

**PATIENT**

Tracker (Alyssa) Reyes

**SPECIES**

Canine

**BREED**

Labrador

**SEX**

Intact Male

**AGE**

10 Months

**WEIGHT**

21.9 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING  
PERFORMED BY**

Patti Mayfield, DVM

**HOSPITAL NAME**

Bend AESC

**REFERRING VET**

Patti Mayfield, DVM

**INVOICE**

12708

**DATE**

11/28/21

**PRESENTING CLINICAL SIGNS**

History: Patient was seen 2 days ago after recent ingestion of part of a foam flip-flop. Vomiting was induced and some of the foam was retrieved, but his stomach wasn't completely emptied, per attending DVM. Patient vomited a small amount of bilious fluid this morning. He then ate breakfast normally (~ 6 hours prior to AUS). He has been posturing and straining to defecate, without any production. No diarrhea has been noted. A smaller than typical bowel movement was passed at one point. PPH: Patient had intestinal FB surgery ~ 2 months ago to remove a shoelace embedded within a trichobezoar.

Abnormal PE/Chem/CBC/UA Results: Physical: BAR, hydrated. Eupneic. Soft and supple abdomen. No palpable masses, organomegaly, or fluid wave. Rectal reveals small, formed feces. Patient then walked outside and postured to defecate, without production. Radiographs: Moderate ingesta within the stomach, no obvious FB or obstruction (gastric). Several loops of SI are stacked with blunted gas, however no obvious FB or SI obstruction. Cecum has mild gas and colon has formed feces. Blood work pending

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction.

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 6.0 cm. The left kidney measured 6.48 cm.

**Adrenal Glands**

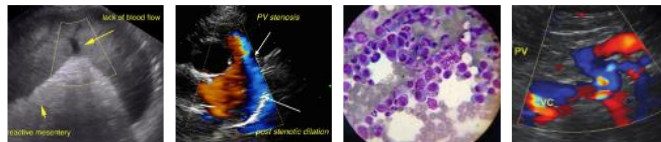
Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The left adrenal gland measured 0.61 cm at the cranial pole and 0.65 cm at the caudal pole. The right adrenal gland measured 1.54 cm at the cranial pole and 0.65 cm at the caudal pole.

**Spleen**

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes were noted.

**Liver**

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No



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pathological hepatic lymphadenopathy was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

## Gastrointestinal

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The **stomach** was filled with soft shadowing material consistent with ingesta, however, soft foreign matter cannot be completely ruled out. The small intestine revealed mild transit of chyme followed by empty small intestine. Normal stool noted in the colon. There is no obvious obstructive foreign body, however, this does appear to be consistent with delayed outflow and only minor transit of chyme in the small intestine.

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Labrador

## Pancreas

## SEX

Intact Male

The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

## ULTRASONOGRAPHIC FINDINGS

## AGE

10 Months

- Delayed outflow pattern

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

## WEIGHT

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No obvious foreign matter. Fecal test warranted to assess for worm burden. \* In one view, a small linear structure appears to be present, however, it does not cause accordion pleating. Cannot rule out a very thin linear foreign body in this patient. Hard stool appears to be in the colon. There is a possibility that the patient has passed material into the colon, however, there is a delayed outflow in the upper GI tract.

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24-hour NPO, IV fluid support and SDEP position 3 as well as following the chyme transit would be indicated from a sonographic perspective. Enema may be appropriate to empty the colon. This may assist in improving the delayed outflow pattern.

## IMAGING PERFORMED BY

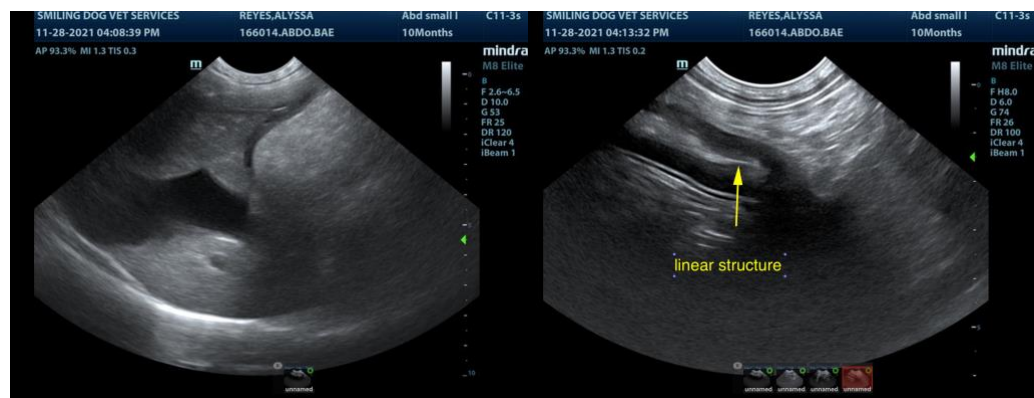
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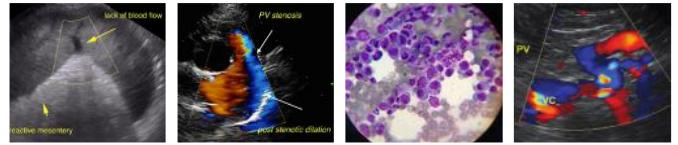


