



PATIENT

Mateo Reagan

SPECIES

Feline

BREED

DSH

SEX

Neutered Male

AGE

11 Months

WEIGHT

12.2 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Prescott

HOSPITAL NAME

Roundout Valley VA

REFERRING VET

Prescott

INVOICE

16485

DATE

7/5/22

PRESENTING CLINICAL SIGNS

History: History of vomiting part of a large string cord from yoga mat last week; rest of cord has not been found and had not been found in stool. Patient acting normally except for 1 -2 hacking episodes where he appeared to be trying to get something up with no success. Concern for emerging linear FB.

Abnormal PE/Chem/CBC/UA Results: Not performed.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Urinary bladder is adequately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

Left kidney is normal is size (3.8 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

Right kidney is normal is size (3.7 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

Adrenal Glands

Left adrenal gland is normal in size (0.32 cm thick), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Right adrenal gland is unable to be well visualized in these images.

Spleen

Spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

Liver

Liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

Gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

Gastrointestinal

The visible stomach wall is normal in thickness and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent. An echogenic/hyperechoic curvilinear structure is noted in the pylorus with slight acoustic shadow, more consistent with gas than foreign material, however, foreign material cannot be definitively ruled out. There is no evidence of overdistention or obstructive pattern.



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The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease. The duodenum is mildly fluid distended with echogenic contents presumed to be chyme, fluid and some gas. However, similar to the pylorus, the hyperechoic echogenic luminal contents can't be definitively ruled out as foreign material, however, no plication or overdistention to imply obstruction is noted.

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The visible colon is normal in wall thickness and layering. Contents are consistent with normal formed feces and gas.

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Pancreas

The observed pancreas appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable.

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Free Abdomen

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy.

AGE

11 Months

ULTRASONOGRAPHIC FINDINGS

- No evidence of an obstructive pattern or plication to indicate an obstruction or linear foreign body, however, remnants of foreign material in the pylorus, extending into the duodenum cant be definitively ruled out.

WEIGHT

12.2 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No obstructive pattern is present in these images, therefore, recommendations include supportive medical management of clinical signs and another 12–24-hour NPO, followed by recheck abdominal imaging (either X-rays or ultrasound) if clinical signs persist, to reassess the potential development of an obstructive pattern, if this is an early emerging linear foreign body. However, the likelihood of that is considered low based on these images.

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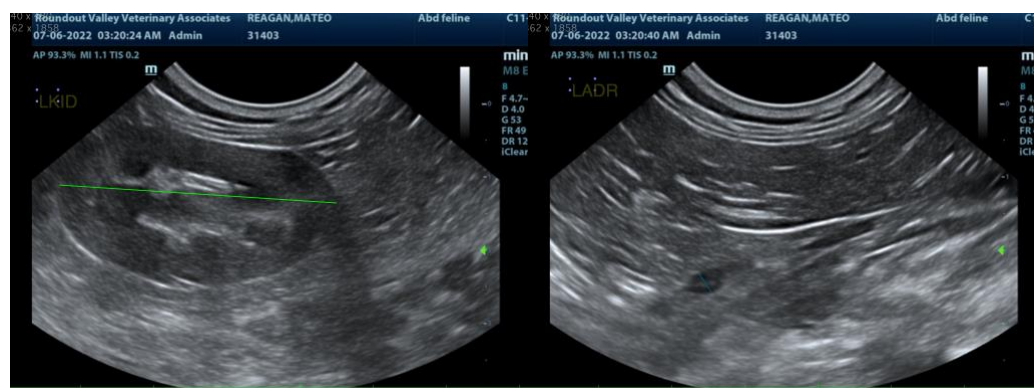
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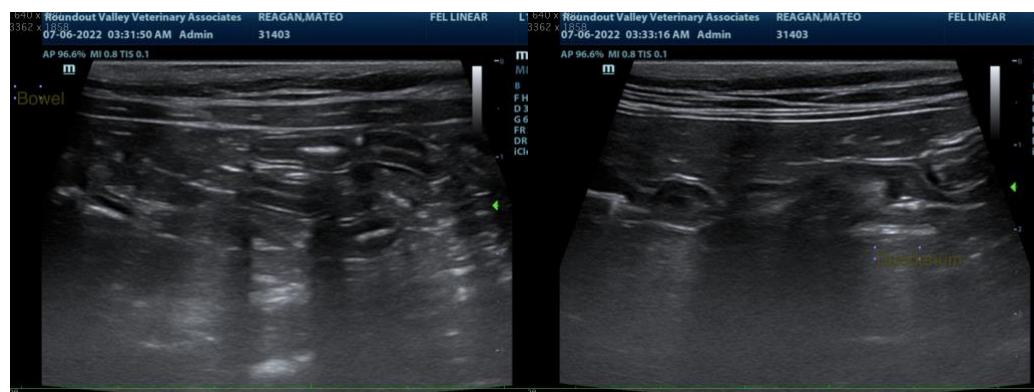
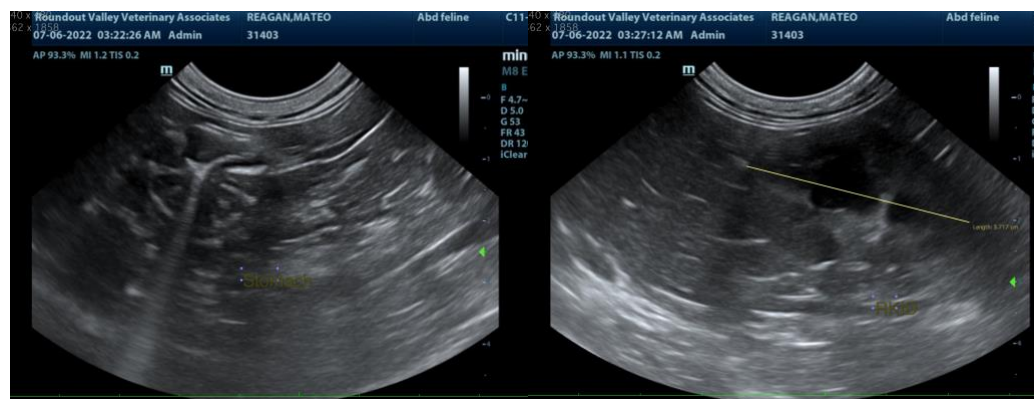
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Beth Johnson, DVM DACVIM

Beth.Johnson@SonoPath.com