



**PATIENT PRESENTING CLINICAL SIGNS**

Wyatt Wilson Abnormal lung pattern, lung crackles, new murmur, concern for cranial abdominal mass

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine **Urinary System**

**BREED** The urinary bladder was mildly subnormal in size owing to a lack of moderate urine distention. No overt evidence of urinary bladder mural pathology was noted. Mild anechoic urine was present without evidence of sediment or calculi.

Great Dane

**SEX** No overt pathology was noted in the area of the residual prostate.

MN The area of the aortic trifurcation was free of pathology and without evidence of medial iliac or sublumbar lymphadenopathy.

**AGE** 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 8.7 cm in length. The right kidney measured 8.5 cm in length.

**WEIGHT**

118

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 3.4 cm length x 0.56 width at the caudal pole. The right adrenal gland was not definitively visualized owing to patient size. No overt or obvious pathology was noted in the area of the right adrenal gland.

**INTERPRETED BY**

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

**Spleen**

The spleen was mildly enlarged yet maintained a finely textured and homogenous parenchyma and symmetrical capsule contour. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Normal splenic vascularity was noted. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
 ARDMS/RVT

**HOSPITAL NAME**

Animal Care Center of  
 the Poconos

**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 without signs of hepatic vascular congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**REFERRING VET**

Dr. Spisak

**INVOICE**

13691

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained variably echogenic ingesta exhibiting mild progressive acoustic shadowing. The stomach was otherwise normal.

**DATE**

4/20/22



**PATIENT**

Wyatt Wilson

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.

**SPECIES**

Canine

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

**BREED**

Great Dane

**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 were evident.

**SEX**

MN

**Free Abdomen**

No omental masses, lymphadenopathy or peritoneal effusion were present.

**AGE**

2013

**ULTRASONOGRAPHIC FINDINGS**

- Sonographically unremarkable abdomen
- Gastric ingesta - suspect probable post prandial presentation
- Mild splenomegaly - benign, suspected to be owing to sedation / anesthesia

**WEIGHT**

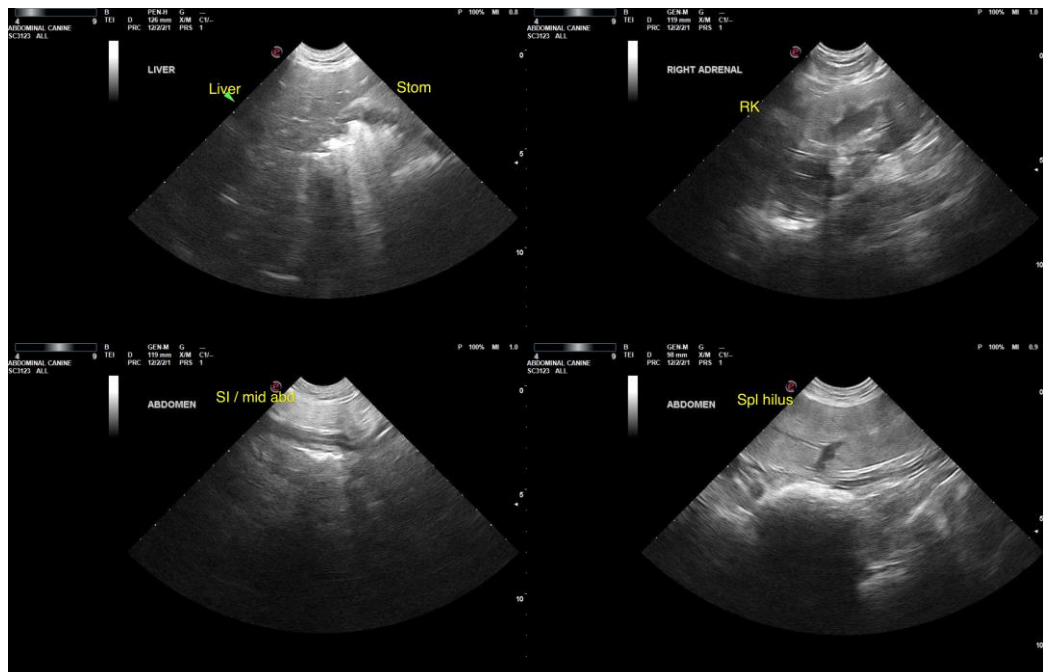
118

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No evidence of abdominal visceral pathology. If documented NPO, potential for mild metabolic gastric stasis could be considered. No evidence of Intra-abdominal neoplastic criteria or masses.

