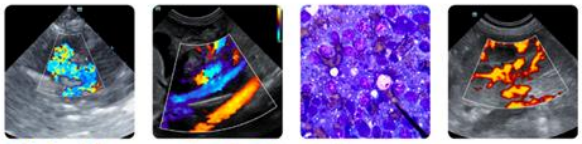


PATIENT

Colt Stoner

SPECIES

Canine

BREED

Bernese Mtn Dog

SEX

MN

AGE

5yr

WEIGHT

39kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Melissa Randolph

HOSPITAL NAME

Shores Veterinary Emergency Center

REFERRING VET

Sol Sath

INVOICE
24397

DATE
04/06/2026

PRESENTING CLINICAL SIGNS

2 wks ago patient had trouble walking and standing. P was seen at Shores 3/29. Where patient was treated for lyme though no positive was seen. Wed/Thurs patient declined more so rDVM stopped doxy on 4/2 and treated with IVF. Patient has been increased drinking and urinating, panting, hunched back, dry heaving and foul odor from mouth. Today rDVM rec shores for possible surgery. concern for gi FB. Worsening panting, decreased eating, drooling and having accidents. weight loss noted, 3/29 42.4 kg, today 4/6 39 kg. Prior history of FB surgery at approximately 4 months of age.

concern for gi FB, gastroenteritis, neoplasia, other

Abnormal PE/Chem/CBC/UA Results: PE: mild pain 2/4; BCS 5/9; soft on abdominal palpation 3/29 Shores: tru rapid 4: negative X4 3/29 epoc: lactate 3.28 H, TCO2 15.9 L; chem: calcium 8.9 L, cholesterol 329 H, ALP 177 H, ggt 24 H, t bili 1.5 H; cbc: lym 0.61 L, eos 0.03 L, RHE 19.8 L rdvm 4/6: CBC - Neu 14.05 (3-12), RBC 4.89 (5.5-8.5), HCT 32.95 (37-55), MCH 30.2 (19.5-24.5), MCHC 44.9 (31-39), PLT 64 (165-500) Chemistry - ALB 2.1 (2.5-4.4), ALP 348 (20-150) rads rdvm: concern for gi/gastric foreign body

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone. Anechoic urine was present in the lumen with mild non-dependent particulate sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

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 7.1 cm in length. The right kidney measured 7.5 cm in length.

The residual prostate appeared normal and free of pathology.

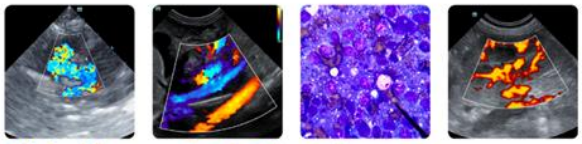
Adrenal Glands

The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.

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



PATIENT

Colt Stoner

SPECIES

Canine

BREED

Bernese Mtn Dog

SEX

MN

AGE

5yr

WEIGHT

39kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Melissa Randolph

HOSPITAL NAME

Shores Veterinary Emergency Center

REFERRING VET

Sol Sath

INVOICE
24397

DATE
04/06/2026

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. Normal vascular volume. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and mild non-organized debris. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach presented intact mildly thickened wall. The lumen of the stomach was empty with mild lumen gas and no signs of obstruction or foreign material. The pylorus wall measured 0.75 cm in width.

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 mechanical/metabolic ileus, obstruction or foreign material.

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

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

No evidence of peritoneal effusion was present.

Intermittent mildly prominent to enlarged mesenteric lymph 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). An example measured 3.2 cm x 0.92 cm.

Solitary mildly prominent to enlarged medial iliac lymph node was present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). The lymph node measured 2.6 cm x 1.0 cm.

ULTRASONOGRAPHIC FINDINGS

Primary

- Mildly thickened empty stomach
- Sonographically normal empty small intestine
- Normal area of pancreas
- Sonographically normal liver with mild non-organized gallbladder debris- consistent with mild benign hepatopathy (non-mucocele)
- Sonographically normal spleen
- Intermittent mild mesenteric / medial iliac lymphadenopathy- suggestive of benign criteria i.e. mild reactive hyperplasia or possible lymphadenitis
- Normal bilateral kidneys with mild urine sediment

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of mechanical gastrointestinal obstruction, foreign material or overt neoplastic criteria. Definitive cause of the mild anemia and weight loss was not obvious. A GI panel to include PLI/TLI/Cobalamin/Folate as well as three view chest radiographs and neurological / musculoskeletal

