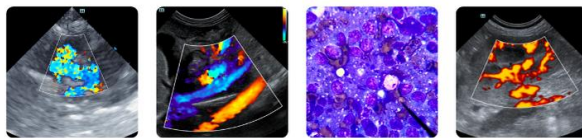




<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Charlotte McMahon	re check prev u/s 3/30 , has vomited more wrappers since last u/s
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
K9	<i>Urinary System</i>
<b>BREED</b>	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.
Lab Mix	No evidence of pathology in the area of the aortic trifurcation.
<b>SEX</b>	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 6.0 cm in length. The right kidney measured 6.0 cm in length.
FS	<i>Adrenal Glands</i>
<b>AGE</b>	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.43 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 0.48 cm width at the caudal pole.
9	<i>Spleen</i>
<b>WEIGHT</b>	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.
48.8	<i>Liver/ Gallbladder</i>
<b>INTERPRETED BY</b>	The liver was subjectively normal in size, structure, and contour. Normal hepatic vascular volume was present. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. 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.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	<i>Gastrointestinal</i>
<b>IMAGING PERFORMED BY</b>	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of persistent shadowing gastric content.
Jenn	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was generalized empty without evidence of mechanical/metabolic ileus or visualized shadowing content to the level of the colon.
<b>HOSPITAL NAME</b>	Normal visible colon wall layers were present with formed feces in lumen.
Rockaway Animal Hospital	
<b>REFERRING VET</b>	
Dr. Maniar	
<b>INVOICE</b>	
74418	
<b>DATE</b>	
4-1-26	



**PATIENT**

**Pancreas**

Charlotte McMahan

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.

**SPECIES**

**Free Abdomen**

K9

No overt lymphadenopathy or peritoneal effusion was present.

**BREED**

**ULTRASONOGRAPHIC FINDINGS**

Lab Mix

- Empty gastrointestinal tract.
- Normal area of the pancreas.

**SEX**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

FS

**AGE**

No evidence of gastrointestinal obstructive pattern or persistent strongly shadowing gastric ingesta. No indication for surgical intervention. Continued gastrointestinal support and monitoring for clinical and labwork signs which may suggest toxicity is recommended.

