



PATIENT

Spaghetti Curlee

SPECIES

Canine

BREED

Dachshund

SEX

Male Neutered

AGE

14y 3m

WEIGHT

13.3 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Pet Care Clinic of the
 High Country

REFERRING VET

Dr. Sturgill

INVOICE

13447

DATE

4/28/26

PRESENTING CLINICAL SIGNS

History: P presented for whining restlessness, distended abdomen. Owner was on a work call and was feeding him large amount of a peanut butter treat to keep him distracted. Radiologist was concerned about a possible mass effect in cranial abdomen

Abnormal PE/Chem/CBC/UA Results: ALT 138, Tbili 2

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Primarily anechoic urine was present in the lumen. Mild, echogenic to particulate non-dependent sediment was present without evidence of calculus formation. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic mural changes were noted.

The residual prostate was normal and free of pathology.

The area of the aortic trifurcation was free of pathology.

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. No evidence of pelvic dilation was present. The left kidney measured 4.6 cm in length. The right kidney measured 4.7 cm in length.

Adrenal Glands

The bilateral adrenal glands were mildly enlarged in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.67cm width in the caudal pole. The right adrenal gland measured 0.67 cm width in the caudal pole.

Spleen

The spleen exhibited primarily finely textured parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Mild generalized parenchyma heterogeneity was present without evidence of nodular changes. 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. The parenchymal heterogeneity is likely consistent with benign changes such as extramedullary hematopoiesis or age-related remodeling with minor potential for inflammatory or neoplastic disease.

Liver

The liver presented subjective borderline mildly 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. The gallbladder was non distended in size with mild to moderate, variably congealed yet non-organized, echogenic, nonmineralized biliary sludge. The cystic duct and common bile ducts were normal without evidence of dilation.



PATIENT

Spaghetti Curlee

SPECIES

Canine

BREED

Dachshund

SEX

Male Neutered

AGE

14y 3m

WEIGHT

13.3 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Pet Care Clinic of the
 High Country

REFERRING VET

Dr. Sturgill

INVOICE

13447

DATE

4/28/26

Gastrointestinal

The stomach presented borderline prominent intact wall. Intact wall layering was maintained and distinct. The stomach exhibited moderate distention with retained fluid and non-homogeneous, hyperechoic ingesta and mildly progressive distal shadowing. Stomach wall measured 0.48 cm and pylorus wall measured 0.49 cm. No evidence of obstruction to pyloric outflow.

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.

Pancreas

The parenchyma of the pancreas was hyperechoic to adjacent omental fat with diffuse parenchyma remodeling. The capsule of the pancreas was mildly asymmetrical in contour without evidence of peripancreatic inflammation. These changes may suggest chronic inflammation, fibrosis, or saponification if previous history of pancreatitis. No overt signs of pancreatic neoplasia.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Hypomotile gastritis with moderate retained fluid/ingesta
- Normal empty small intestine
- Chronic pancreatitis/fibrosis
- Mild benign hepatopathy
- Non-organized gallbladder debris (non-mucocele)
- Mild chronic renal changes
- Mild bilateral adrenomegaly – benign

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The stomach is suggestive of metabolic gastric ileus secondary to inflammation and suspect dietary indiscretion. No overt evidence of gastric foreign material which is thought less likely. Given timeframe between ultrasound study and interpretation. A sonographic reassessment of the stomach to assess for evidence of persistent gastric ileus ad retained ingesta vs gastric emptying.

If clinically indicated, document 12-hour fast with gastrointestinal support, including suggested IV fluids to promote gastric motility and sonographic reassessment would be ideal. If currently non-clinical, continued supportive care and empirical therapy for chronic pancreatitis would be reasonable. Once gastrointestinal signs are stabilized, hepato-supportive medications with monitoring of the gallbladder if evidence of progressive cholestasis is recommended. Adrenal screening may be considered if clinical signs consistent with Cushing's Syndrome are non-reported or arise.



PATIENT

Spaghetti Curlee

SPECIES

Canine

BREED

Dachshund

SEX

Male Neutered

AGE

14y 3m

WEIGHT

13.3 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Pet Care Clinic of the
 High Country