PATIENT

Colt Stoner

SPECIES

Canine

BREED

Bernese Mtn Dog

SEX

MN

AGE

5yr

WEIGHT

39kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Melissa Randolph

HOSPITAL NAME

Shores Veterinary Emergency Center

REFERRING VET

Sol Sath

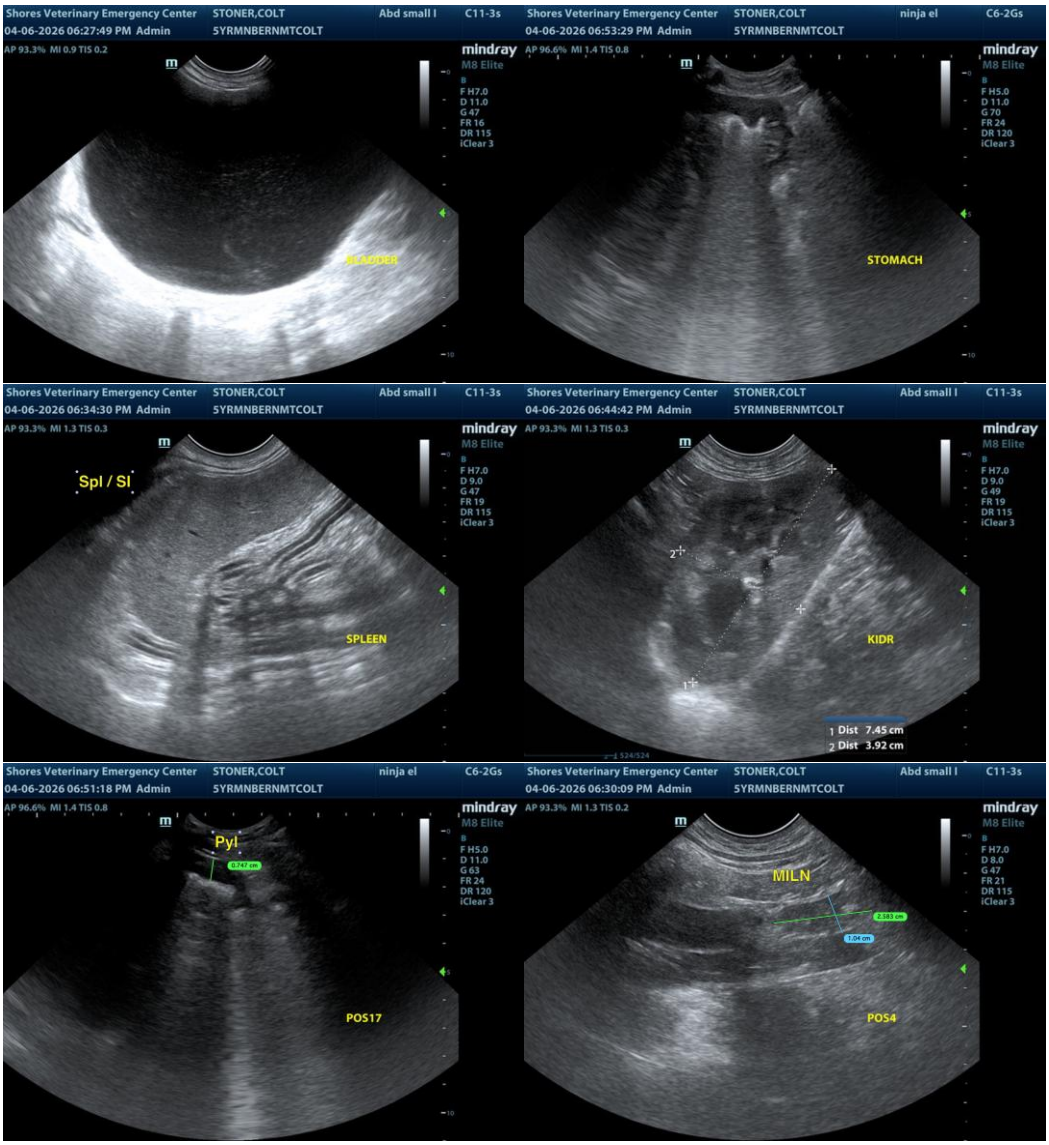
INVOICE
24397

DATE
04/06/2026

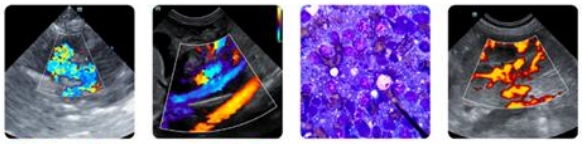
examination are recommended to assess for or rule out occult disease which may cause weight loss.