9

**WEIGHT**

48.8

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway Animal  
Hospital

**REFERRING VET**

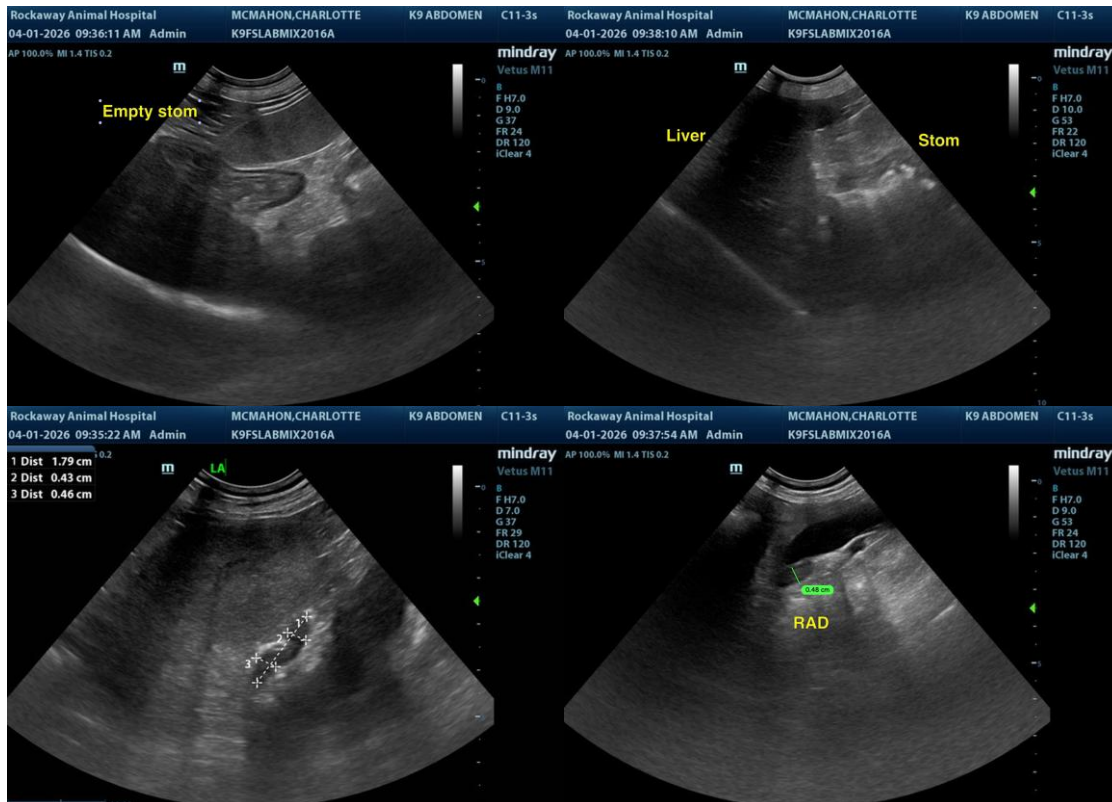
Dr. Maniar

**INVOICE**

74418

**DATE**

4-1-26





## PATIENT

Charlotte McMahon

## SPECIES

K9

## BREED

Lab Mix

## SEX

FS

## AGE

9

## WEIGHT

48.8

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway Animal  
Hospital

## REFERRING VET

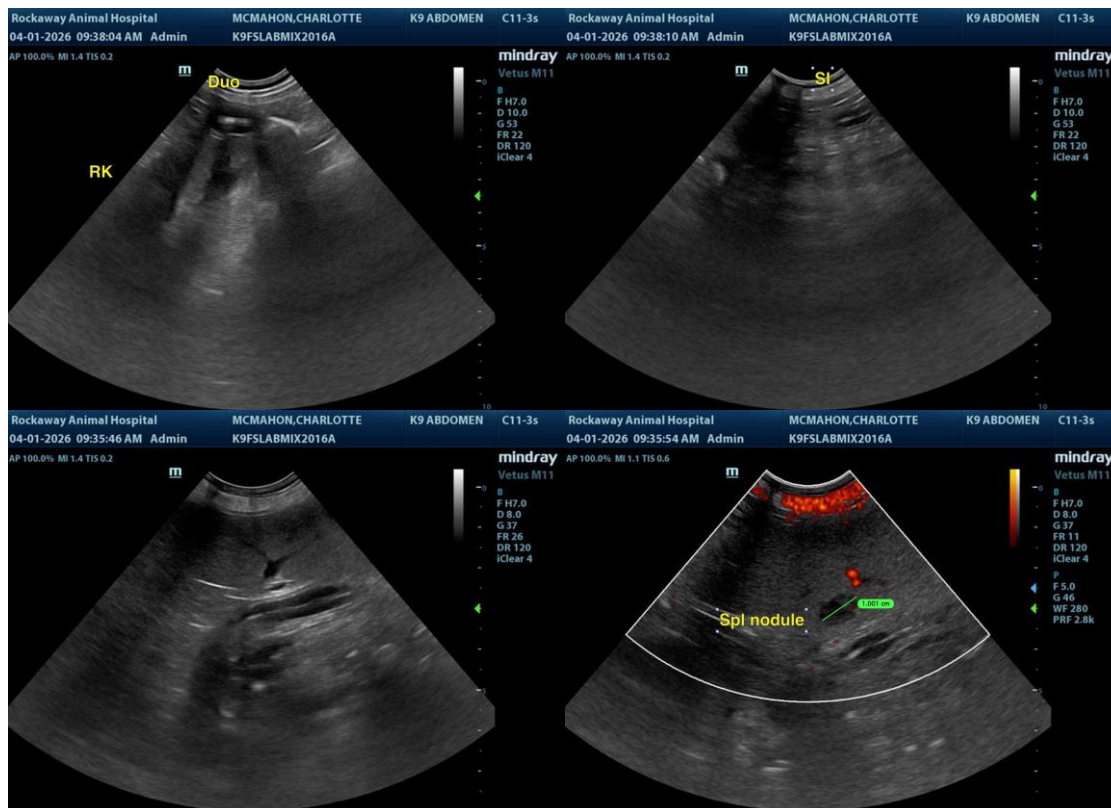
Dr. Maniar

## INVOICE

74418

## DATE

4-1-26



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](mailto:info@sonopath.com)