

PATIENT

Binoo Luu

SPECIES

Feline

BREED

DSH

SEX

Spayed Female

AGE

8 Months

WEIGHT

3.35 kg

INTERPRETED BY

Karen Ebersole, DVM,
DABVP (Canine and
Feline practice)

IMAGING PERFORMED BY

Dr. Jill Rankin

HOSPITAL NAME

Petzoic Vet Hospital

REFERRING VET

Dr. Ehab

INVOICE

14722

DATE

03/28/26

PRESENTING CLINICAL SIGNS

- The patient is a recently spayed female presenting with acute vomiting, lack of defecation, and fever, with a history concerning for foreign body ingestion.
- The patient was spayed four days prior to presentation. There is a concern for possible ingestion of a onesie and a buster collar. The patient has not had a bowel movement since Wednesday and began vomiting on Saturday, the day of presentation. A fever of 39.8c was noted on examination.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder was normal in size and shape. The bladder wall was normal in thickness for the volume of urine present. The bladder contents were anechoic with echogenic sediment, without visible discrete urolith formation. There was no visible inflammation in the bladder or urethra. The urethra was visible to 2.0 cm.

The iliac trifurcation was normal in structure and volume. There was no visible lymphadenopathy.

Both kidneys were normal to mildly subnormal in size with normal shape and a smooth capsule contour. There was normal cortical echotexture with acceptable corticomedullary definition. There was no pelvic dilation. The left kidney measured 2.9 cm length. The right kidney measured 2.9 cm length.

Adrenal Glands

Both adrenal glands were normal in size and shape. The parenchyma was homogeneous. The left adrenal gland measured 0.30 cm width. The right adrenal gland measured 0.32 cm width.

Spleen

The spleen was normal in size and shape, with a smooth capsule contour. The parenchyma was finely textured and homogeneous.

Liver

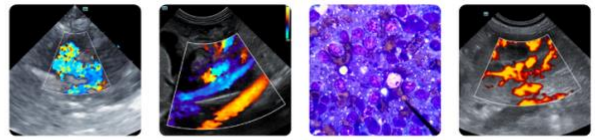
The liver was normal in size and shape, with a smooth capsule contour. The hepatic parenchyma displayed normal echotexture and portal markings. The hepatic vasculature was normal in volume and structure.

The gallbladder was normal in size and shape. The gall bladder was normal in size and shape. The luminal contents were anechoic. The cystic and common bile ducts were normal with no evidence of obstruction or inflammation.

Gastrointestinal

The stomach was markedly distended with fluid and echogenic debris suspected to be ingesta. The pylorus appeared patent with a small amount of fluid. The duodenum was markedly distended with fluid up until a strongly shadowing density that measured approximately 2.2 cm in length and was mildly irregular. After the strongly shadowing density, the small intestines were empty. The colon was normal in thickness and layering and contained formed stool.

The ICJ was clearly visualized and appeared normal in structure and layering.



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Pancreas

The left limb, body and right limb of the pancreas were visualized and found to be normal in size and shape. The pancreatic capsule was smooth, without deviation or expansion. The parenchyma was isoechoic to the surrounding mesentery. The pancreatic duct was normal in size and appearance. There was no evidence of discrete masses or inflammation.

Free Abdomen

Focally enlarged mesenteric lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic with a smooth capsule contour. A normal width: length ratio was maintained (<0.5). There was mild adjacent mesenteric inflammation.

The uterine stump was clearly visualized and appeared normal in size, shape, and echogenicity for the stage post-operatively. The regions of both ovaries appeared normal without any overt pathology.

ULTRASONOGRAPHIC FINDINGS

- Upper GI obstructive pattern with suspected duodenal FB
- Mesenteric lymphadenopathy - reactive pattern
- Mildly subnormal size kidneys
- Mild urinary bladder sediment
- Structurally normal abdomen otherwise

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Exploratory surgery is indicated. There is a strongly shadowing density consistent with a foreign body. The surgery sites appear normal (uterus and ovaries). The kidneys may be slightly subnormal in size, but this could be a normal variant. Correlation with bloodwork is recommended.

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The visible sediment in the urinary bladder may be mucous, crystals, or cells (RBC, WBC or epithelial cells). Mild sediment can be normal at times, particularly in cats. Correlation with a urinalysis is recommended.

