



**PATIENT**

Rocky Gadea

**SPECIES**

Canine

**BREED**

Dachshund Mix

**SEX**

Male

**AGE**

11

**WEIGHT**

17.8

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway Animal  
Hospital

**REFERRING VET**

Dr. Salazar

**INVOICE**

15527

**DATE**

04/28/26

**PRESENTING CLINICAL SIGNS**

Vomiting blood , lethargy Hx of stage B2 -c Current meds Carafate Enalapril Furosemide Vetmedin  
Last u/s 12/20/25

Abnormal PE/Chem/CBC/UA Results: HCT 65.5% Alb 4.3 T bili 1.8

**ULTRASONOGRAPHIC EXAMINATION OF THE HEART & LIMITED ABDOMEN**

CANINE CARDIAC PARAMETERS	MR VMAX (m/s)	TR VMAX (m/s)	LA/AO (M-Mode)	LA/AO (Heart Base; Swe)	FS (%)	EF (%)	EPSS (cm)
NORMAL PARAMETER	4.5-5.5	<2.7	1.3	Up to 1.6	28-40	40-100	<0.6
PATIENT	5.5	--	NM	1.9	50	82	0.3
CANINE CARDIAC PARAMETERS	HR (BPM)	AV VMAX (m/s)	PV MAX (m/s)	BODY WEIGHT	LAD LA MAX 4 Chamber	LVIDd Avg; 2D and m-mode short axis (cm)	LVIDs Avg; 2D and m-mode short axis (cm)
NORMAL PARAMETER	50-100	0.7-1.7	0.7-1.6				
PATIENT	NM	1.4	0.75	17.8	4.0	3.8	--

**Cardiac Presentation**

The echocardiogram in this patient demonstrated moderate to severe increased **left atrial** dimension based on 2 different LA measurement methods with associated mild intra-atrial septal deviation. The cranial and caudal **mitral** valve leaflets presented thickening consistent with endocardiosis. No evidence of valvular prolapse. Doppler indicated measurable severe eccentric MR. The **left ventricle** presented thicknesses with linear contour and moderate increased LV dimension. The **myocardium** presented normal echogenicity without subjective evidence of significant fibrotic or ischemic disease. **Contractility** of the ventricular walls was adequate and in normal range for this patient evidenced by the fractional shortening measurement and subjective evaluation of the different regions of the myocardium. The **left ventricular outflow** tract demonstrated normal laminar flow and subjective structural integrity. The **right atrium** and auricle revealed normal size, structure and content. No evidence of masses was noted or chamber overload. **Tricuspid** valvular assessment demonstrated adequate linear morphology. The **right ventricle** was of normal size (1/3 diameter of LV), chordae structure, myocardial echogenicity and thickness. **Pulmonic** tract assessment revealed normal valve structure, laminar flow, and diameter (approx.1:1 pa/ao ratio). No visible **pericardial** or free pleura fluid was noted. No echographically detectable evidence of cardiac / pericardial tumors was visible.

**Urinary System**



## PATIENT

Rocky Gadea

The urinary bladder was nondistended with urine, prohibiting full evaluation of the bladder wall with minor dependent to non-dependent possibly adhered lumen mineral. Subjective mildly thickened ventral apical to dorsal apical wall.

## SPECIES

Canine

The prostate was mildly enlarged in size with intact, symmetrical capsule contour. The margins of the gland were intact and able to be differentiated from the surrounding tissue. The prostatic parenchyma was mildly echogenic to heteroechoic. Small intermittent prostatic cysts were present. The prostate measured 3.2 cm in diameter.

## BREED

Dachshund Mix

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.

## SEX

Male

Nonobstructive renoliths were present. The left kidney measured 4.8 cm in length. The right kidney measured 4.7 cm in length.

## AGE

11

### *Adrenal Glands*

The left adrenal gland was borderline to mildly enlarged given caudal pole width measurement in light of body weight with normal contour and a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.59 cm width at the caudal pole.

## WEIGHT

17.8

The right adrenal gland was borderline to mildly enlarged with normal contour given caudal pole width measurement in light of body weight and a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.64 cm width at the caudal pole.

## INTERPRETED BY

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

### *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.

## IMAGING PERFORMED BY

Jenn

### *Liver & Gallbladder*

The liver presented mild 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.

## HOSPITAL NAME

Rockaway Animal  
Hospital

## REFERRING VET

Dr. Salazar

The gallbladder was non distended in size with mild nonorganized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.

## INVOICE

15527

### *Gastrointestinal*

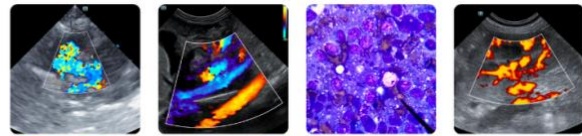
The stomach presented mild intact prominent wall. Intact wall layering was maintained and distinct. The stomach contained a mild amount of retained anechoic fluid.