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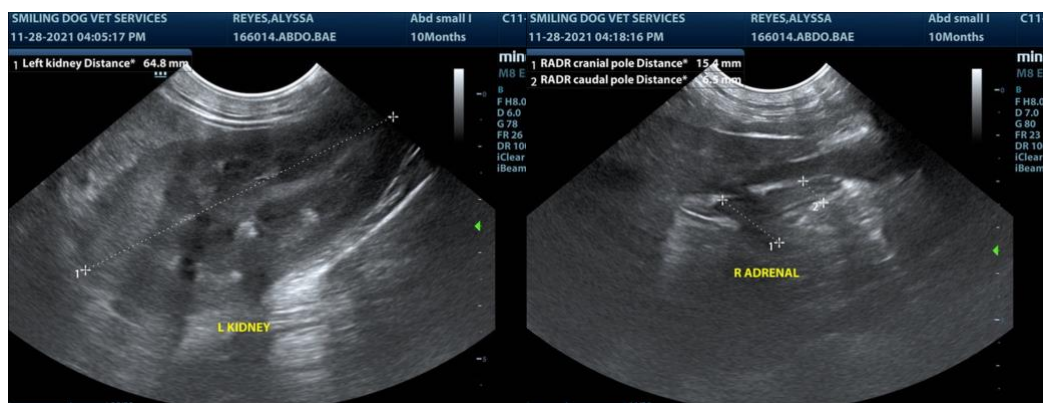
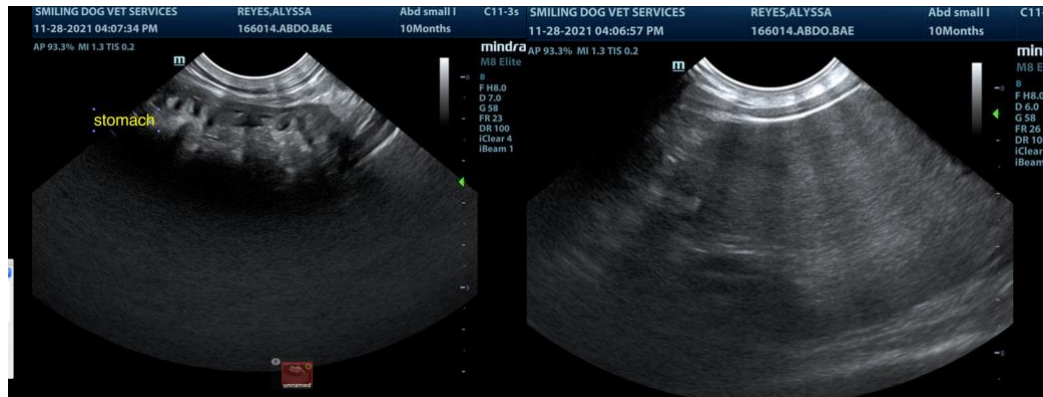
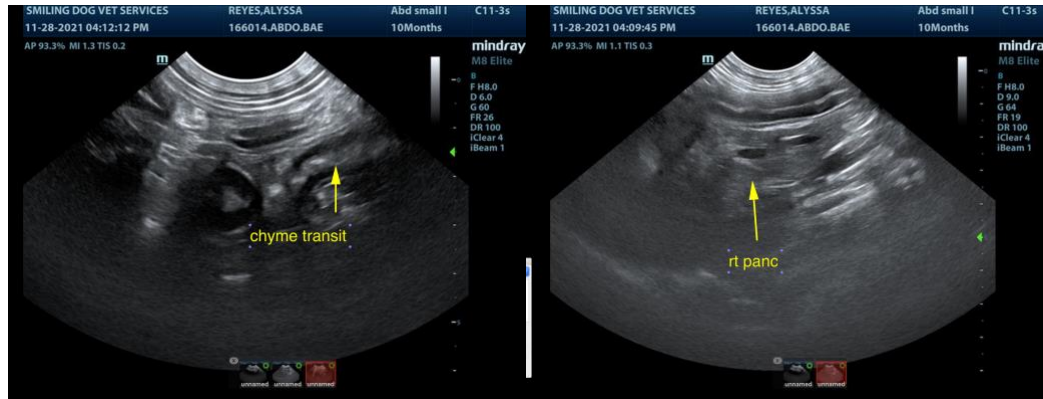
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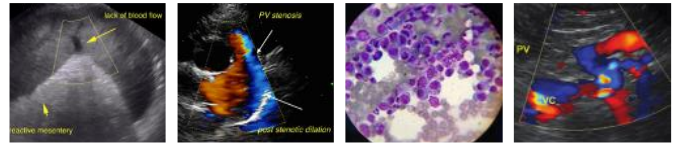
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**Eric Lindquist**, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com  
info@SonoPath.com