

PATIENT

Cyrus Cocks

SPECIES

Canine

BREED

German Shorthair
Pointer

SEX

Neutered Male

AGE

2 Years

WEIGHT

22 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Patti Mayfield
DVM

HOSPITAL NAME

Broken Top Veterinary
Clinic

REFERRING VET

Dr. Terra McSwain
DVM

INVOICE

14101

DATE

03/05/26

PRESENTING CLINICAL SIGNS

- Presenting Complaint: Cyrus presents for weight loss and elevated SDMA
- Patient History: Client reports multiple dogs have had diagnoses of giardia

Abnormal PE/Chem/CBC/UA Results: Physical exam: - Thin, BCS: 3/9 Diagnostics: 3/1/2026: - CBC: Mild leukocytosis with WBC 18.0, neutrophils 14.78, monocytes 1.08 - Chemistry: SDMA 97 (H) [0-14], BUN and creatinine normal, potassium 3.5 (L), sodium potassium ratio 43, total protein 5.3 [5.5-7.5], globulins low normal at 2.6 - Urinalysis: Pale yellow, clear, USG 1.022, pH 5.5, inactive sediment, mild blood in urine with 10 RBC/hpf - T4 and free T4: Normal - SNAP 4Dx: Negative for all four diseases - Fecal O&P: Negative for all parasites - Pending diagnostics: - Giardia test - Cancer diagnostic test to IDEXX - GI panel to IDEXX - Three view chest radiographs - Liquid chromatography mass spec SPEC to IDEXX

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 residual prostate appeared normal and 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 7.0 cm in length. The right kidney measured 7.1 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 0.60 cm width at the caudal pole.

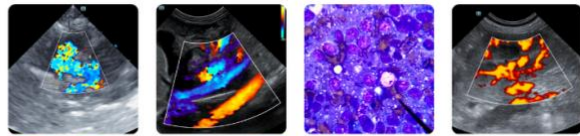
The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.75 cm width at the caudal pole.

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 with mild evidence of hepatic congestion.



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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 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 contained segmental mild nonshadowing ingesta/chyme.

Normal visible colon wall layers were present with soft fecal matter.

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

Intermittent mild to variably prominent primarily homogenous medial iliac and mesenteric nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). Scant pockets of peritoneal effusion and normal omental echogenicity.

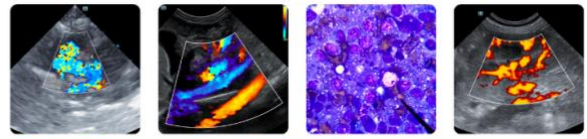
ULTRASONOGRAPHIC FINDINGS

- Sonographically normal gastrointestinal tract/colon with mild nonshadowing intestinal ingesta/chyme and soft fecal matter in colon.
- Normal area of the pancreas.
- Normal bilateral kidneys/adrenal glands.
- Scant peritoneal effusion.
- Normal mildly congested liver.
- Intermittent mild mesenteric/medial iliac lymphadenopathy- most suggestive of benign criteria i.e. mild reactive hyperplasia or less likely lymphadenitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Correlation with pending diagnostics is recommended. No evidence of gastroenterocolic or additional abdominal visceral pathology as a definitive cause of the patient's weight loss. The mild congested liver and scant peritoneal effusion may be secondary to non-reported sedation, i.e. Dexdomitor given normal thoracic radiographs and normal albumin level.

Correlation with history is recommended. No evidence of neoplastic criteria. Occult Addison's disease is considered less likely given evidence of stress, leukogram, and normal adrenal glands. Assessment of caloric plain or for potential competitive eating environment may be considered if clinically indicated.