## DATE

04/28/26

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 apparent formed feces in lumen.



**PATIENT**

**Pancreas**

Rocky Gadea

The area of the pancreas was sonographically normal.

**SPECIES**

**Free Abdomen**

Canine

No overt lymphadenopathy or peritoneal effusion was present.

**BREED**

**ULTRASONOGRAPHIC FINDINGS**

Dachshund Mix

- Chronic mitral valve disease- subjective static (ACVIM B2+ - C).
- Mild hypomotile gastritis pattern.
- Sonographically normal empty small intestine.
- Mild hepatomegaly- benign.
- Nonorganized gallbladder debris (non-mucocele).
- Bilateral borderline/mild adrenomegaly.
- Chronic renal changes exhibiting renolithiasis.
- Probable mild cystitis with mild urinary bladder lumen mineral.
- Benign prostatic hyperplasia with prostatic cysts- minor potential for prostatitis.

**SEX**

Male

**AGE**

11

**WEIGHT**

17.8

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

No evidence of significant progressive cardiac disease compared to the previous study with essentially stable chamber measurement. Continued current medical protocol or triple therapy is indicated. Prognosis remains highly variable and sonographic monitoring is advised.

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

Recheck echo is recommended in six months, sooner if progressive clinical signs. Baseline monitoring of resting respiration rate going forward is advised. Mild salt restriction and fatty acid supplementation may prove beneficial. Elective anesthesia is not advised.

**IMAGING PERFORMED BY**

Jenn

Continued gastrointestinal support including broad spectrum gastroprotectants and clinical monitoring is recommended. Adrenal screening could be considered if suspicion of adrenal dysfunction. This patient is suspected to be passing small amounts of mineral from the kidneys into the urinary bladder. Correlation with urinary workup is recommended. Recheck sonogram if non-responsive or progressive gastrointestinal signs.

