



PATIENT PRESENTING CLINICAL SIGNS

Hunter Grier

History: lethargic, anorexic, straining to defecate no vomiting at all O thinks the dog is 90% himself, just not eating and lethargic as a result as per O Current Medications omeprazole, mirtazapine
Abnormal PE/Chem/CBC/UA Results: lymphopenia 0.75 monocytosis 1.32 hypochloremia 106 High ALP 234 Low amylase 397 Radiographic Findings 3 view abdominal xrays - can see moderate - severe thickening of stomach and intestine. Concern for delayed gastric emptying and ileus. Rest of organs look ok but GIT is main concern. 2 populations of intestine possible. Please see attached rads.

SPECIES

Canine

BREED

Doberman

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

Neutered Male

Urinary bladder is adequately distended. It has a normal uniform wall thickness. Contents include primarily anechoic fluid with occasional echogenic non-shadowing debris, most consistent with exfoliated cells, mucous and/or small blood clots. Both sterile inflammation as well as urinary tract infection can also present with echogenic debris. No masses or cystoliths are observed. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

AGE

10 Years

Prostate (neutered) is normal in size, echotexture and echogenicity for a neutered male.

WEIGHT

36.4 kg

Kidneys are overall normal in size and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased cortical echogenicity and mild loss of corticomedullary distinction, expected in this age patient. There is no evidence of pyelectasia, mineral or infarcts observed. Left kidney measures 7.69 cm. Right kidney measures 7.76 cm.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Adrenal Glands

Left adrenal gland is normal in size (0.52 cm at cranial pole and 0.66 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

IMAGING PERFORMED BY

Kelly Reschy

Right adrenal gland is normal in size (1.6 cm at cranial pole and 0.55 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

HOSPITAL NAME

Nelson AH

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.

REFERRING VET

Dr. Gibson

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.

INVOICE

23845

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.

DATE

8/8/23

Gastrointestinal

The visible stomach wall is normal in thickness and layering. The stomach is moderately overdistended with primarily fluid, as well as some echogenic non-shadowing luminal contents and gas consistent



PATIENT

with normal ingesta/chyme. There is no evidence of obstruction, foreign material or infiltrative disease, however, foreign material cannot be definitively ruled out.

Hunter Grier

SPECIES

The visible small intestines are diffusely normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty, however, focally, in the mid bowel, there is a markedly overdilated bowel loop leading to a bright echogenic curvilinear interface with strong acoustic shadow, concerning for a foreign object with an obstructive pattern.

Canine

BREED

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

Doberman

Pancreas

SEX

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. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

Neutered Male

Free Abdomen

AGE

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy. The suspected foreign body containing bowel loop is surrounded by enhanced hyperechoic mesenteric fat.

10 Years

ULTRASONOGRAPHIC FINDINGS

WEIGHT

Primary Findings

36.4 kg

- Suspect small bowel foreign body with a characteristic obstructive pattern and focal inflammatory changes surrounding the distended bowel loop.

INTERPRETED BY

Secondary Findings

Beth Johnson, DVM
DACVIM

- Age-related kidney changes
- Urinary bladder debris

IMAGING

PERFORMED BY

Kelly Reschy

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

HOSPITAL NAME

As soon as patient is stable enough to undergo surgery, and exploratory laparotomy is recommended for planned foreign body removal +/- bowel removal/biopsy, etc., based on appearance at surgery.

