

PATIENT PRESENTING CLINICAL SIGNS

Patient: Blu Bandini
History: Anorexia x 2 days - had diarrhea a few days ago, owner gave a dose of Flagyl. No vomiting, but excessive salivation for 2 days. Had Cerenia and Pepcid yesterday.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

Breed: French Bulldog
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 was noted. Ureteral papillae were normal.

SEX

Neutered male

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 4.52 cm. The left kidney measured 4.09 cm.

AGE

3 years

WEIGHT

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 right adrenal gland measured 1.6 x 0.85 cm at the caudal pole and 0.64 cm at the cranial pole. The left adrenal gland measured 1.64 x 0.41 cm at the caudal pole and 0.53 cm at the cranial pole.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Kelly Vazquez, CVT

HOSPITAL NAME

Northvale

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 was noted.

REFERRING VET

Dr. Simon

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

INVOICE

94689

DATE

12/17/21



PATIENT *Gastrointestinal*

Blu Bandini

The **gastrointestinal tract** revealed pyloric to jejunal foreign body fabric material that was anchored in the pylorus and tethered in the jejunum with accordion pleating and obstructive pattern. Concurrent intussusception upon the small intestinal anchor was noted as well. There was no free fluid noted. Variable intestinal thickening was noted.

SPECIES

Canine

BREED

French Bulldog

Pancreas

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.

SEX

Neutered male

ULTRASONOGRAPHIC FINDINGS

Gastroduodenal foreign body, fabric/linear material with concurrent intussusception.

AGE

3 years

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

Surgical intervention is recommended with gastrotomy and enterotomies. GI biopsies are recommended. The intussuscepted portion of intestine may reduce manually. There was no evidence of peritonitis at this point.

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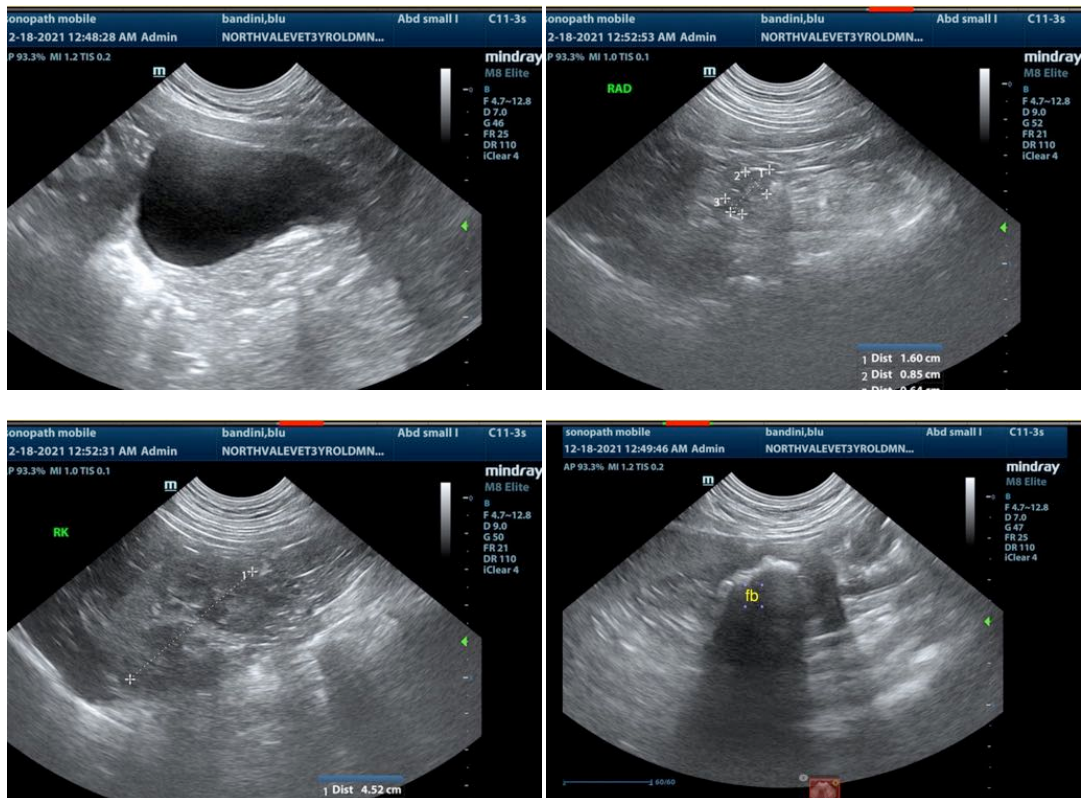
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PATIENT

Blu Bandini

SPECIES

Canine

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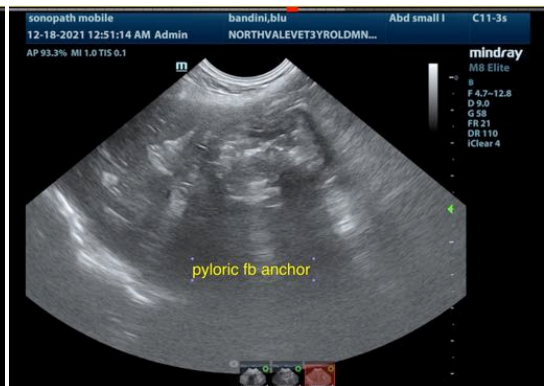
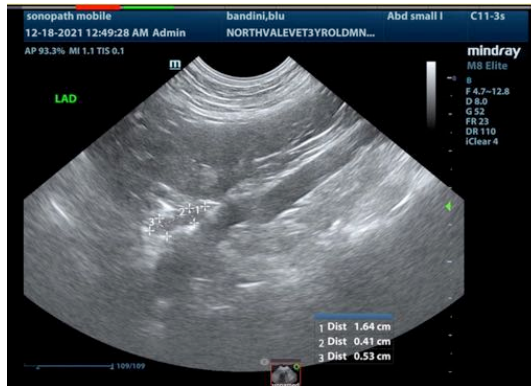
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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