

PATIENT PRESENTING CLINICAL SIGNS

Skye Morris had cystotomy on Sept 8, hasn't urinated, is drinking and on fluids.
Abnormal PE/Chem/CBC/UA Results: Please see attached BW

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED The urinary bladder is mildly distended with urine. The Bladder wall is severely thickened and somewhat irregular, measuring at 1.1 cm. No mass effects or calculi are visualized. The area of the trigone and proximal urethra appear relatively patent. Full evaluation of the urinary bladder is difficult to lack of urine distention.

Husky X

SEX The left kidney has a normal shape and size (6.38 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Spayed Female

AGE The right kidney has a normal shape and size (6.85 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

10 Years

WEIGHT Adrenal Glands

18.4 kg The left adrenal gland is normal in size measuring 0.47 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, MS, Diplomate ACVIM (Small Animal Internal Medicine)

The right adrenal gland is normal in size. 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.

IMAGING PERFORMED BY

Spleen

Kelly Reschny 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

Liver

Collegeway AH The liver is subjectively normal in size, and 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. Hanna The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are mild and primarily anechoic. The cystic and common bile ducts are normal/not visible.

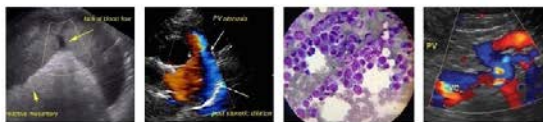
INVOICE

Gastrointestinal

41284 The stomach contains minimal luminal contents. 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 layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

DATE

9/14/22



PATIENT

Skye Morris

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. Many areas of small intestine appear corrugated, most consistent with irritation secondary to peritonitis.

SPECIES

Canine

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.

BREED

Husky X

Pancreas

The area of 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.

SEX

Spayed Female

Free Abdomen

There is a large amount of free abdominal fluid. No lymphadenopathy. The omentum is diffusely hyperechoic.

AGE

10 Years

ULTRASONOGRAPHIC FINDINGS

- Large volume free abdominal fluid – most consistent with uroabdomen.
- Diffuse thickening of the urinary bladder – could be consistent with bacterial cystitis, inflammatory disease, less likely diffuse neoplastic disease. Lack of urine distention exacerbates the thickened appearance of the urinary bladder wall.
- Corrugated small intestine – This enteritis is likely secondary to the peritonitis present.

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(Small Animal Internal
Medicine)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The combination of the history, large volume free abdominal fluid, and bloodwork provided is most consistent with an advanced uroabdomen. Additionally, the urinary bladder is diffusely thickened and abnormal. An obvious location of a rent or tear is not visualized, and the incision line cannot be identified.

IMAGING PERFORMED BY

Kelly Reschny

Recommend immediate stabilization of this patient, as the electrolyte disturbances could be life threatening. If possible, drain the urine from the abdomen, place a urinary catheter, and start IV fluids. This patient will need emergency surgery +/- a contrast cystourethrogram to try to determine where the urine is leaking from. Recommend a urinalysis, culture, biopsy of the urinary bladder wall, and thorough lavage of the abdomen. Referral to a veterinary surgeon would be ideal, but surgery must not be significantly delayed beyond stabilization of this patient.

HOSPITAL NAME

Collegeway AH

REFERRING VET

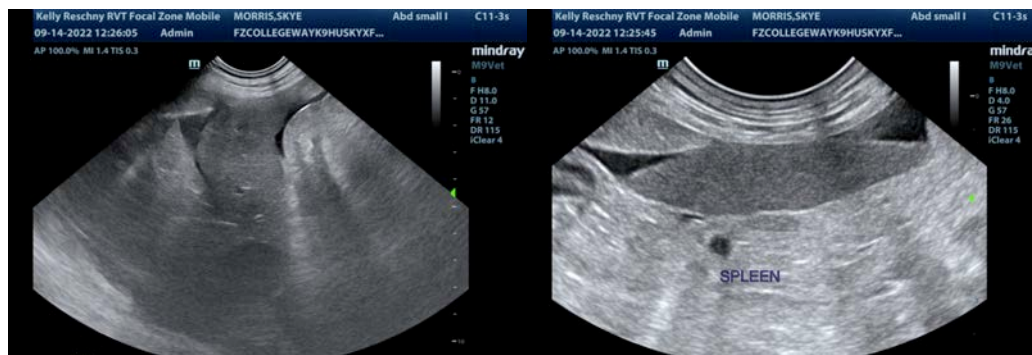
Dr. Hanna

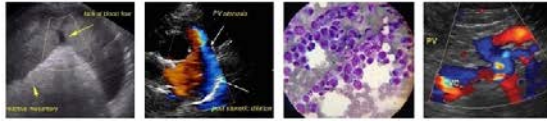
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SPECIES

