



PATIENT

Odin Lemon

SPECIES

Canine

BREED

Poodle

SEX

Male Neutered

AGE

10Y

WEIGHT

65lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Griffin

HOSPITAL NAME

Northside
Veterinary Clinic

REFERRING VET

Griffin

INVOICE

75140

DATE

5-26-26

PRESENTING CLINICAL SIGNS

Patient presented for vomiting on 5/24 and not eating
Patient drinks from Mad River on walks on a routine basis
Patient was being treated with Doxycycline for lyme disease at time patient became sick
Responded to cerenia and denamarin over weekend and is now eating some and not vomiting
Abnormal PE/Chem/CBC/UA Results: PE: Mild abdominal pain palpable Flex: Lyme positive CBC:
9.5 Chem: ALT 831, ALP 691, GGT14, CHOL 444

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 cm 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 changes were noted.

The area of the residual prostate appeared normal and free of pathology.

No evidence of pathology in the area of the aortic trifurcation.

Normal size and margination was present in the kidneys. Subjectively mildly thickened cortex. Normal corticomedullary echogenicity with indistinct corticomedullary border demarcation. A normal 1:3 cortex / medulla ratio was maintained. No evidence of pelvic dilation was present. The left kidney measured 7.0 cm in length. The right kidney measured 7.0 cm in length.

Adrenal Glands

The left adrenal gland was normal in size. Mild parenchyma heterogeneity and mild capsule asymmetry was present without suspicion for overt neoplasia. The left adrenal gland measured 0.64 cm width in the caudal pole.

The right adrenal gland was not definitively visualized.

Spleen

The spleen was normal to borderline enlarged in size with symmetrical contour and mild heterogeneous parenchyma. No masses or nodules were present. 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 presented possible borderline to mild hepatomegaly. The liver parenchyma was nonuniform and hypoechoic to the spleen with a coarse echotexture and subjective mild to benign parenchymal remodeling. 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 nonorganized gallbladder debris. The common bile duct was not visualized.

Gastrointestinal



PATIENT

Odin Lemon

SPECIES

Canine

BREED

Poodle

SEX

Male Neutered

AGE

10Y

WEIGHT

65lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Griffin

HOSPITAL NAME

Northside
Veterinary Clinic

REFERRING VET

Griffin

INVOICE

75140

DATE

5-26-26

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild retained echogenic fluid/chyme and mild lumen gas without evidence of foreign material.

The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. A diffuse ileus pattern is present without obstruction or foreign material.

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

Pancreas

The area of the pancreas was sonographically normal.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

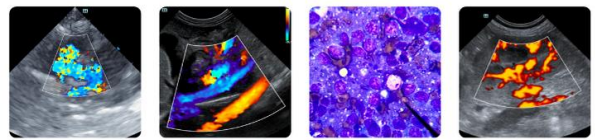
ULTRASONOGRAPHIC FINDINGS

- Nonspecific chronic renal changes.
- Gastroenteritis pattern with mild nonobstructive gastric and segmental intestinal ileus – possibly resolving.
- Normal area of the pancreas.
- Hepatopathy with parenchymal remodeling.
- Nonorganized gallbladder debris (nonmucocele).

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Although nonspecific, the hepatopathy suggests probable benign criteria with metabolic, reactive, vacuolar, cholestatic, inflammatory hepatopathy or a combination possible.

Sonographically, the spleen suggests benign or reactive criteria i.e. hyperplasia, hematopoiesis, possible splenitis with occult to emerging splenic neoplasia thought less likely. Further assessment may include, assuming normal clotting status, using a 25-gauge needle, hepatosplenic FNA cytology +/- leptospirosis titers/PCR given the patient's history. Hepatogastrointestinal support with monitoring of renal parameters for evidence of azotemia as well as urinalysis and continued empirical therapy for Lyme disease would be reasonable. Recheck sonogram indicated if progressive hepatopathy, recurrent gastrointestinal signs, or renal disease.



