



**PATIENT**

Champ Felty

**SPECIES**

Canine

**BREED**

American Bully X

**SEX**

Neutered Male

**AGE**

5 Years

**WEIGHT**

32 kg

**INTERPRETED BY**

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

**IMAGING PERFORMED BY**

Erin Wicks

**HOSPITAL NAME**

Shores VEC

**REFERRING VET**

Dr. Zippay

**INVOICE**

21860

**DATE**

4/5/23

**PRESENTING CLINICAL SIGNS**

History: Presented at our hospital for transfer for potential foreign body. Patient started acting off on Saturday. Sunday patient started vomiting and refusing to eat. Patient continued to vomit up food into Monday. Owner took to reg vet and they gave an anti-emetic that seemed to help. Tuesday patient went back to reg vet and got radiographs. Tuesday night patient started to decline even further and became more lethargic. Patient started vomiting bile again. Reg vet recommended surgical explore instead of doing barium study as previously planned. Owner has not seen any poop since Sunday. Previous Health Concerns: heart murmur; hip dysplasia Current Medications: glucosamine; fish oil Appetite/When did they eat last: not eating since Saturday

Abnormal PE/Chem/CBC/UA Results: Rdvm labs: Monocytes \* 1.78; all other wnl Rdvm Radiographs: v/d thorax and abdomen: normal cardiac silhouette, stomach full of ingesta/FB, gaseous dilation of small intestines, some feces present in colon

**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 left kidney measured 6.95 cm. The right kidney measured 7.04 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 3.22 cm x 0.43 cm at the cranial pole and 0.49 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. Cranial folding of the spleen was noted.

**Liver**

The **liver** revealed slight increased portal markings. The gallbladder and common bile duct were unremarkable. A history of cholangitis is likely.

**Gastrointestinal**



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The **stomach** revealed shadowing material and areas of upper GI stasis, followed by empty small intestine, creating an obstructive pattern. Reactive mesentery was noted associated with the small intestine.

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## 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.

## BREED

American Bully X

## Free Abdomen

Slight areas of **free fluid** were noted between the liver and the upper gastrointestinal tract.

## SEX

Neutered Male

## ULTRASONOGRAPHIC FINDINGS

- Gastrointestinal foreign body presentation with mild chronic inflammatory bowel, partial obstructive pattern
- Slight free fluid between the liver and upper GI tract
- Splenic fold

## AGE

5 Years

## WEIGHT

32 kg

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

I recommend exploratory surgery with GI biopsies.