**HOSPITAL NAME**

Rockaway Animal Hospital

**REFERRING VET**

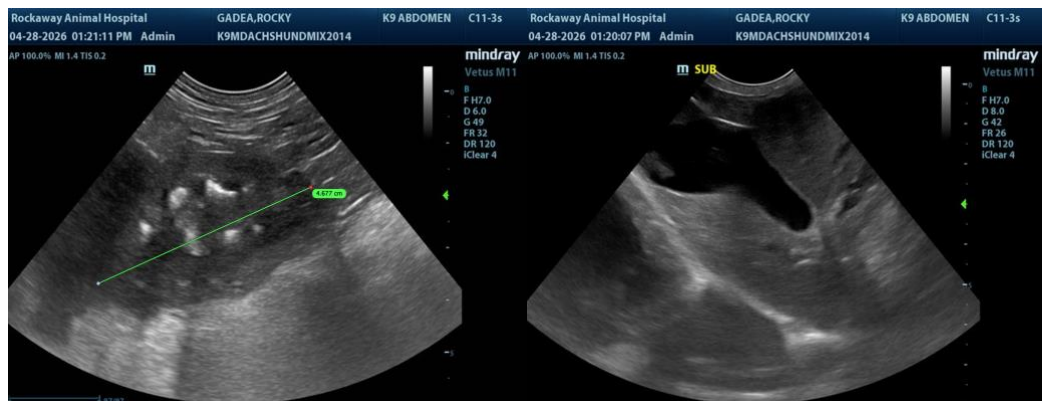
Dr. Salazar

**INVOICE**

15527

**DATE**

04/28/26





**PATIENT**

Rocky Gadea

**SPECIES**

Canine

**BREED**

Dachshund Mix

**SEX**

Male

**AGE**

11

**WEIGHT**

17.8

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway Animal  
Hospital

**REFERRING VET**

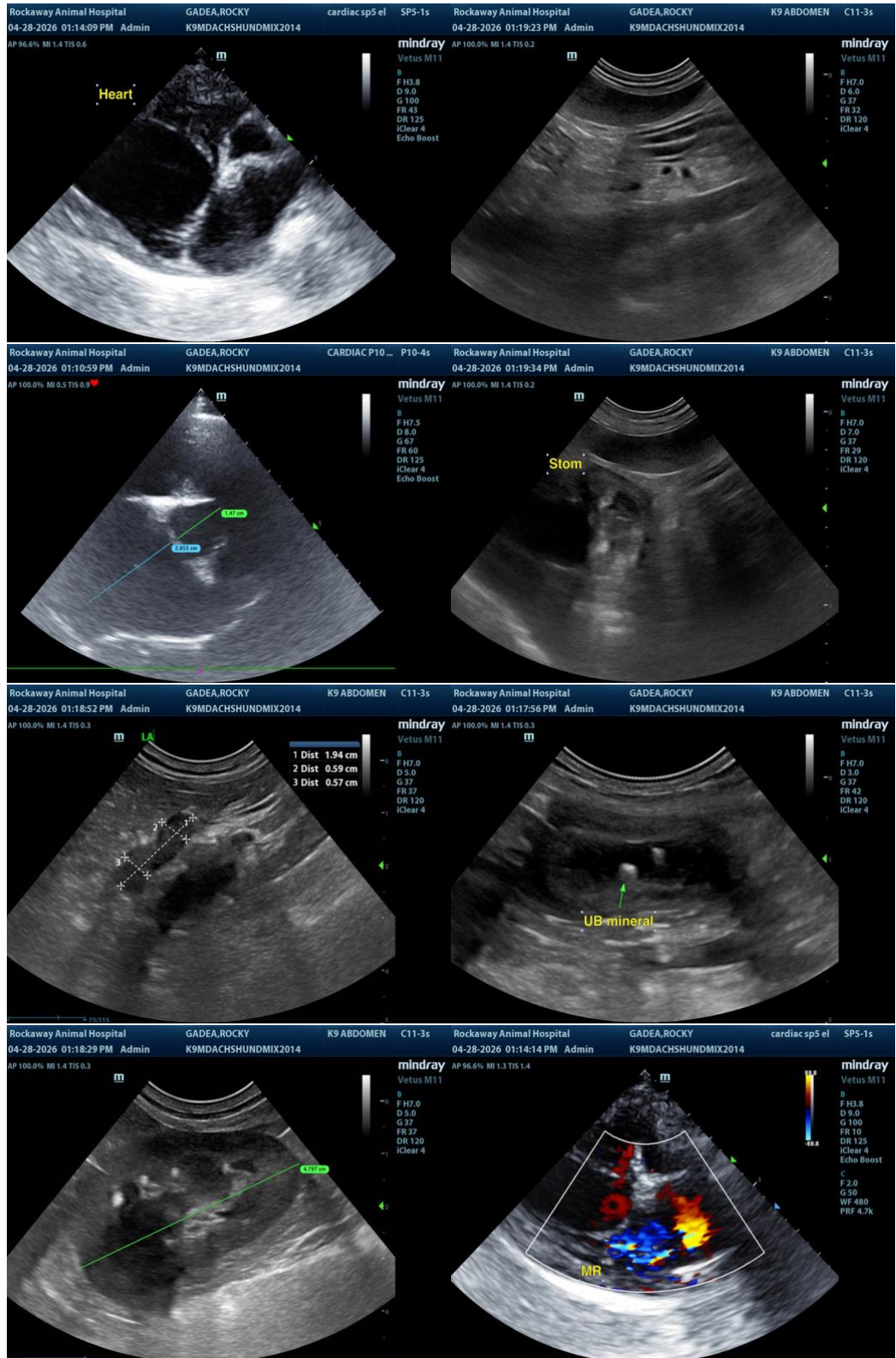
Dr. Salazar

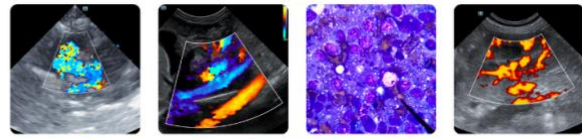
**INVOICE**

15527

**DATE**

04/28/26





## PATIENT

Rocky Gadea

## SPECIES

Canine

## BREED

Dachshund Mix

## SEX

Male

## AGE

11

## WEIGHT

17.8

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Jenn

## HOSPITAL NAME

Rockaway Animal  
Hospital

## REFERRING VET

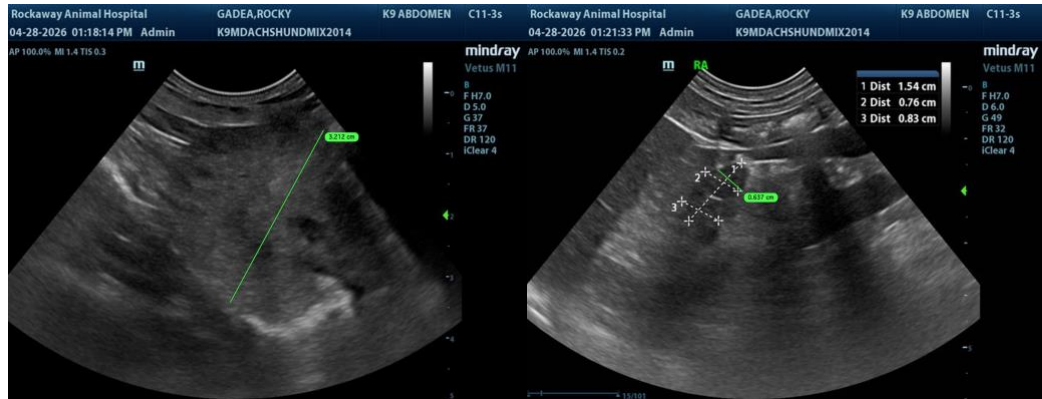
Dr. Salazar

## INVOICE

15527

## DATE

04/28/26



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)