



PATIENT

Penny Offringa

SPECIES

Canine

BREED

Cockapoo

SEX

Spayed Female

AGE

2.5 Years

WEIGHT

18 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. Scott

HOSPITAL NAME

Ho Ho Kus VH

REFERRING VET

Dr. Scott

INVOICE

33797

DATE

12/29/21

PRESENTING CLINICAL SIGNS

Vomiting bile every morning since Christmas- Monday night gave cerenia and no vomiting on tuesday but this morning vomited bile and had liquid bloody diarrhea Eating I/D fine
Abnormal PE/Chem/CBC/UA Results: Rads on Monday WNL

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 **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 left kidney measured 4.0 cm. The right kidney measured 4.0 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 0.5 cm. The right adrenal gland measured 0.5 cm.

Spleen

The **spleen** revealed a slight hypoechoic nodule, non-disruptive, measuring 4.0 mm at the caudal pole.

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.

Gastrointestinal

The upper **gastrointestinal** tract was dilated with empty small intestine, creating a delayed outflow pattern. No overt evidence of foreign body, yet cannot be ruled. The descending colon revealed a minor amount of soft stool.

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.

ULTRASONOGRAPHIC FINDINGS

- Delayed outflow pattern



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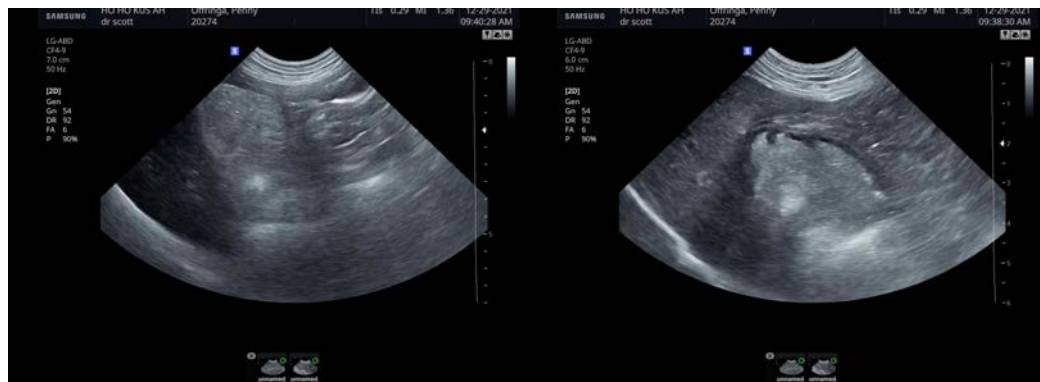
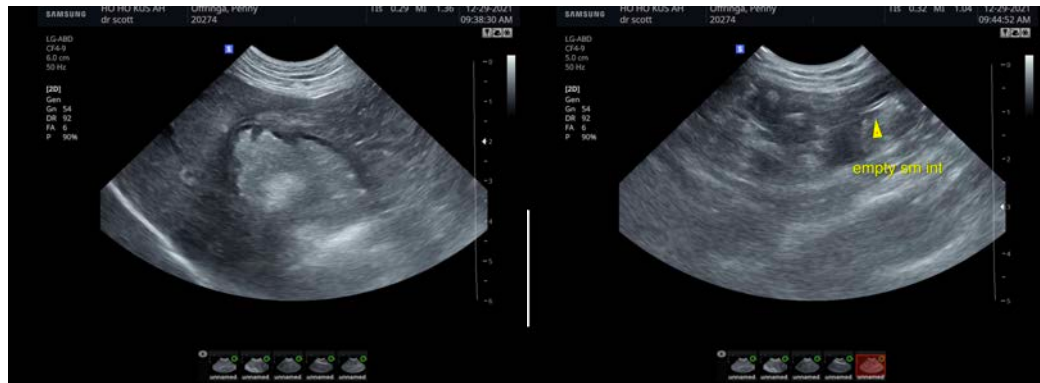
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Recommend treating medically in this patient with recheck sonogram after 8-12 hours NPO, as gastroenteritis and irritable bowel can cause a partial obstructive pattern periodically without an overt foreign body. I'm reluctant to suggest surgery in this patient, as no overt cause of the delayed outflow pattern could be found. Some shadowing material was noted in the stomach, yet this was free floating and not obstructive, most consistent with kibble or similar.





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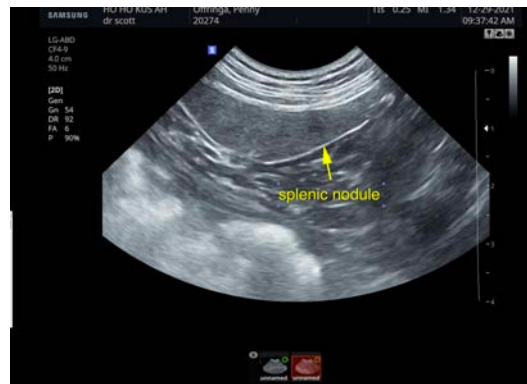
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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
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