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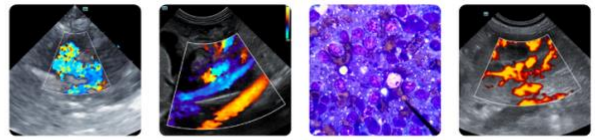
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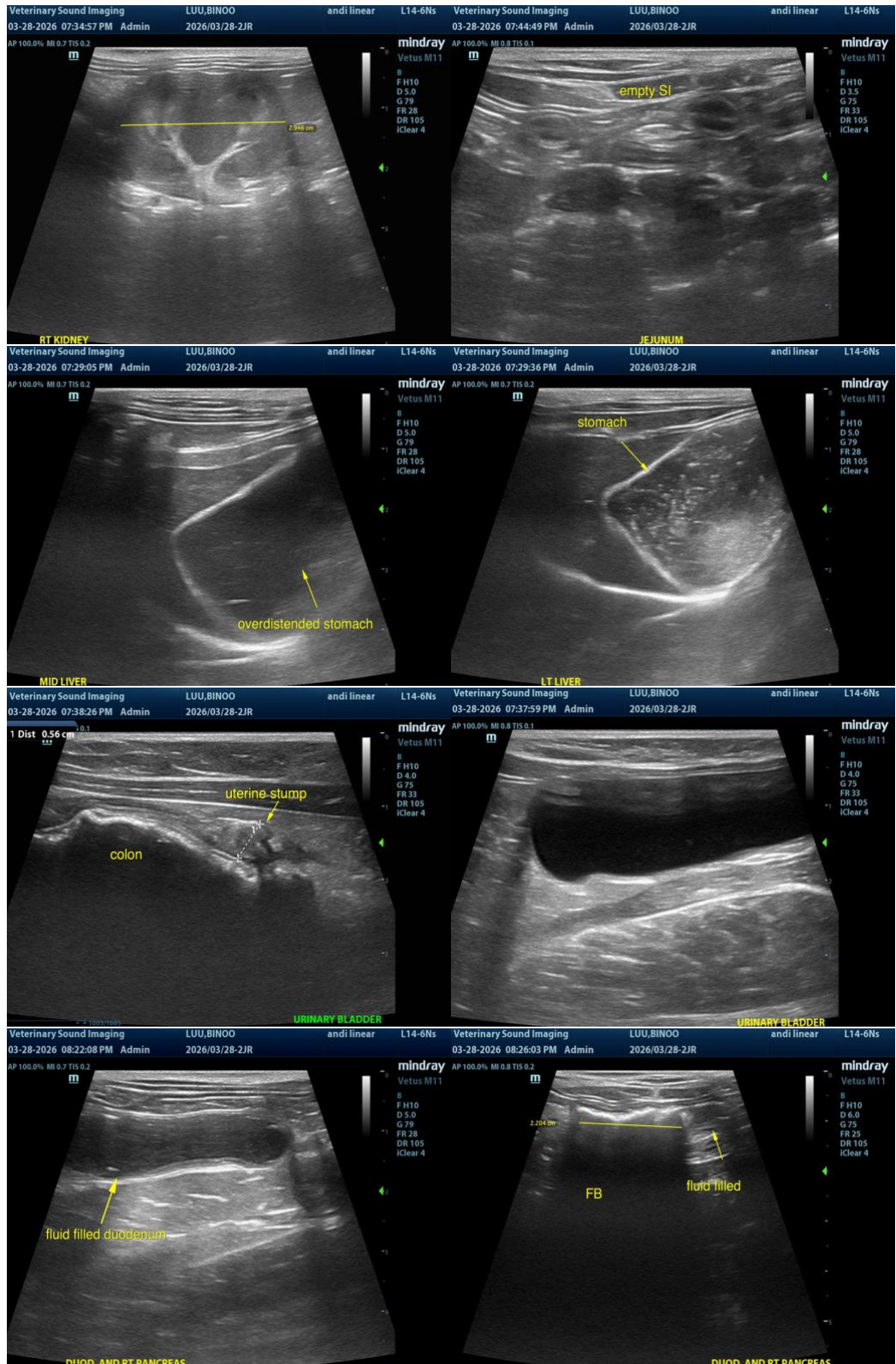
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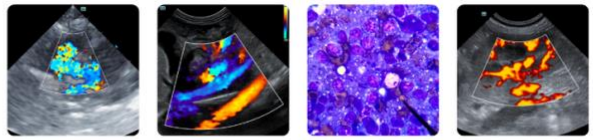