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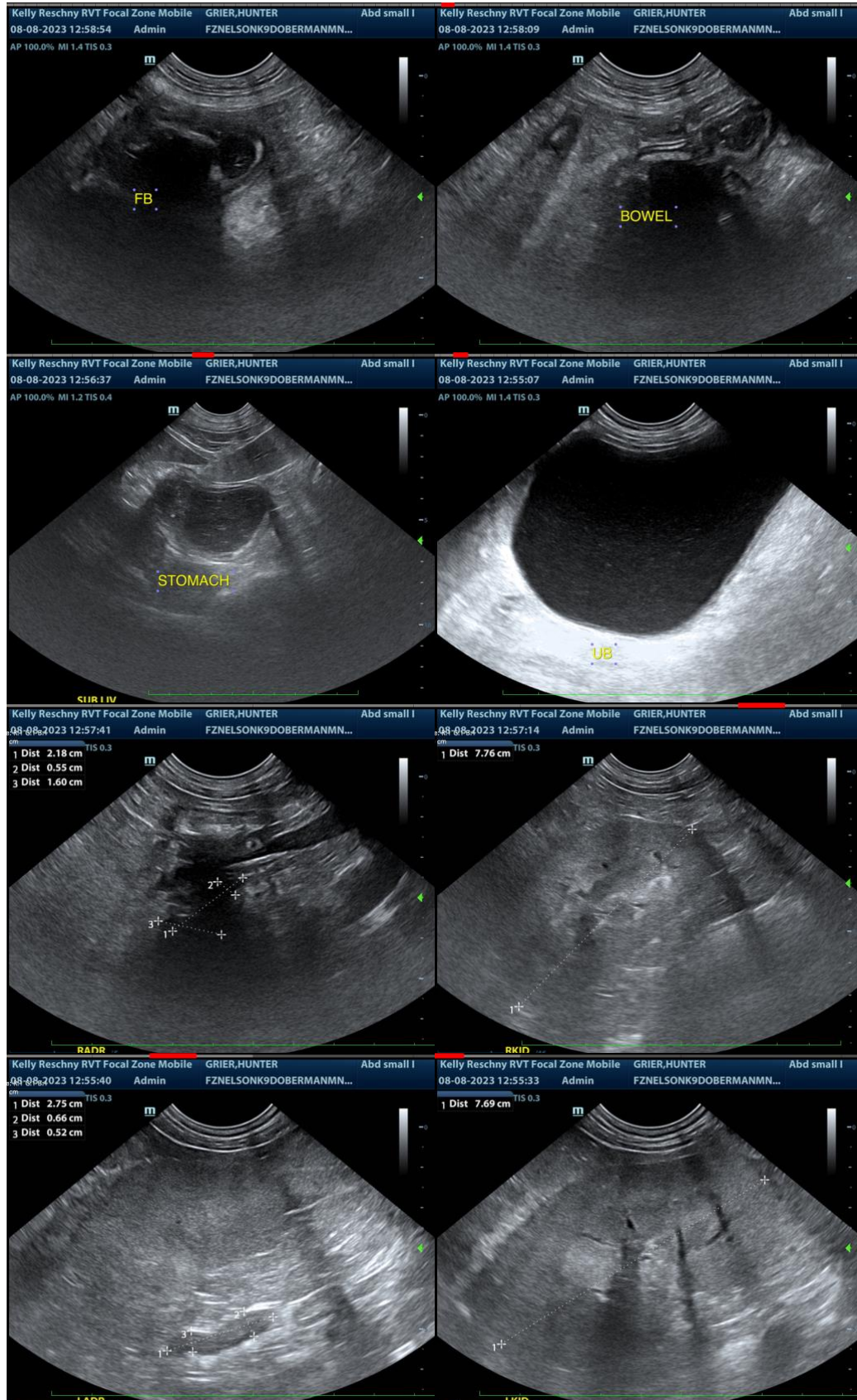
Dr. Gibson

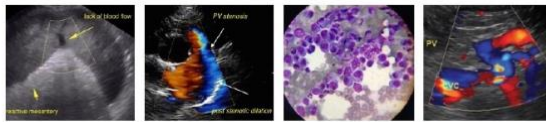
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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.

BREED

Doberman

Beth Johnson, DVM DACVIM

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SEX

Neutered Male

AGE

10 Years

WEIGHT

36.4 kg

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