REFERRING VET

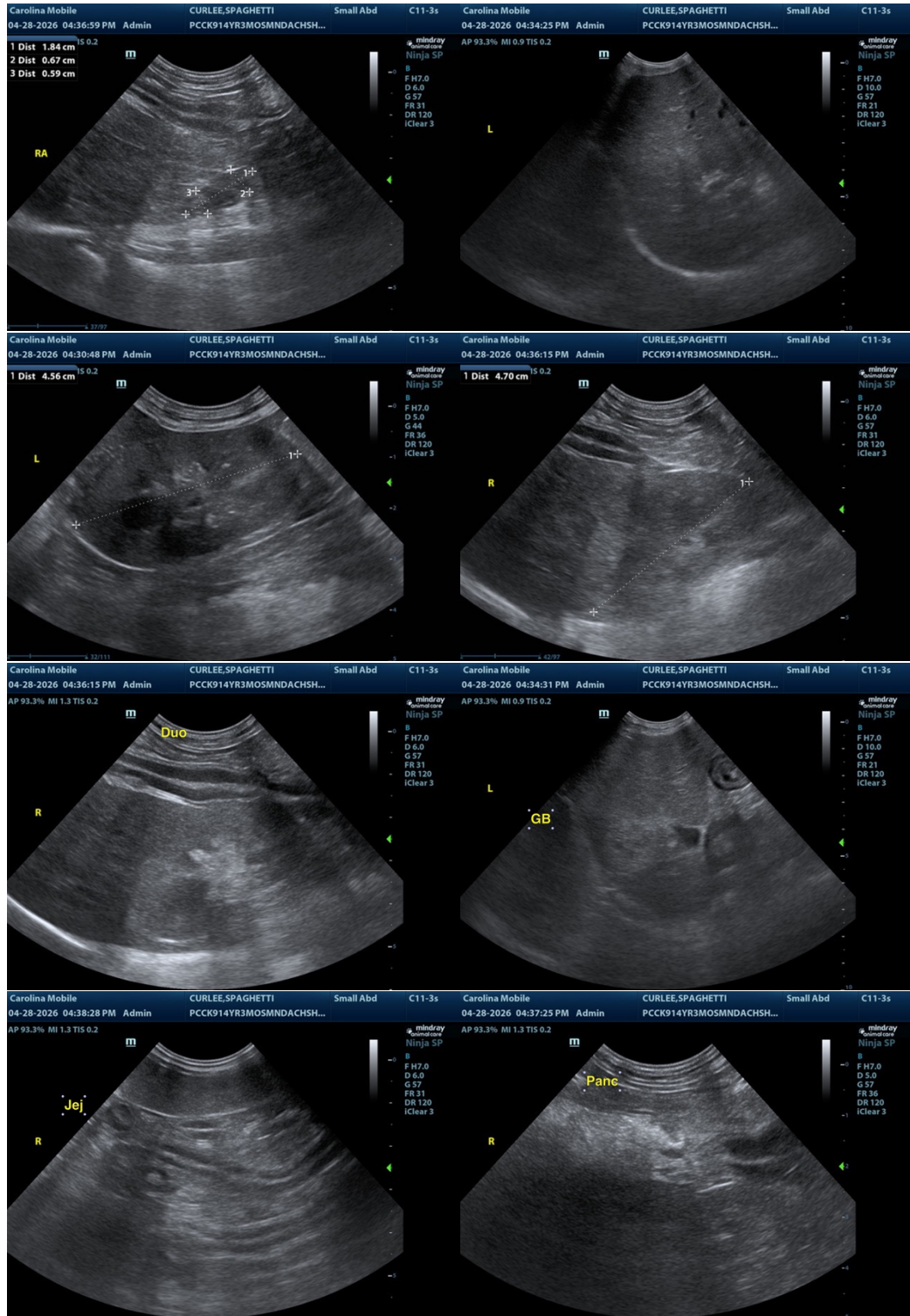
Dr. Sturgill

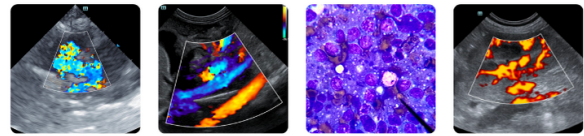
INVOICE

13447

DATE

4/28/26





PATIENT

Spaghetti Curlee

SPECIES

Canine

BREED

Dachshund

SEX

Male Neutered

AGE

14y 3m

WEIGHT

13.3 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kathleen Byrnes

HOSPITAL NAME

Pet Care Clinic of the High Country

REFERRING VET

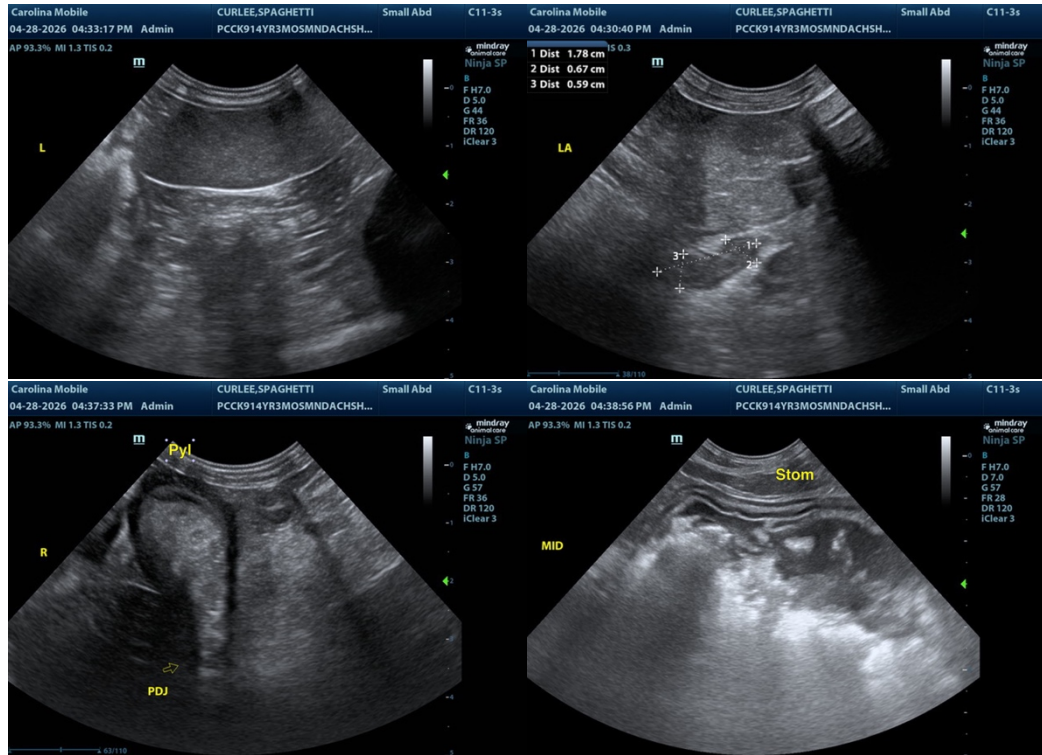
Dr. Sturgill

INVOICE

13447

DATE

4/28/26



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