Gastrointestinal support, empirical therapy for suspect gastritis with as needed sonographic monitoring of the gastrointestinal tract and mesenteric / medial iliac lymph nodes for evidence of progression if recurrent gastrointestinal signs is recommended.

The urinary bladder sediment may suggest cellular / crystalline debris or mucus. Cystocentesis for UA +/- C/S if evidence of inflammatory cells is recommended.



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com | info@sonopath.com | 1.800.838.4268

PATIENT

Colt Stoner

SPECIES

Canine

BREED

Bernese Mtn Dog

SEX

MN

AGE

5yr

WEIGHT

39kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Melissa Randolph

HOSPITAL NAME

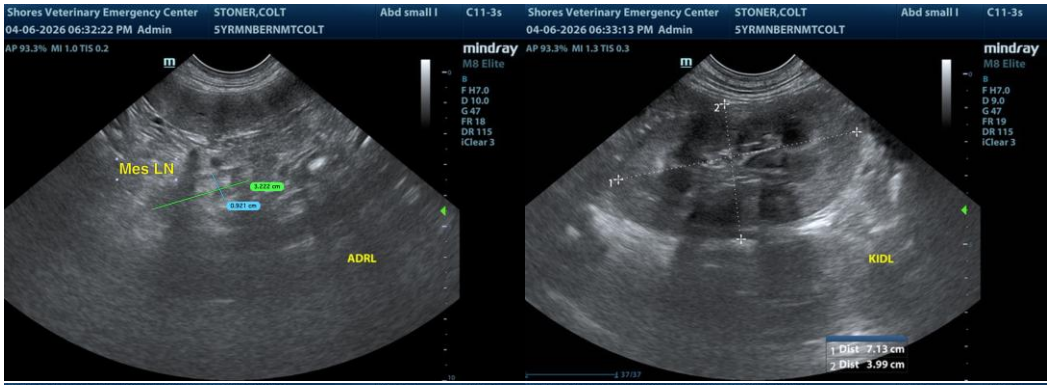
Shores Veterinary Emergency Center

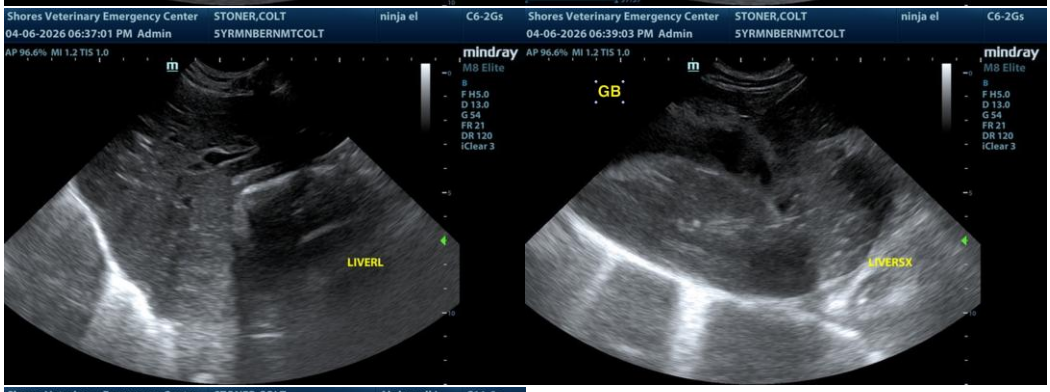
REFERRING VET

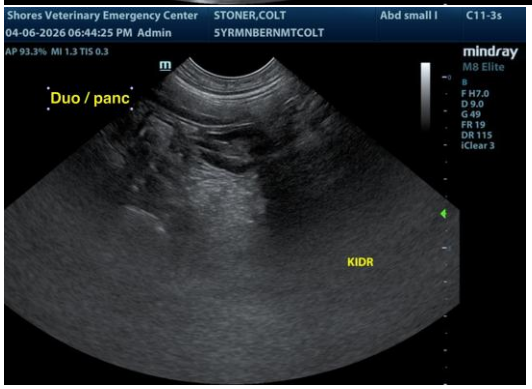
Sol Sath

INVOICE
24397

DATE
04/06/2026







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