



PATIENT

Wellie Warsing

SPECIES

Canine

BREED

Labrador Retriever

SEX

SF

AGE

11 years, 8 months

WEIGHT

63.4 lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Alex McFeely, DVM

HOSPITAL NAME

Centre AH

REFERRING VET

Alex McFeely, DVM

INVOICE

10867

DATE

5/5/26

PRESENTING CLINICAL SIGNS

Wellie presented for abdominal ultrasound to rule out metastatic neoplasia after mass excisions 5/1/2026. 9/2025 - oral mass on the LEFT lip removed: histopathology revealed SEBACEOUS EPITHELIOMA low-grade malignant mass with narrow clean margin; 3/2026 -new mass in jugular groove sebaceous epithelioma with reactive lymphoid tissue; 4/2026 FNA of R ventral neck mass which had enlarged - possible metastatic nodule based upon cytology from original mass. Thoracic radiographs appeared free of metastatic nodules (3 views) day of ultrasound exam.

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.

No evidence of medial Iliac or sublumbar lymphadenopathy/masses.

Normal size and margination were 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 6.8 cm in length. The right kidney measured 7.0 cm in length.

Adrenal Glands

The left adrenal gland was indistinctly visualized without obvious pathology. The left adrenal gland subjectively measured 0.6 cm caudal pole width. The right adrenal gland was not definitively visualized.

Spleen

The spleen exhibited primarily finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. Well-defined, symmetrical, hyperechoic nodules were present with suspect areas of perihilar medial capsule fibrosis. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory or neoplastic changes were not noted. The echogenic nodules tend to trend benign and are most consistent with benign hyperplasia or myelolipomas.

Liver/Gallbladder

The liver presented subjectively mildly enlarged in size. Normal hepatic vascular volume was present. 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 containing primarily anechoic content with mild, nonorganized gallbladder debris. The cystic and common bile ducts were normal.



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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty without evidence of retained ingesta, fluid, or foreign material.

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 formed feces in lumen.

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.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Subjective mild benign hepatomegaly
- Mild nonorganized gallbladder debris (non mucocele)
- Age-related renal changes
- Hyperechoic splenic nodules and suspect mild medial capsule fibrosis – consistent with benign criteria, i.e., myelolipoma

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Largely geriatric abdomen without evidence of significant visceral pathology or neoplastic / metastatic criteria. Sonographic monitoring of the abdomen based on oncology recommendations is suggested. Correlation with full lab work and assessment of hepatic enzyme levels, if not recently done, is recommended. Hepatosupportive medications are suggested if evidence of cholestasis.



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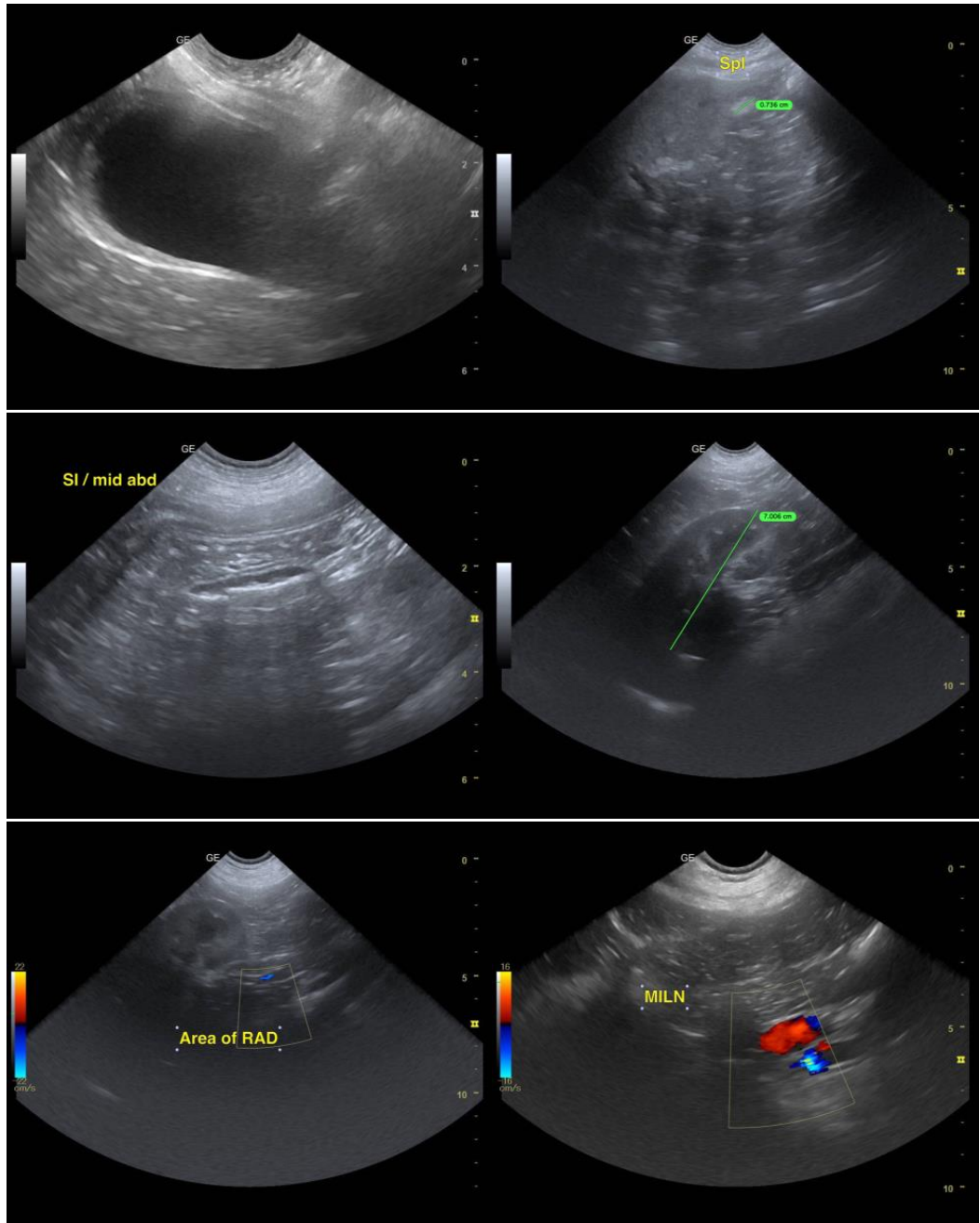
Alex McFeely, DVM