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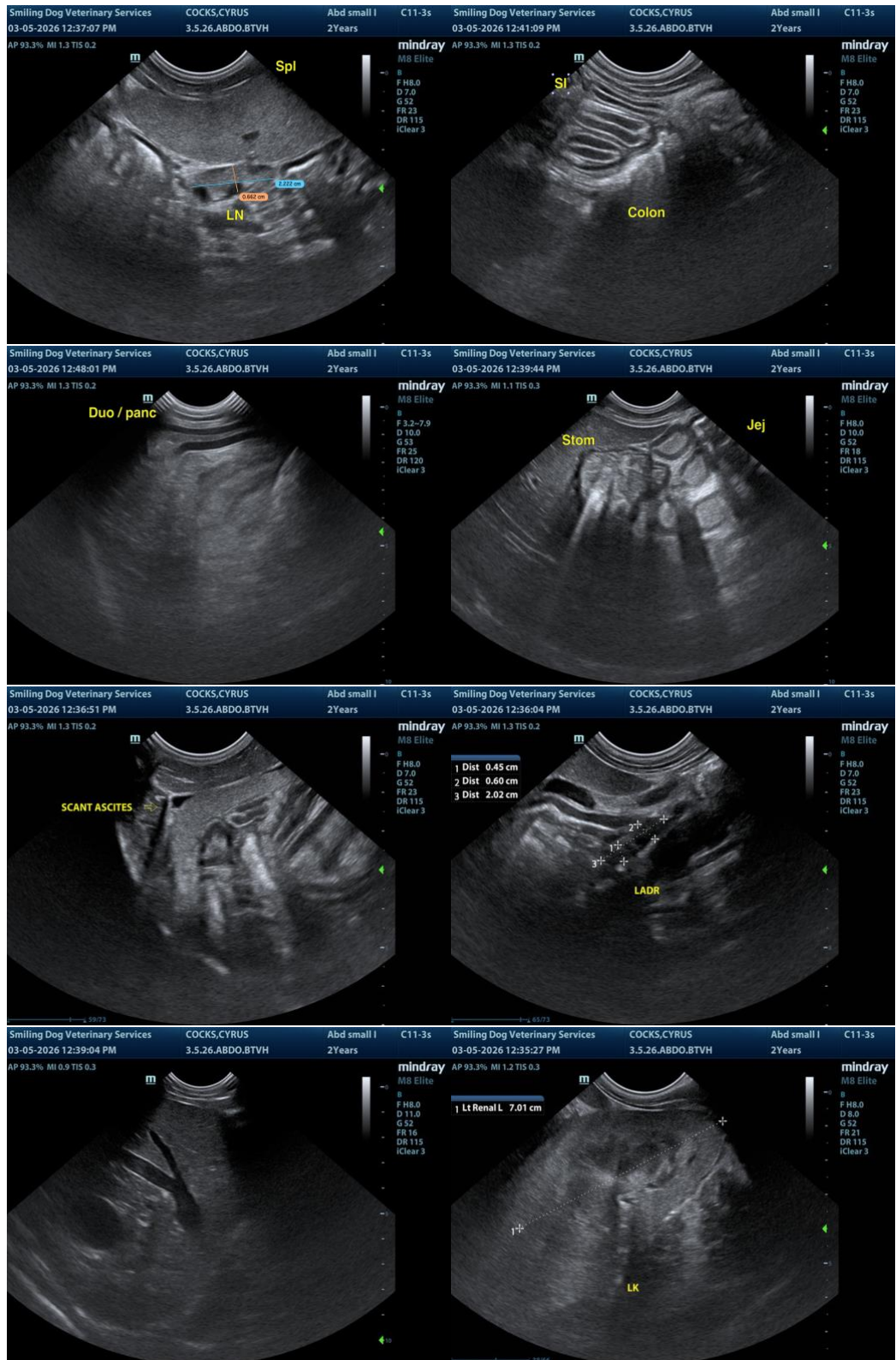
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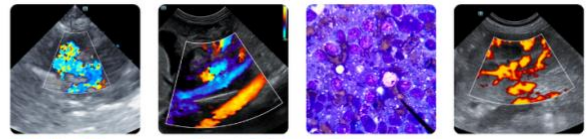
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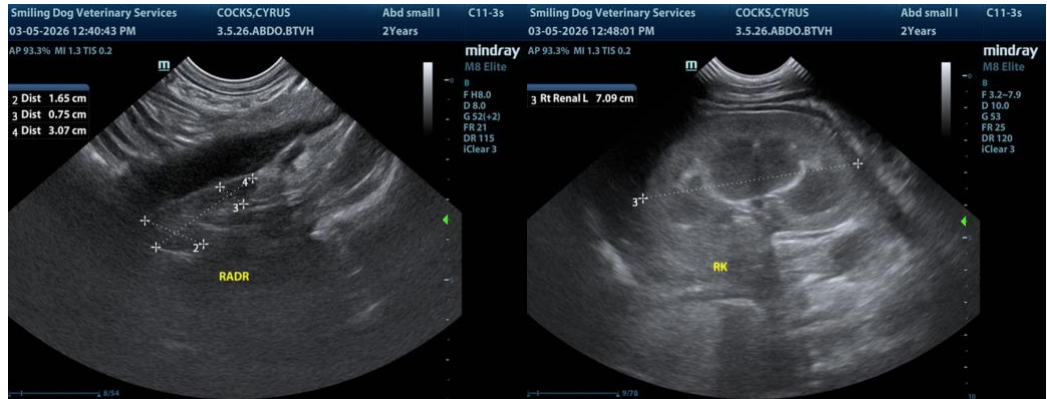
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

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