## INTERPRETED BY

Eric Lindquist, DMV  
DABVP, Cert. IVUSS

## IMAGING PERFORMED BY

Erin Wicks

## HOSPITAL NAME

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## REFERRING VET

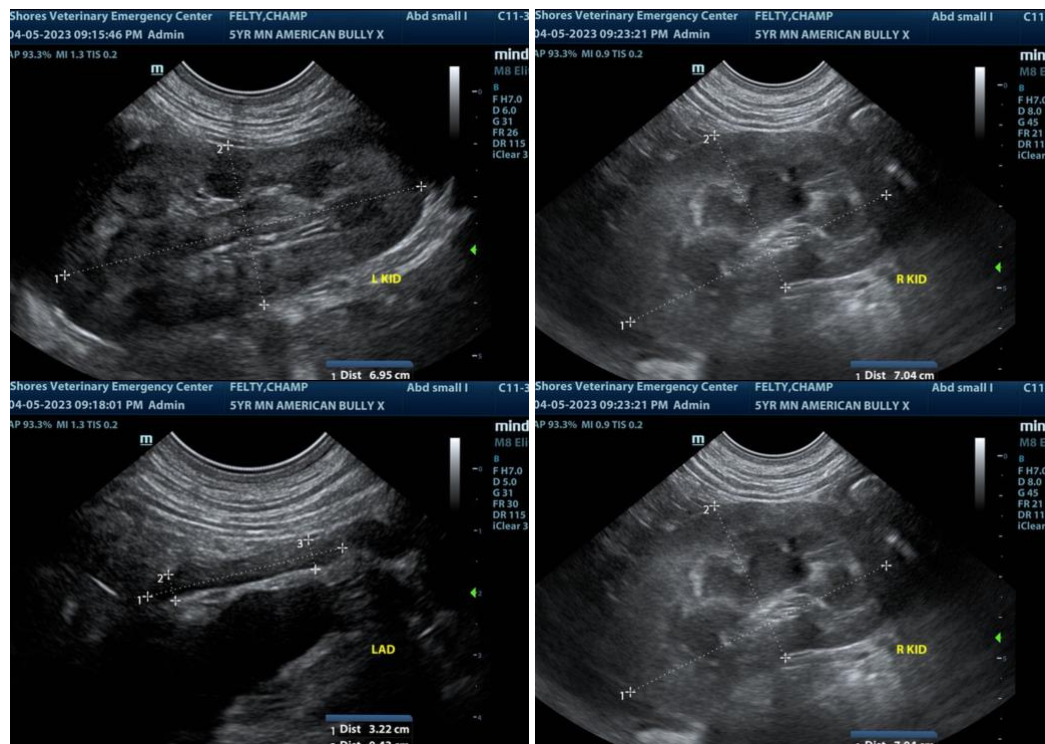
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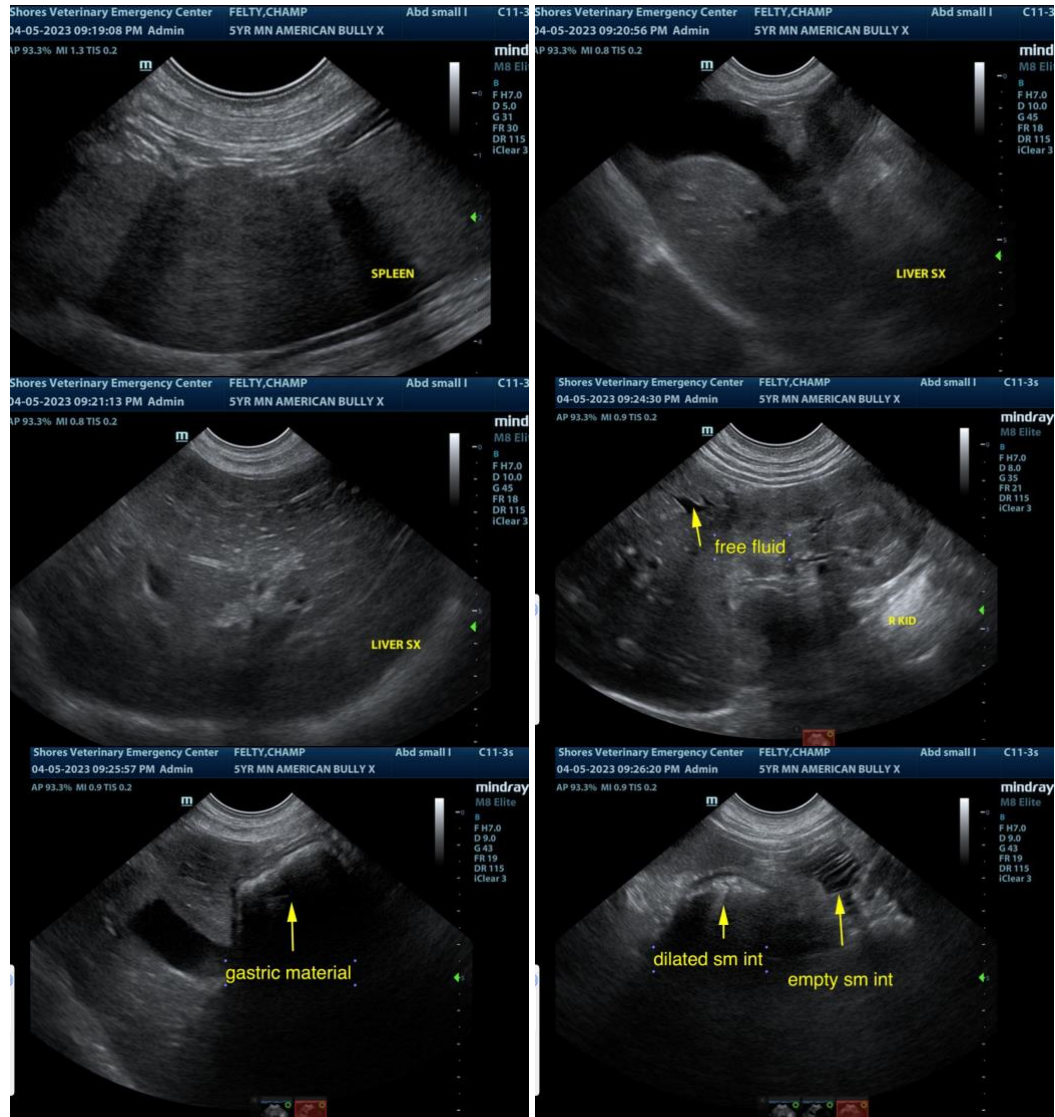
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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