



PATIENT PRESENTING CLINICAL SIGNS

Autumn Ferris Vomiting, not drinking at all, will eat but vomits it up hours later, owner says vomit looks undigested Autumn seems depressed, drooling saliva, physical exam shows that seems comfortable. Concerned about gallbladder and any organomegaly. Has been on cerenia as needed.
SPECIES Abnormal PE/Chem/CBC/UA Results: Please see attached radiographs.

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

Labrador Retriever The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

SEX

Spayed Female The left kidney has a normal shape and size (6.44 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

AGE

8 Years

The right kidney has a normal shape and size (6.48 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

29.3 kg

Adrenal Glands

The left adrenal gland is normal in size measuring 0.56 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

INTERPRETED BY

Kathleen Sennello DVM,
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The right adrenal gland is normal in size measuring 0.66 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

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Crystal Hill

Spleen

The spleen is subjectively normal in size, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

HOSPITAL NAME

Queensway AH

Liver

The liver is normal/borderline small in size, and normal in echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

REFERRING VET

Dr. Saad

The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are primarily anechoic. The cystic and common bile ducts are normal/not visible.

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Gastrointestinal

The stomach is dilated with a large amount of fluid and irregular shadowing material most consistent with normal ingesta and gas. It measures at a normal thickness of <0.7cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layering is adequate and there is no

DATE

6/14/22



PATIENT

Autumn Ferris

impression of reduced peristaltic activity. No masses or focal lesions were observed. The shadowing ingesta within the gastric lumen interferes with visualization of the pyloric region.

SPECIES

Canine

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. The duodenum measured as normal (between 0.3-0.5cm in wall thickness) and the jejunum measured as normal (between 0.2-0.47cm.) Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

BREED

Labrador Retriever

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

SEX

Spayed Female

Pancreas

The pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

AGE

8 Years

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

WEIGHT

29.3 kg

ULTRASONOGRAPHIC FINDINGS

- Large, irregular shadowing material visualized within the gastric lumen – correlate with feeding history and abdominal radiographs. If the patient was adequately fasted, then consider delayed gastric emptying or partial outflow tract obstruction/ingested foreign material.
- Borderline small liver – correlate with bloodwork to look for indicators of possible underlying liver issues. If there is concern for this, recommend pre- and post-prandial bile acids.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Crystal Hill

The stomach appears dilated with irregular shadowing material on today's scan. This material shadows and impairs visualization of some areas of the liver, gallbladder, and pyloric region. Correlate these findings with feeding history. If this patient was adequately fasted, I would have concerns about possible ingested foreign material, etc., particularly considering the history of vomiting up undigested food, etc. Recommend 3-view thoracic radiographs to evaluate the esophagus and intrathoracic structures.

HOSPITAL NAME

Queensway AH

The liver appears subjectively small. This could be a normal anatomic variant, but in a Labrador, I am always concerned about chronic active hepatitis, etc. Therefore, if there is concern for liver enzyme elevations or abnormalities in liver function values (BUN, albumin, etc.), then consider a liver function test.

REFERRING VET

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If gastric material is thought likely and/or liver dysfunction, consider surgical evaluation with biopsies of the gastrointestinal tract and liver.

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SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed Female

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**IMAGING
PERFORMED BY**

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HOSPITAL NAME

Queensway AH

REFERRING VET

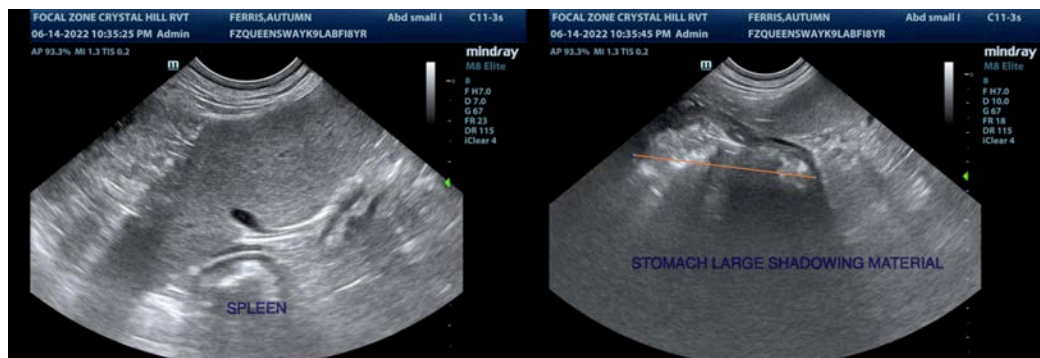
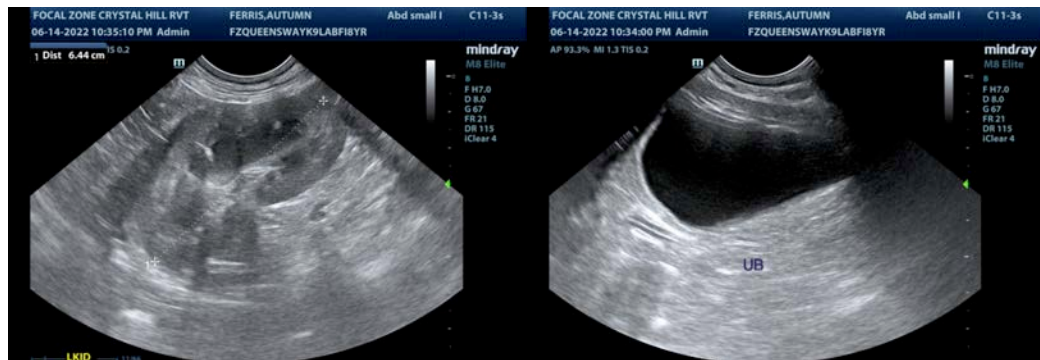
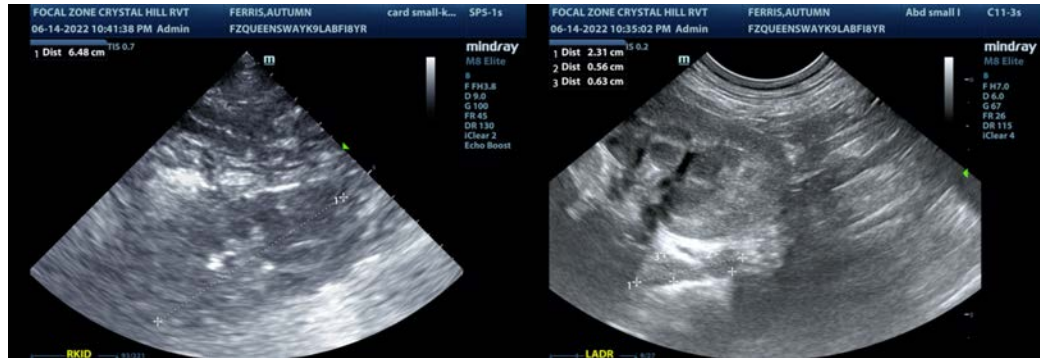
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

SPECIES

Canine

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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BREED

Labrador Retriever

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SEX

Spayed Female

AGE

8 Years

WEIGHT

29.3 kg

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