



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Zeke Edwards	History: HGE, vomiting Abnormal PE/Chem/CBC/UA Results:
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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. Aortic trifurcation was normal.
Boxer Mix	
<b>SEX</b>	No overt pathology in the area of the residual prostate.
Neutered Male	Normal size and margination was 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 6.0 cm in length. The right kidney measured 6.1 cm in length.
<b>AGE</b>	<b>Adrenal Glands</b>
4 Years	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.60 cm width at the caudal pole and 0.72 cm width at the cranial pole.
<b>WEIGHT</b>	No overt pathology in the area of the right adrenal gland.
75.5 Pounds	
<b>INTERPRETED BY</b>	<b>Spleen</b>
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
<b>IMAGING PERFORMED BY</b>	<b>Liver</b>
Jenn	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. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.
<b>HOSPITAL NAME</b>	<b>Gastrointestinal</b>
Rockaway AH	The stomach presented intact wall layering with a normal wall layer ratio. The stomach contained mild retained echogenic fluid and chyme. The gastric body wall measured 0.46 cm.
<b>REFERRING VET</b>	
Dr. Maniar	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.
<b>INVOICE</b>	The colon walls presented intact yet prominent wall layering with mild thickened to echogenic submucosa. Non-formed to liquid feces consistent with diarrhea.
13320	
<b>DATE</b>	<b>Pancreas</b>
9/28/21	



**PATIENT**

Zeke Edwards

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.

**SPECIES**

Canine

**Free Abdomen**

No overt lymphadenopathy or peritoneal effusion was present.

**BREED**

Boxer Mix

**ULTRASONOGRAPHIC FINDINGS**

- Generalized gastroenterocolitis with mild gastric stasis- subjectively acute

**SEX**

Neutered Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Dietary indiscretion/food intolerance, infectious gastroenterocolitis, structurally insignificant inflammatory bowel disease or acute gastroenterocolic insult possible. Supportive care should prove beneficial in this case. Fresh fecal analysis to assess for parasitic ova/giardia, resting cortisol level and assessment of serum cobalamin and folate levels may be considered if persistent gastrointestinal signs.

**AGE**

4 Years

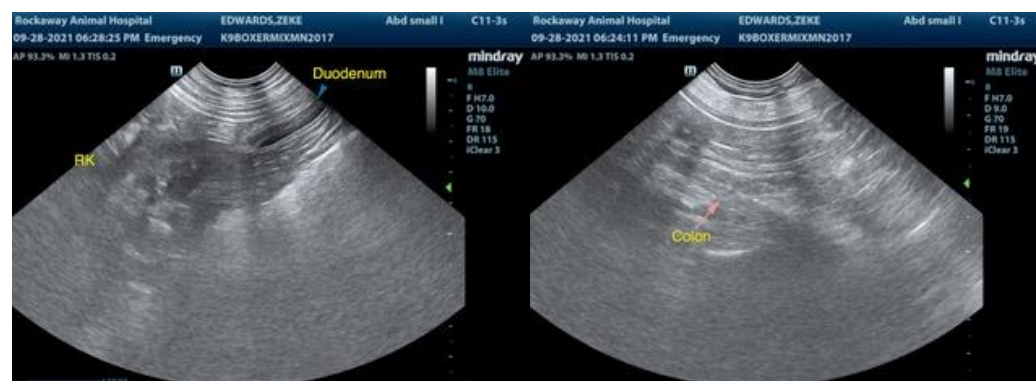
**WEIGHT**

75.5 Pounds



**INTERPRETED BY**

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



**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockway AH

**REFERRING VET**

Dr. Maniar

**INVOICE**

13320

**DATE**

9/28/21



**PATIENT**

Zeke Edwards

**SPECIES**

Canine

**BREED**

Boxer Mix

**SEX**

Neutered Male

**AGE**

4 Years

**WEIGHT**

75.5 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Dr. Maniar

**INVOICE**

13320

**DATE**

9/28/21



The information and recommendations provided are based on the images presented by the referring veterinarian. 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