



PATIENT

Jaxx Guimond

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

12 Years

WEIGHT

64.4 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDCS

HOSPITAL NAME

Compassionate Care
Veterinary Clinic

REFERRING VET

Janeneen Dannenberg
DVM

INVOICE

16079

DATE

05/11/26

PRESENTING CLINICAL SIGNS

Presented on 4/7/26 for inappetence, moaning, restlessness and lip smacking. Normal PE except for tensing, vocalizing and lip smacking with abdominal palpation. Dx: gastroenteritis. Treated with fortiflora, bland diet and Cerenia and has been asymptomatic since. Currently, just on fortiflora.

Abnormal PE/Chem/CBC/UA Results: CBC/Chem on 4/ normal except for ALT 141. Normal 4DX. NSAID panel on April 22 - ALT up to 178 and AST now abnormal at 56. ALP, BUN/creat all normal.

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 no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic change were noted.

The visualized medial iliac lymph nodes were sonographically normal.

The area of the residual prostate appeared normal and 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 6.7 cm in length. The right kidney measured 6.1 cm in length.

Adrenal Glands

The left adrenal gland was borderline enlarged in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.82 cm width at the caudal pole.

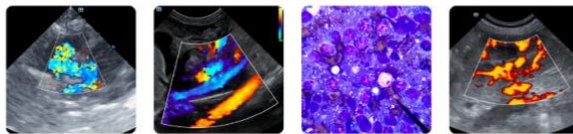
The right adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The right adrenal gland measured 0.69 cm width in the caudal pole.

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

The liver was subjective mildly enlarged in size. Mild nonhomogenous remodeled parenchyma exhibiting variable coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion.



PATIENT

Jaxx Guimond

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

SPECIES

Canine

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained variably echogenic, mild nonshadowing ingesta and lumen gas without signs of obstruction or foreign material.

BREED

Mixed

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. The duodenum wall measured 0.47 cm wall width. The jejunum wall measured 0.44 cm wall width.

SEX

Neutered Male

Normal visible colon wall layers were present with formed fecal matter in lumen.

AGE

12 Years

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 was evident.

WEIGHT

64.4 lbs

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

- Sonographically unremarkable gastrointestinal tract with gastric ingesta- ingesta consistent with food echogenicity.
- Normal pancreas.
- Mild nonhomogenous liver- consistent with mild benign hepatopathy and probable parenchymal remodeling.
- Nonorganized gallbladder debris (non-mucocele).
- Age-related renal changes.
- Borderline left adrenomegaly.

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Compassionate Care
Veterinary Clinic

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Overall, no evidence of significant visceral pathology with largely age-related abdominal changes. Continued as needed gastrointestinal support is indicated. Considerations for the low-grade hepatopathy may include low-grade inflammatory or reactive hepatopathy (given ALT elevation), mild non-obstructive cholestasis or other. Hepatosupportive medications in conjunction with gastrointestinal support would be reasonable. Adrenal screening could be considered if clinical signs consistent with adrenal disease arise.

