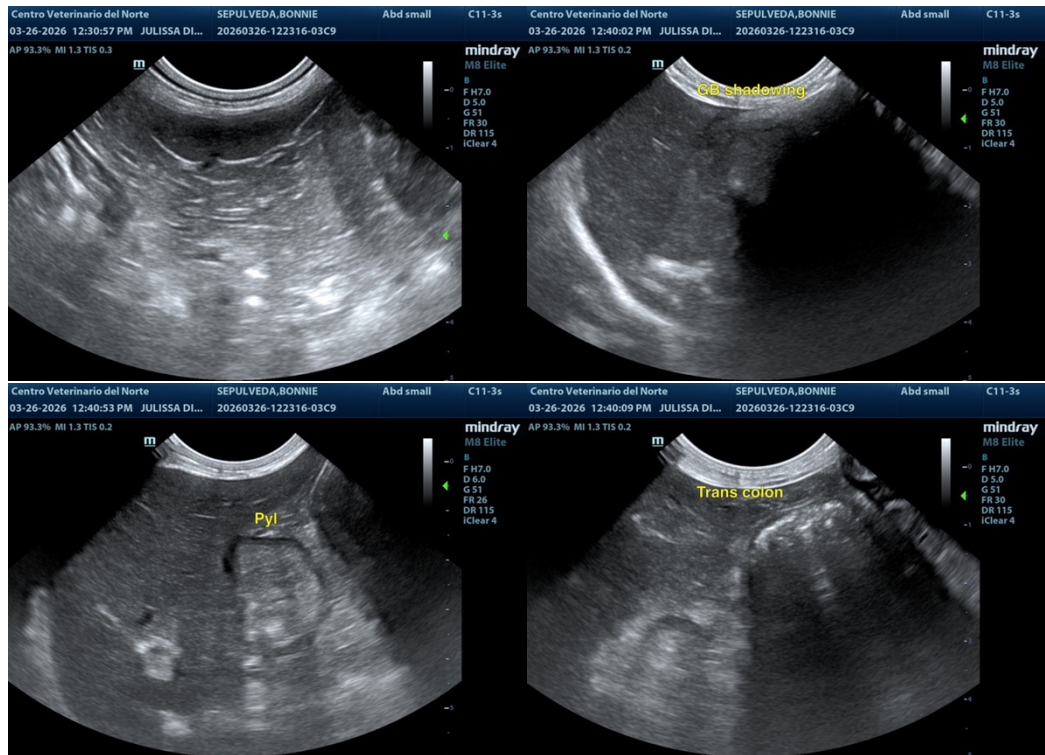
Carlos del Toro Garcia,
DVM

INVOICE

13342

DATE

3/26/26



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