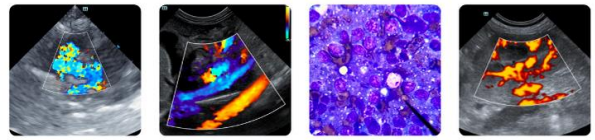
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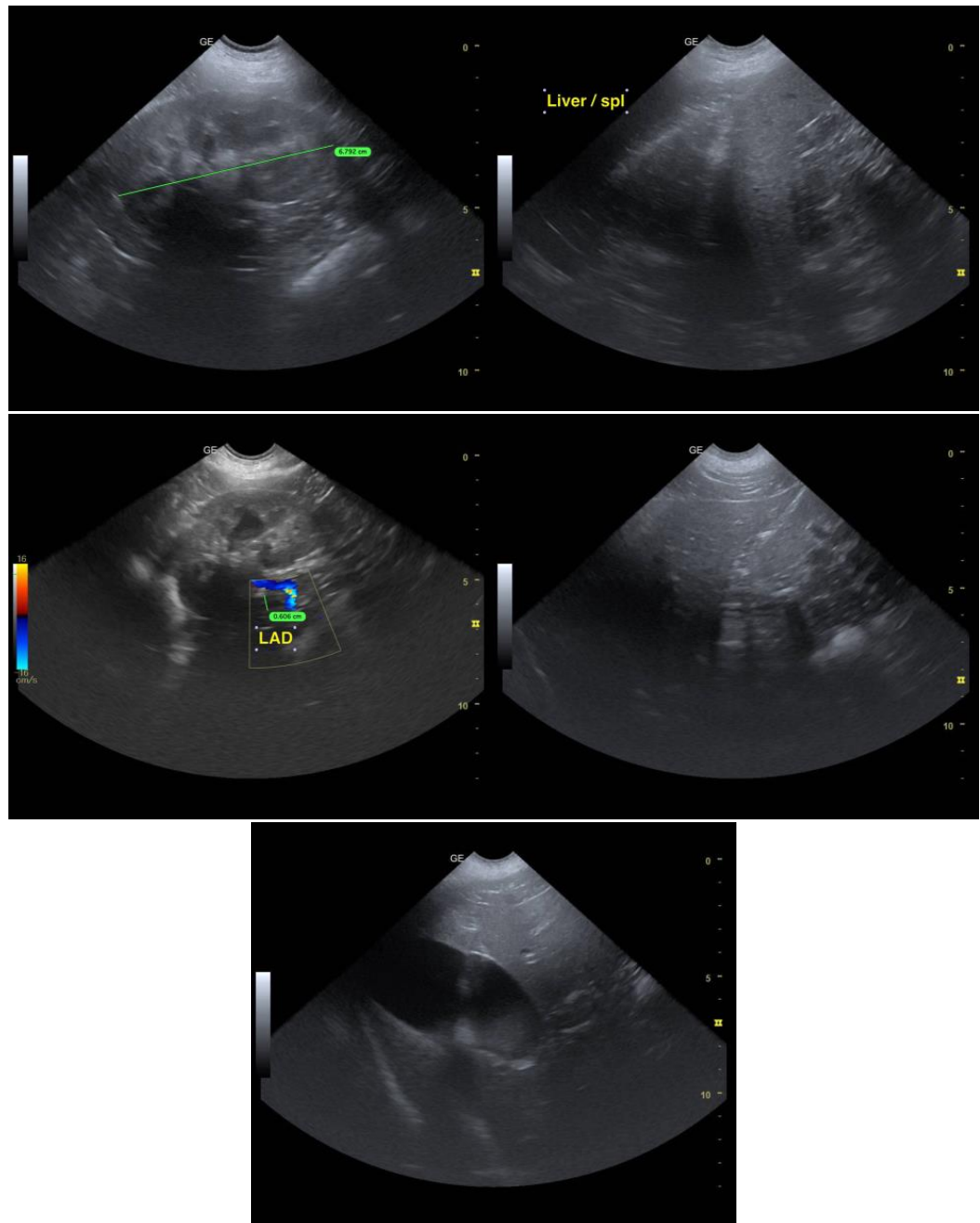
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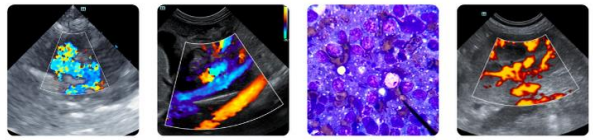
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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