**INTERPRETED BY**

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



**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Animal Care Center of  
the Poconos

**REFERRING VET**

Dr. Spisak

**INVOICE**

13691

**DATE**

4/20/22



**PATIENT**

Wyatt Wilson

**SPECIES**

Canine

**BREED**

Great Dane

**SEX**

MN

**AGE**

2013

**WEIGHT**

118

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Rebekah Jakum, CVT  
ARDMS/RVT

**HOSPITAL NAME**

Animal Care Center of  
the Poconos

**REFERRING VET**

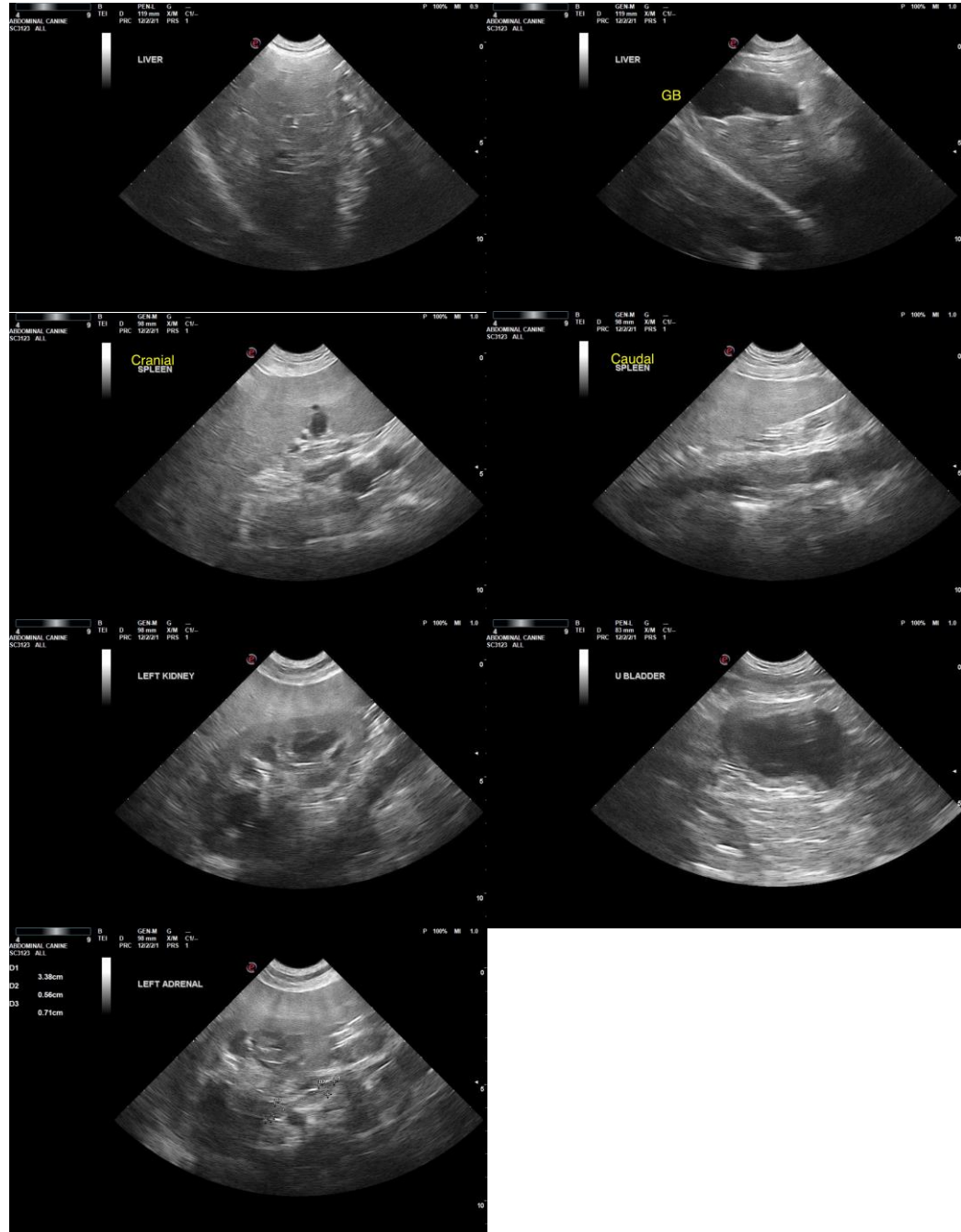
Dr. Spisak

**INVOICE**

13691

**DATE**

4/20/22



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)**

[mac.daniel@sonopath.com](mailto:mac.daniel@sonopath.com)