



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT**  
Roxy Kimmich

**SPECIES**  
Canine

History: presented today for 24 hour history of vomiting, anorexia, seeming uncomfortable/pacing. Pet has history of foreign body surgeries in past. Last week pet vomited up a toy, was fine after that until yesterday. Exam: mild dehydration, abdomen non-painful. last vomit: 8:30am last ate: 24 hours ago  
 Abnormal PE/Chem/CBC/UA Results: radiographs show very fluid distended stomach, formed feces in colon. CBC/chem/lytes: hct: 66% and increased tp (r/o dehydration), increased t.bili 1.1 (normal 0-0.9), other LES normal, chloride low at 106. (normal 109-122)

**BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Dachshund/Pitbull Mix

**Urinary System**

**SEX**

Spayed Female

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.

**AGE**

11 years

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for this age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 6.0 cm and the right kidney measured 6.0 cm.

**WEIGHT**

33 lbs

**Adrenal Glands**

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

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

**IMAGING PERFORMED BY**

Dr. Myers

**Spleen**

**HOSPITAL NAME**

Hershire AH

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. Myers

**Liver**

**INVOICE**

96866

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.

**DATE**

3/15/22



**PATIENT**

**Gastrointestinal**

Roxy Kimmich

The **stomach** was over distended. A significant amount of gastric stasis was present with progressively shadowing soft pyloric material. The upper duodenum was empty. However, the mid jejunum revealed a 2.0 cm shadowing structure that was lodged in a portion of thickened jejunum with reactive surrounding mesentery. The colon was unremarkable.

**SPECIES**

Canine

**BREED**

**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.

Dachshund/Pitbull Mix

**SEX**

Spayed Female

**ULTRASONOGRAPHIC FINDINGS**

Jejunal foreign body and irregular intestine.

**AGE**

11 years

Gastric stasis with soft pyloric material, this may be grass or similar.

**WEIGHT**

33 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

I recommend exploratory surgery with expectation of evacuation of the stomach. Gastric tube placement with evacuation prior to surgery would be ideal to avoid reflux followed by resection of the small portion of intestine where the 2.0 cm foreign structure is lodged. There was reactive mesentery noted in that area. I recommend reassessing the bilirubin value as the liver appears structurally unremarkable.

**INTERPRETED BY**

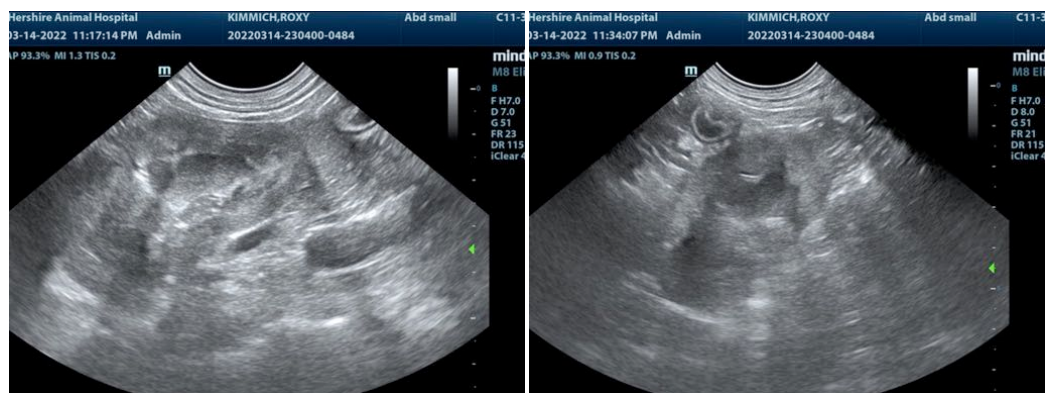
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**PATIENT**

