



PATIENT

Splinter Cahoon

SPECIES

Canine

BREED

Mixed

SEX

MN

AGE

12.5Y

WEIGHT

14lbs

PRESENTING CLINICAL SIGNS

- inappropriately urination

Abnormal PE/Chem/CBC/UA Results: USG: 1.018, ALK: 312, LDDST: pre:5, 4hr: 1.2, 8hr:0.9

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. Nondistended with urine 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 residual prostate appeared normal and free of pathology measuring 0.83 cm in diameter.

No evidence of pathology in the area of the aortic trifurcation.

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. Pinpoint medullary mineral was present. No evidence of pelvic dilation was present. The left kidney measured 4.2 cm in length. The right kidney measured 4.3 cm in length.

Adrenal Glands

The left adrenal gland measured borderline enlarged at the caudal pole at 0.59 cm width. A nonhomogeneous mildly hyperechoic nonmineralized nodule was present in the cranial left adrenal gland. The nodule did not exhibit signs of vascular invasion. The nodule measured 0.88 x 0.71 cm in diameter.

The right adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The right adrenal gland measured mildly enlarged at the cranial pole at 1.1 cm width and borderline prominent at the caudal pole measuring 0.55 cm width.

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Multiple, intermittent, well-defined, symmetrical, hyperechoic nodules were present. 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 or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas. An example of a nodule measured 0.76 cm diameter.

Liver/ Gallbladder

The liver presented enlarged in size. 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.

INTERPRETED BY

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

IMAGING PERFORMED BY

Rodriguez

HOSPITAL NAME

Foxfield Veterinary
Services

REFERRING VET

Rodriguez

INVOICE

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The gallbladder was non-distended in size with thin walls and mild nonorganized gallbladder debris. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of retained ingesta, fluid, 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 ileus, obstruction, or foreign material.

Normal visible colon wall layers were present with 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 overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Normal urinary bladder, residual prostate, and visible proximal urethra.
- Mild chronic renal changes.
- Bilateral borderline adrenomegaly exhibiting cranial left adrenal nodule and mildly enlarged cranial right adrenal gland.
- Benign splenic nodules – consistent with myelolipomas.
- Benign hepatopathy.
- Nonorganized gallbladder debris (nonmucocele).

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Empirical therapy for Cushing's syndrome warranted if concurrent clinical signs and based on LDDST. Screening urine culture and sensitivity may be considered if not already done.

The adrenal glands may indicate benign hyperplasia. Functional vs nonfunctional adenomatous change with emerging unilateral or bilateral adrenal tumors thought less likely yet not excluded. Sonographic monitoring of the adrenal glands is recommended.

Hepatosupportive medications may prove beneficial.