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Husky X

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AGE

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WEIGHT

18.4 kg

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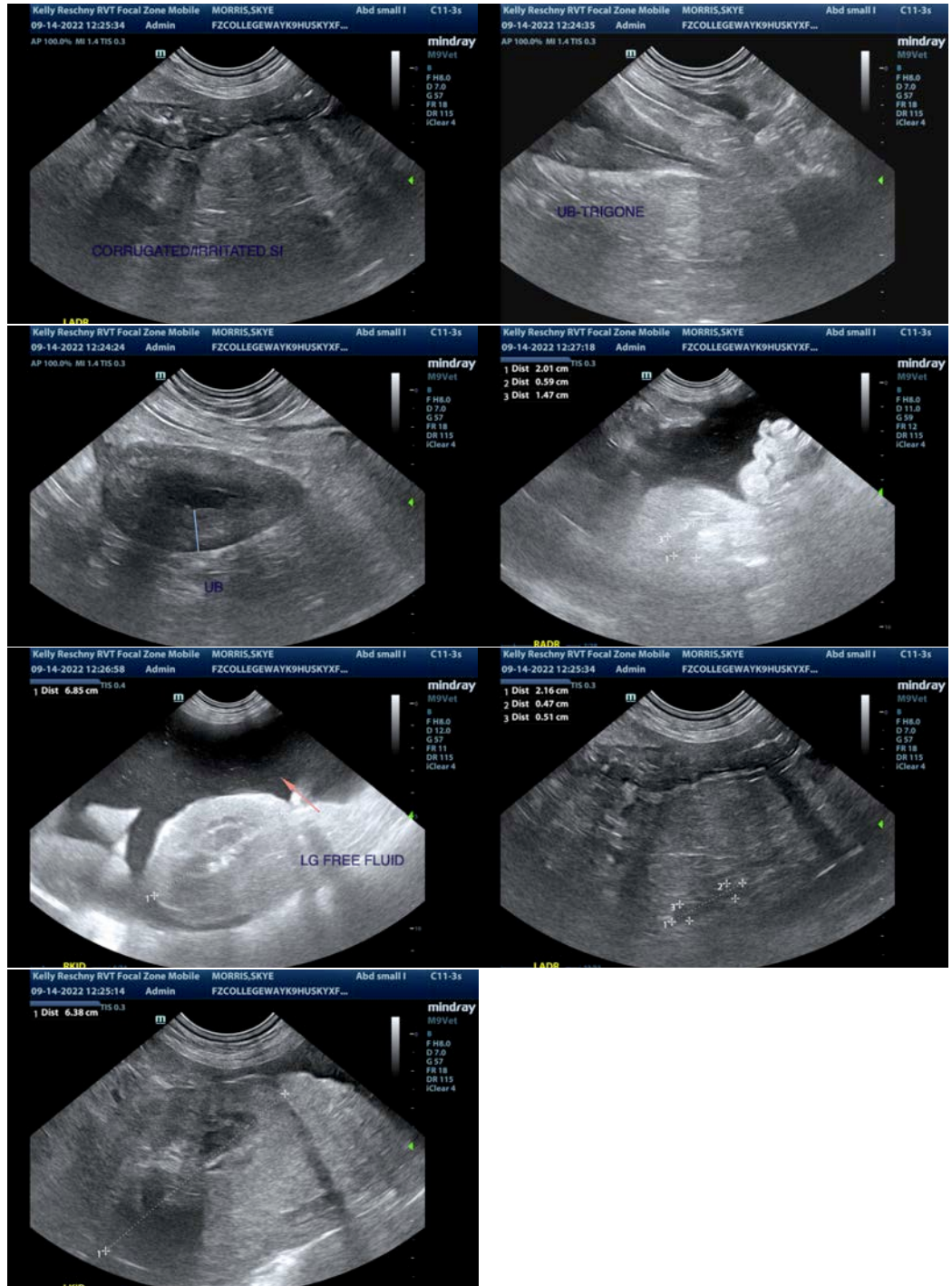
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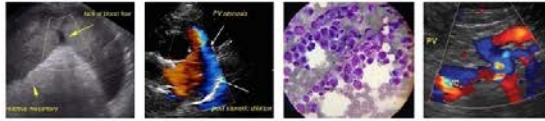
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PATIENT

Skye Morris

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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

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Husky X

SEX

Spayed Female

AGE

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