



PATIENT

Piper Galler

SPECIES

Canine

BREED

Cockalier

SEX

Spayed Female

AGE

9Y

WEIGHT

37.2lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Kyoung Han

HOSPITAL NAME

Tenaflly Vet Center

REFERRING VET

Kyoung Han

INVOICE

75558

DATE

6-17-26

PRESENTING CLINICAL SIGNS

- 9 yr old, SF , BSC: 8/9 , chronic condition - PLN . Be on Temisartan 40 mg sid now . this is follow-up ultrasound from last year. she lost 5 lbs since last year intentionally. She is sedated with DKT 30 minutes before the ultrasound.

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. Primarily anechoic urine was present in the lumen. Mild particulate nondependent 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 was noted.

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

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 6.6 cm in length. The right kidney measured 6.6 cm in length.

Adrenal Glands

The left adrenal gland was indistinctly visualized with no obvious pathology subjectively measuring 0.61 cm width at the caudal pole.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.56 cm width at the caudal pole.

Spleen

The spleen was normal in size with maintained symmetrical capsule contour and nonhomogeneous subtly diffuse micronodular parenchyma. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

Liver/ Gallbladder

The liver presented 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. Mild congested vasculature secondary to sedation is noted.

The gallbladder was non-distended in size with thin walls and mild nonorganized gallbladder debris. The cystic and common bile ducts were normal.

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.



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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 were evident.

Free Abdomen

Minor prominent intermittent 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 of a lymph node measured 1.3 cm diameter.

No overt peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Hepatomegaly with mild hepatic congestion.
- Nonorganized gallbladder debris (nonmucocele).
- Non enlarged spleen with persistent subtle micronodular parenchyma.
- Nonspecific mild chronic renal changes, overtly normal adrenal glands.
- Mild urine sediment.
- Intermittent mild mesenteric lymphadenopathy – subjectively benign.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Hepatic congestion secondary to sedation is suspected. Although reported intentional weight loss and assuming normal clotting status, hepatosplenic FNA cytology to assess for occult disease is warranted. Continued empirical therapy for historical PLN with monitoring is recommended.