REFERRING VET

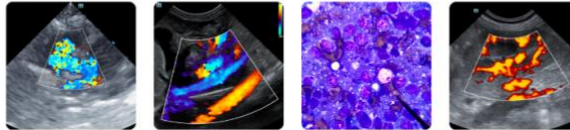
Janeneen Dannenberg
DVM

INVOICE

16079

DATE

05/11/26



PATIENT

Jaxx Guimond

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

12 Years

WEIGHT

64.4 lbs

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Pamela Harrigan,
RDMS

HOSPITAL NAME

Compassionate Care
Veterinary Clinic

REFERRING VET

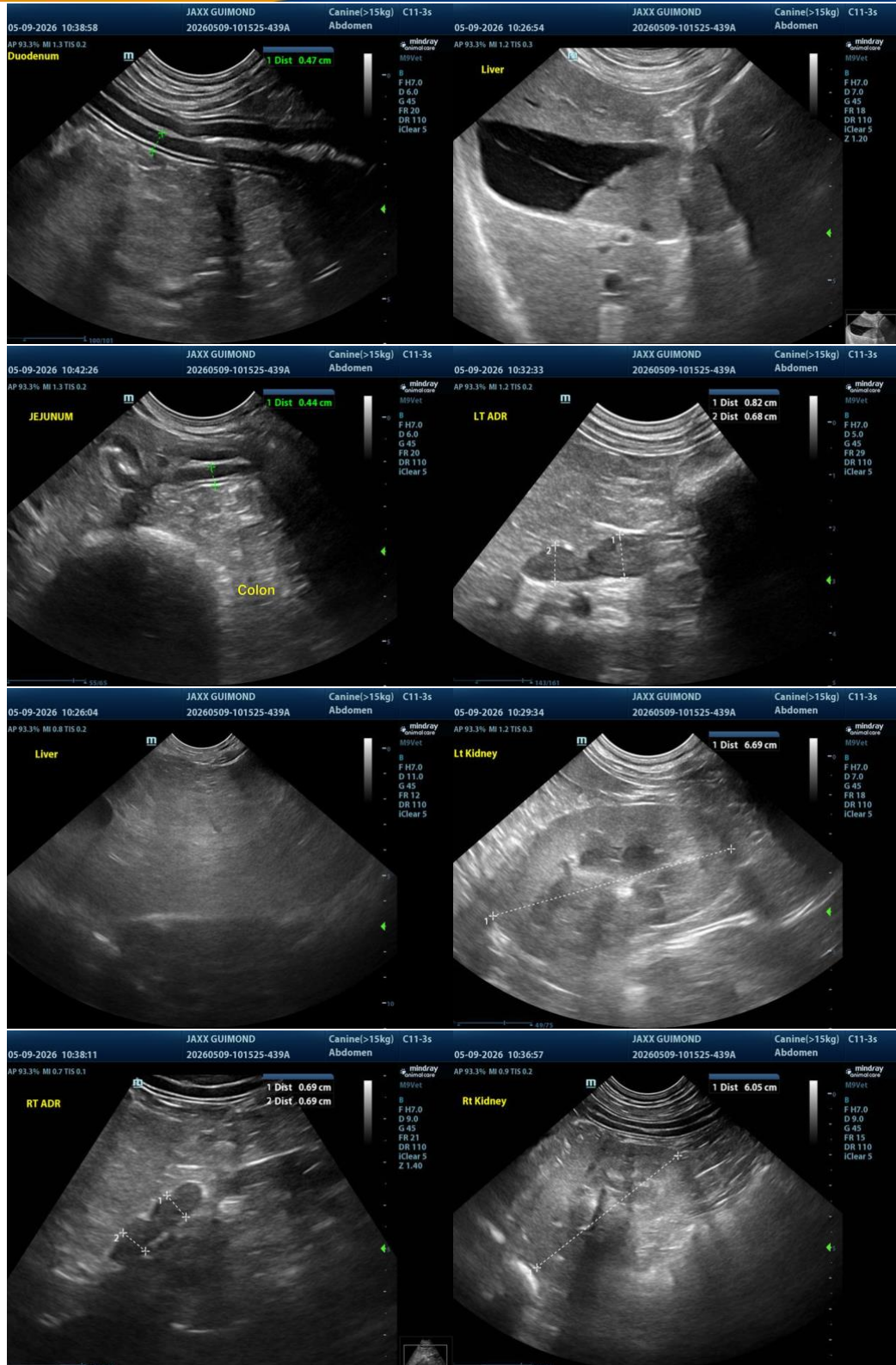
Janeneen Dannenberg
DVM

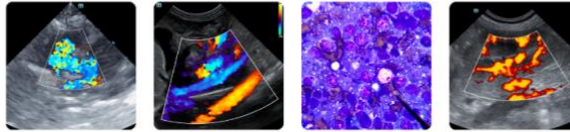
INVOICE

16079

DATE

05/11/26





PATIENT

Jaxx Guimond

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

12 Years

WEIGHT

64.4 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Pamela Harrigan,
RDCS

HOSPITAL NAME

Compassionate Care
Veterinary Clinic

REFERRING VET

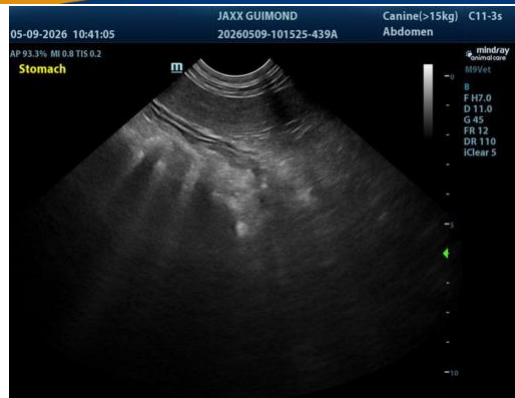
Janeneen Dannenberg
DVM

INVOICE

16079

DATE

05/11/26



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