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Dachshund/Pitbull Mix

**SEX**

Spayed Female

**AGE**

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**WEIGHT**

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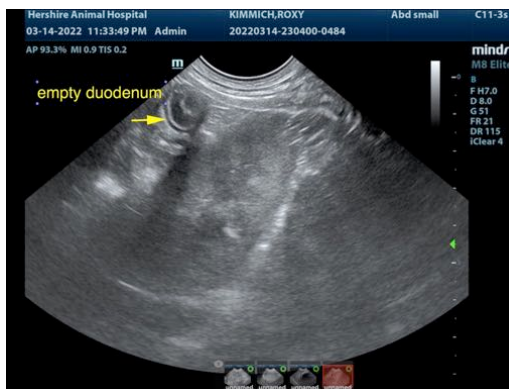
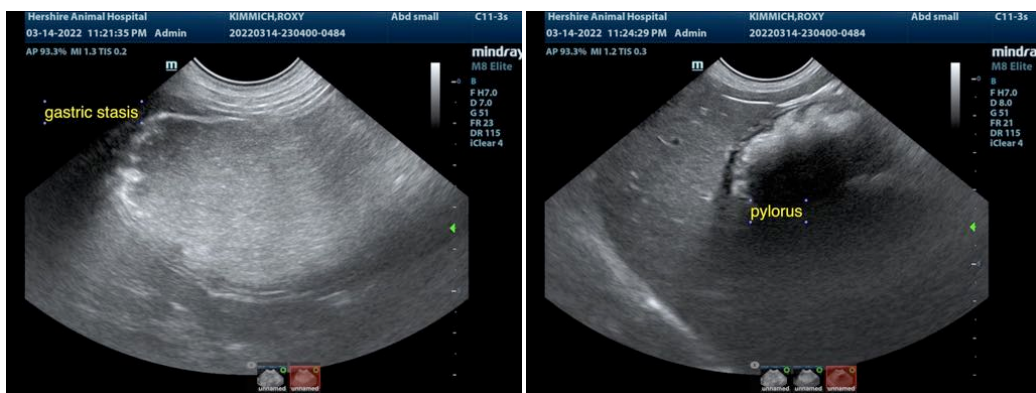
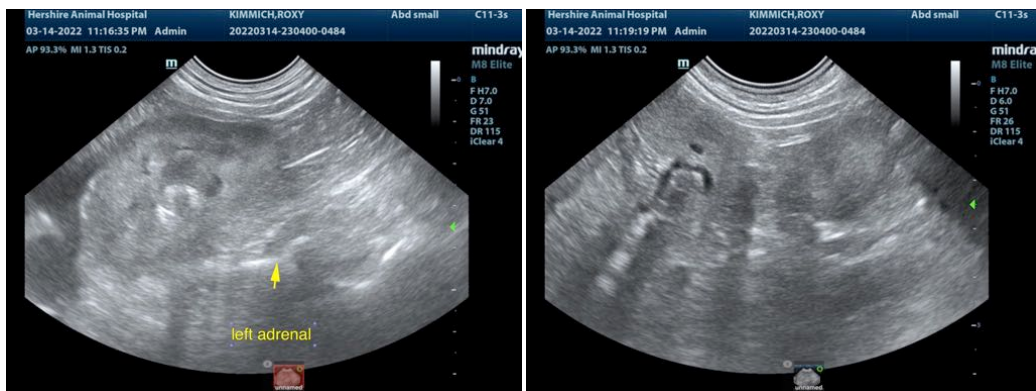
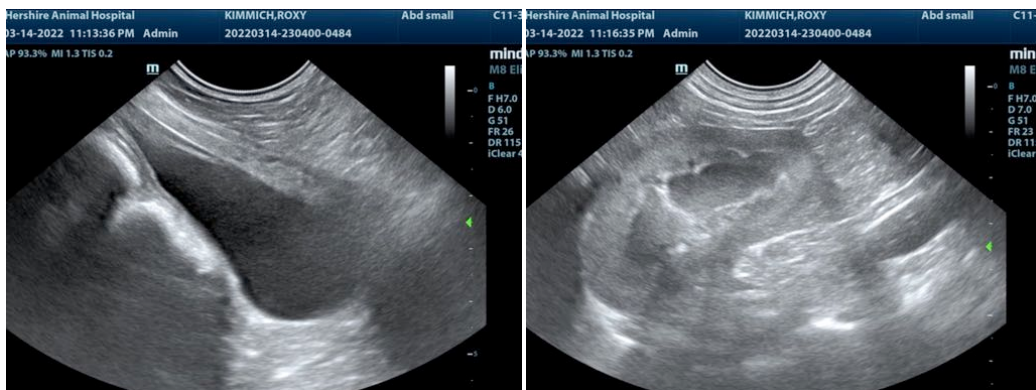
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**BREED**

Dachshund/Pitbull Mix

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.

**SEX**

Spayed Female

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

**AGE**

11 years

**WEIGHT**

33 lbs

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