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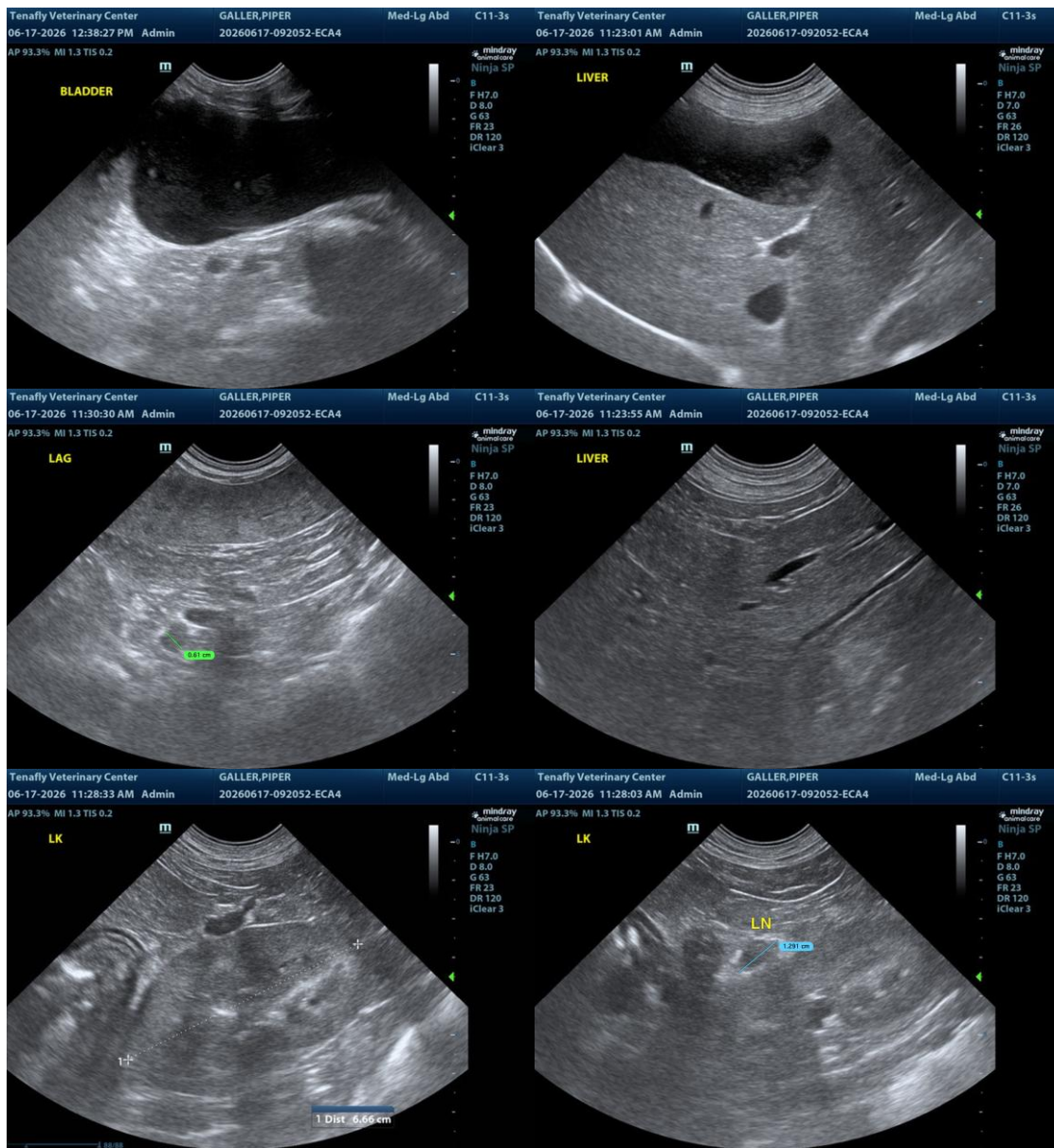
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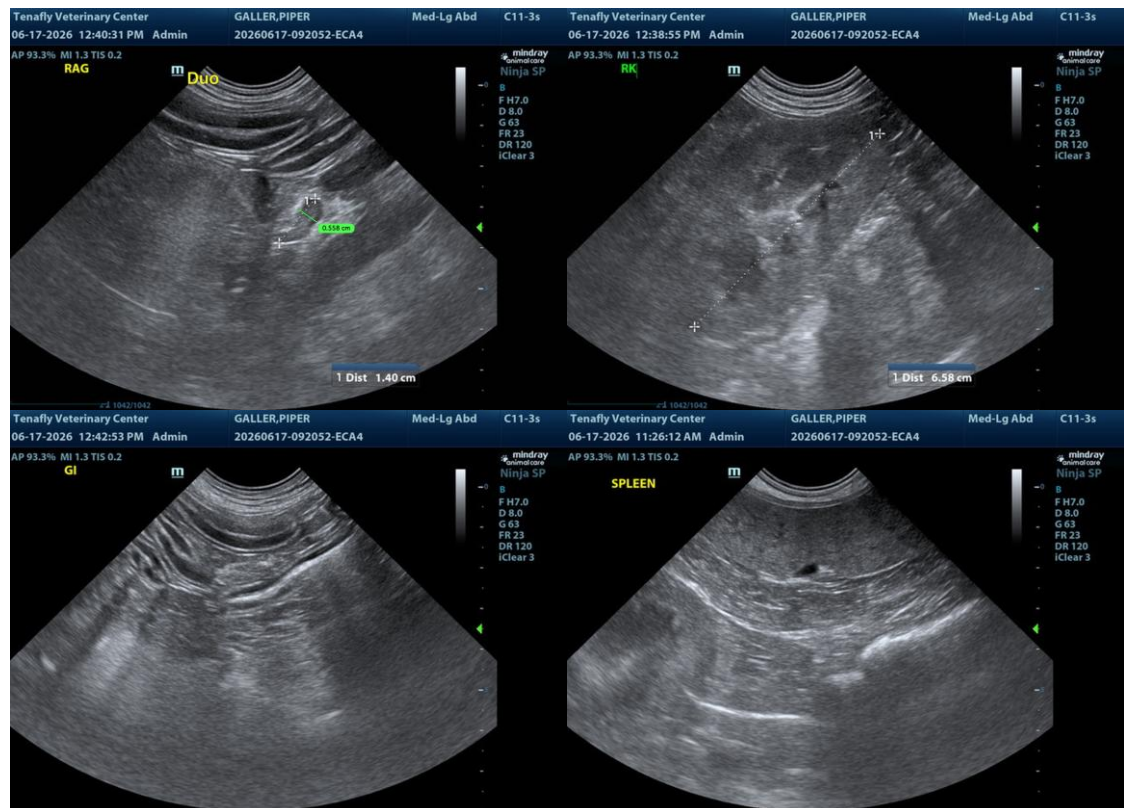
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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