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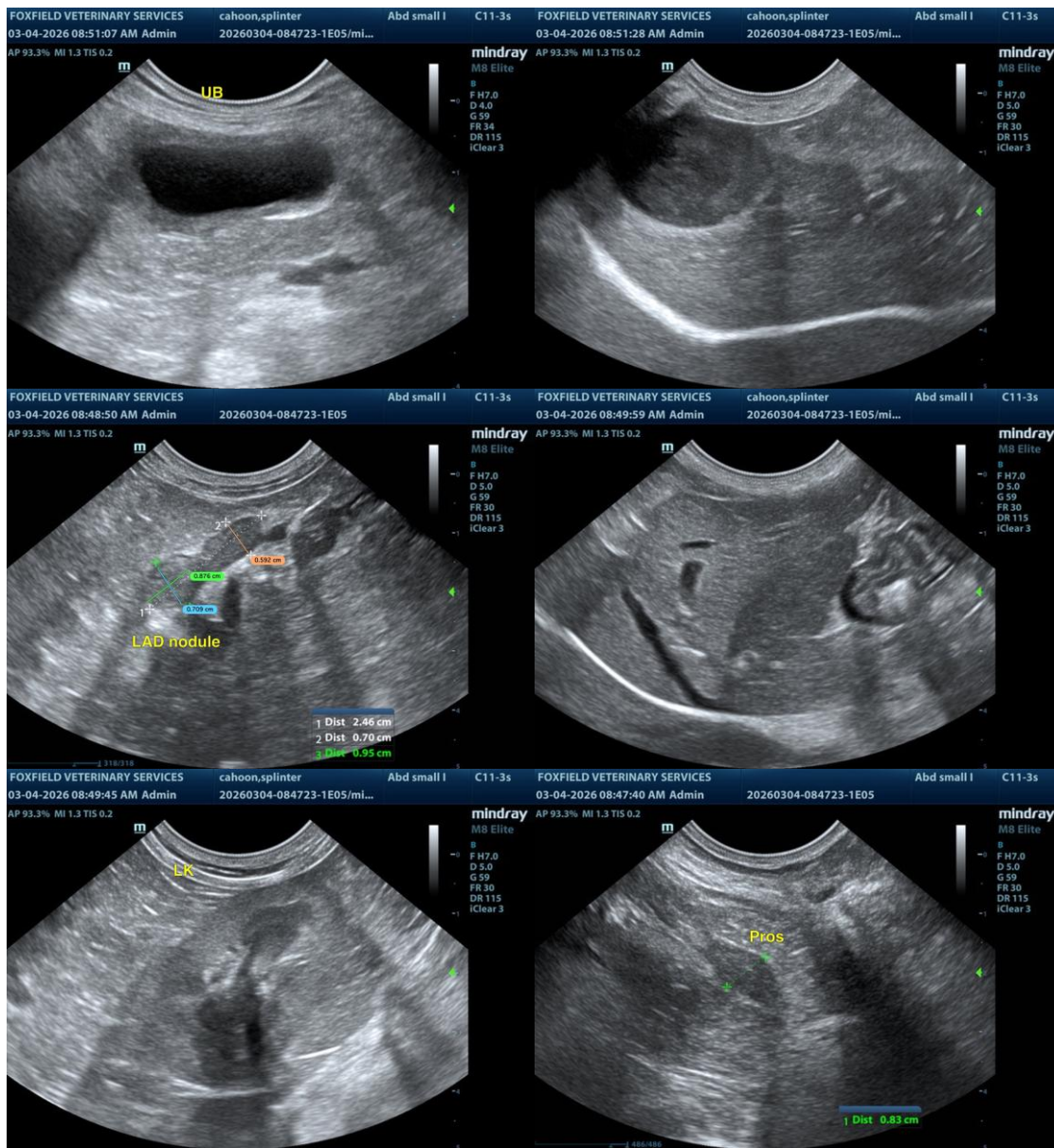
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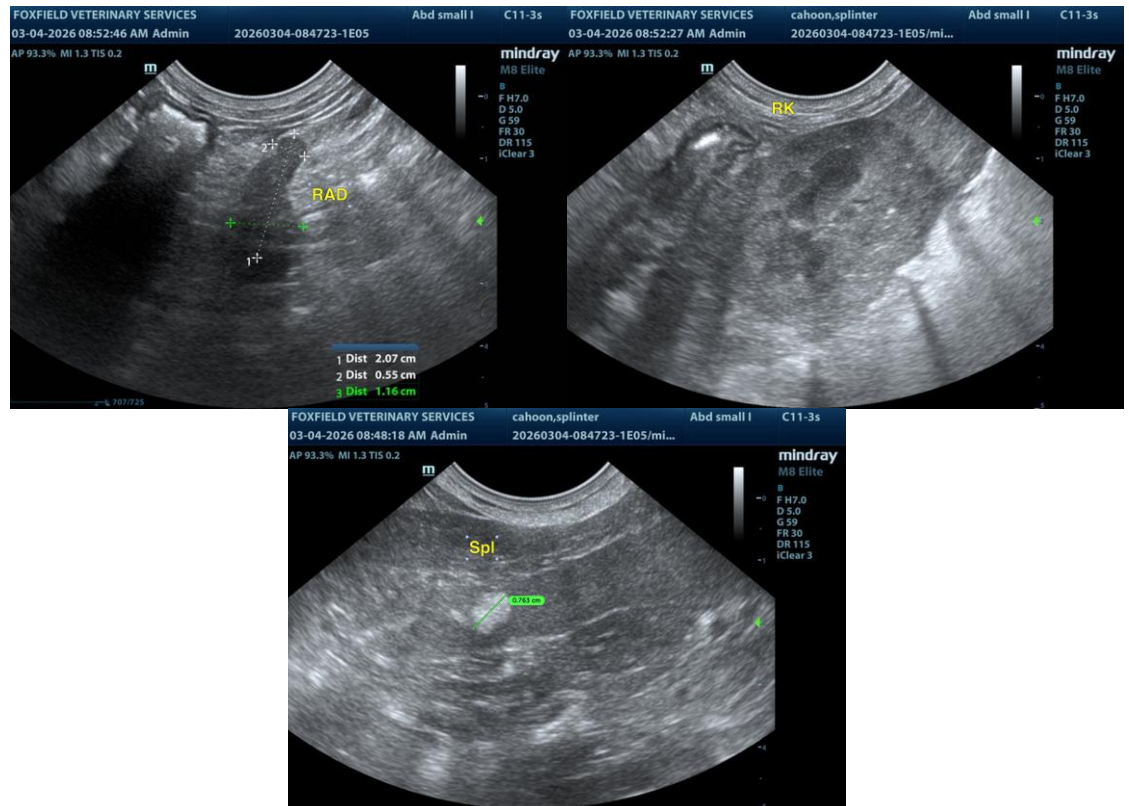
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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