PATIENT

Odin Lemon

SPECIES

Canine

BREED

Poodle

SEX

Male Neutered

AGE

10Y

WEIGHT

65lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Griffin

HOSPITAL NAME

Northside
Veterinary Clinic

REFERRING VET

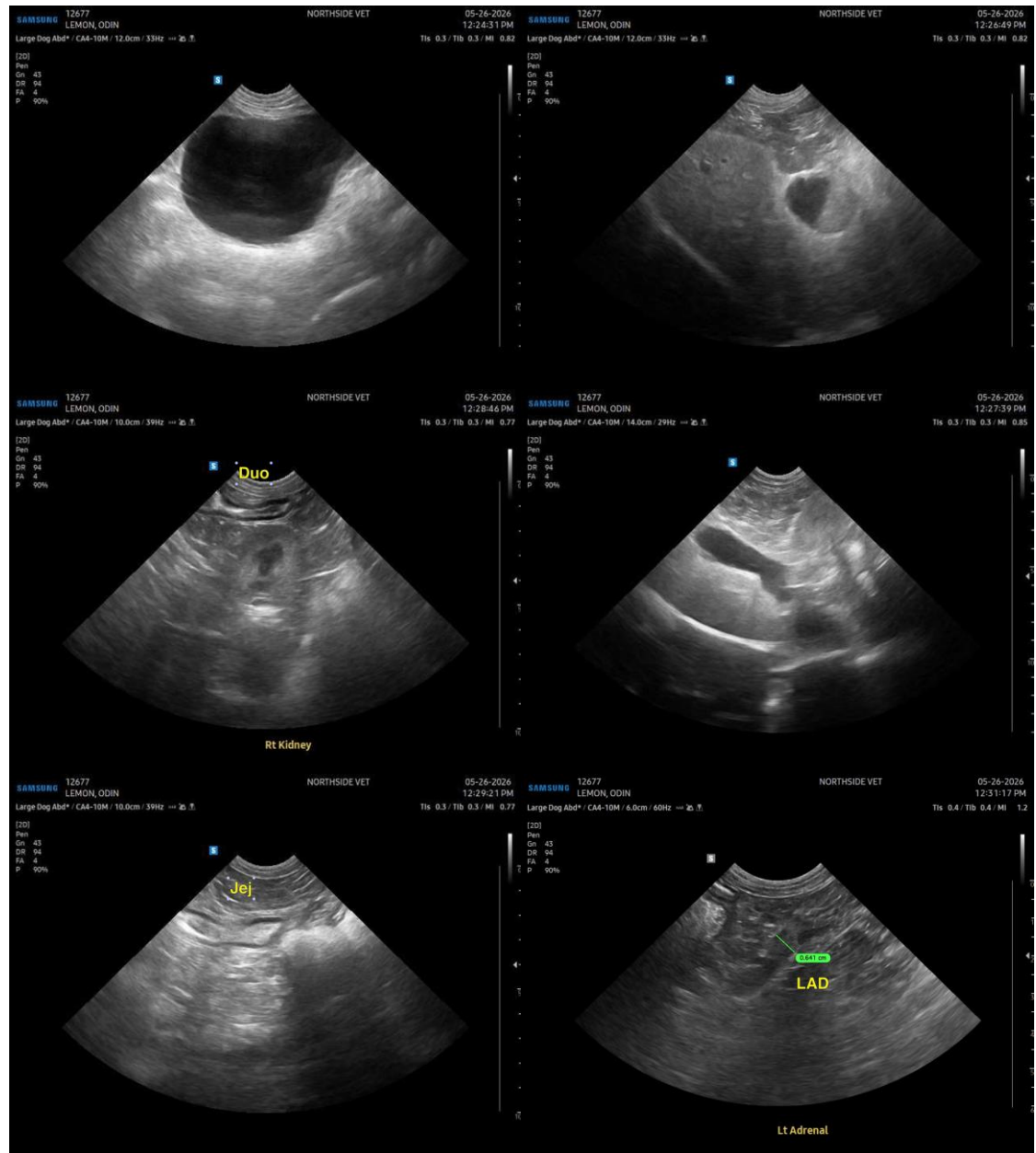
Griffin

INVOICE

75140

DATE

5-26-26





PATIENT

Odin Lemon

SPECIES

Canine

BREED

Poodle

SEX

Male Neutered

AGE

10Y

WEIGHT

65lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Griffin

HOSPITAL NAME

Northside
Veterinary Clinic

REFERRING VET

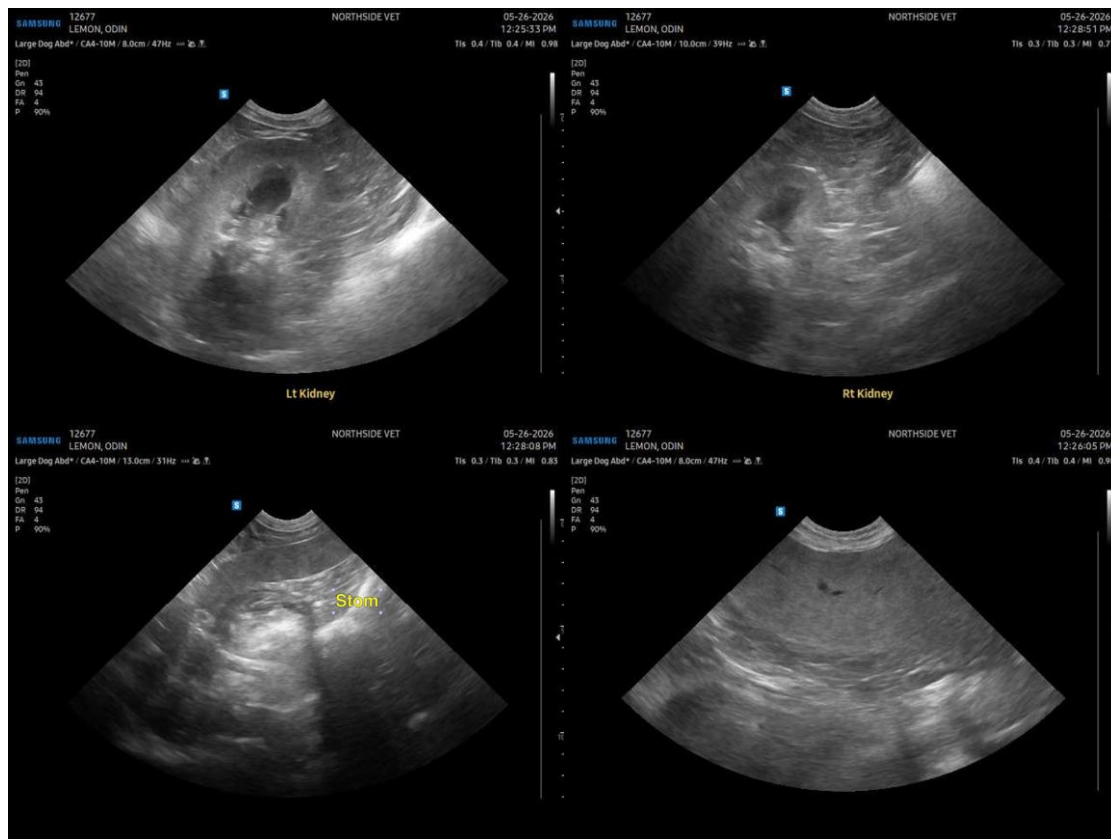
Griffin

INVOICE

75140

DATE

5-26-26



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