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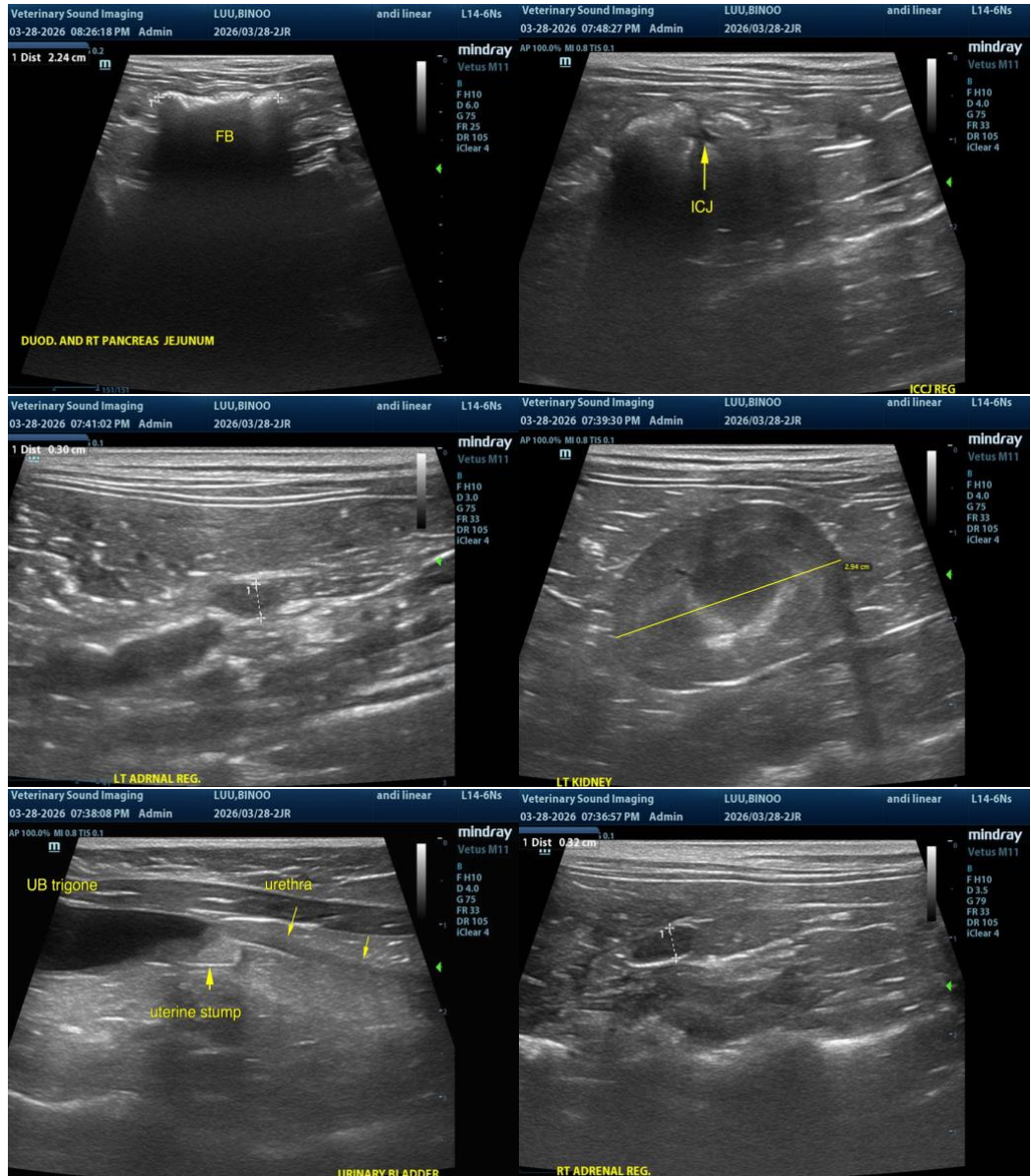
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Karen Ebersole, DVM, DABVP (Canine and Feline practice)

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