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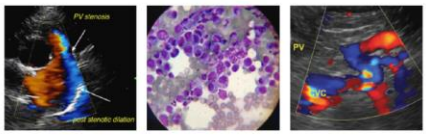

SonoPath
Clinical Sonography & Telecytology
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PATIENT
Turner Barnard

SPECIES
Canine

BREED
Lab

SEX
MN

AGE
13 years

WEIGHT
72.5 lbs.

INTERPRETED BY
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

IMAGING PERFORMED BY
Amy Mayhew LVT

HOSPITAL NAME
SVS Imaging MI

REFERRING VET
Airport Veterinary Hospital- Dr. Lindner

INVOICE
15792

DATE
1/10/23

PRESENTING CLINICAL SIGNS

Gagging/coughing since November

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and cystourethral junction exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

The residual prostate was symmetrically normal in size with uniform parenchyma and slight coarse echotexture measuring 1.2 cm in diameter.

The area of the aortic trifurcation was free of pathology.

A normal 1:3 cortex / medulla ratio was maintained in the kidneys. The medulla and cortices were uniform in texture with some increased echogenicity and moderate loss of corticomedullary symmetry and definition expected for the age of the patient. Mild bilateral pyelectasia was present. The left kidney measured 7.0 cm in length. Potential mild subnormal right kidney size compared to the left was noted. The right kidney measured 4.4 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.94 cm width at the caudal pole and 0.79 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.55 cm width at the caudal pole and 0.56 cm width at the cranial pole.

Spleen

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

Liver/ Gallbladder

The liver presented subjective mildly enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with mildly prominent to hyperechoic gallbladder walls and concurrent mild hyperechoic non-organized, luminal sludge primarily along the inner luminal wall exhibiting central anechoic content. No evidence of peripheral gallbladder inflammatory criteria was noted. The cystic and common bile ducts were normal.

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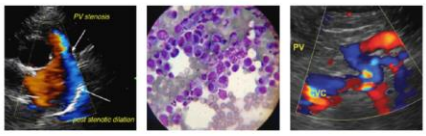

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Gastrointestinal

The stomach was moderate to markedly distended with strongly shadowing ingesta extending into the pyloric outflow. The visualized gastric walls were sonographically unremarkable. The ventral gastric body wall width measured 0.38 cm. The ventral pyloric wall width measured 0.35 cm.

The small intestine presented intact wall layering and maintained a 1:3 muscularis/mucosa ratio with minor segmental duodenojejunal hyperechoic yet non-shadowing ingesta/chyme. No evidence of small intestinal obstructive pattern was noted. The duodenum wall measured 0.5 cm width. The jejunum wall measured 0.34 cm width.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum, likely consistent with age-related pancreatic changes. No sonographic evidence of active pancreatic inflammation or neoplasia was noted.

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

ULTRASONOGRAPHIC FINDINGS

- Moderate to markedly distended stomach containing strongly shadowing ingesta
- Overtly normal small bowel with minor segmental nonshadowing ingesta / chyme - no evidence of an intestinal obstructive pattern
- Mild heterogeneous pancreas - suspect age-related pancreatic changes
- Bilateral moderate chronic renal changes with mild pyelectasia

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the patient's clinical signs, the primary finding is moderate to markedly distended stomach containing strongly shadowing nonspecific ingesta, which may indicate retained dense food with some degree of nonobstructive gastric hypomotility, mild gastritis / esophagitis or generalized gastrointestinal inflammation. However, in conjunction with the submitted radiographs, degree of gastric distention, and degree of ingesta shadowing, concern for gastric foreign material or nonobvious mechanical upper gastrointestinal or pyloric outflow is warranted.

Hospitalization with IV fluid, gastrointestinal support, and sonographic / radiographic monitoring for evidence of gastric emptying over the next 12-24 hours following documented NPO is recommended. Endoscopy, if available, could be considered.

Assuming no evidence of thoracic or esophageal pathology on three view chest radiographs, and if persistent retained gastric ingesta despite NPO, exploratory laparotomy with potential gastrotomy

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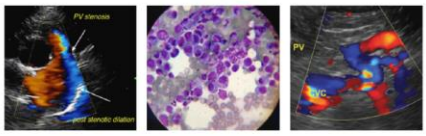

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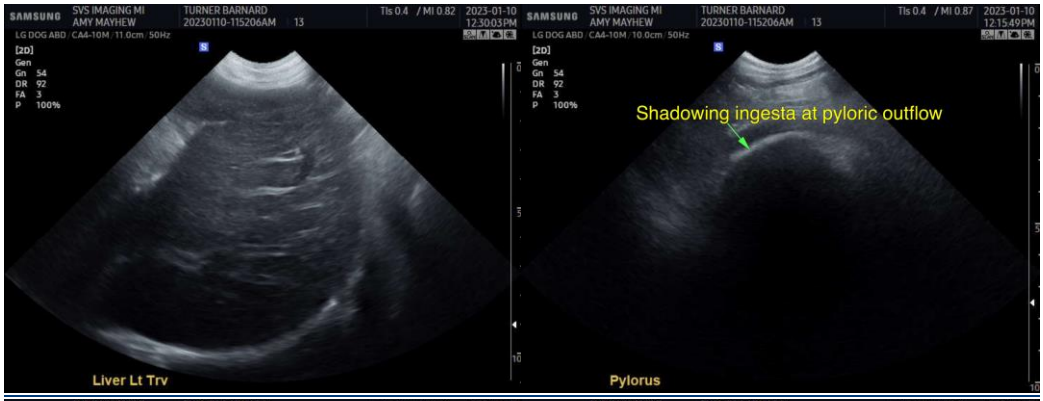
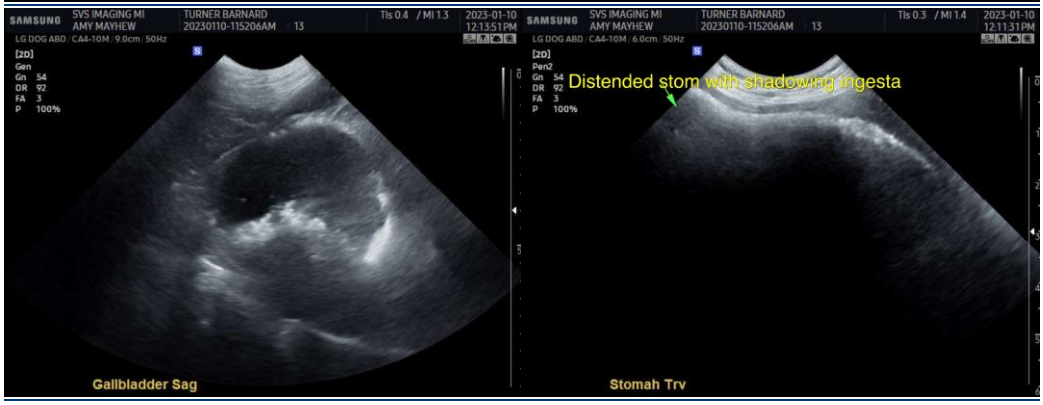
and with gastrointestinal biopsies (considered essential despite exploratory findings) may be indicated.





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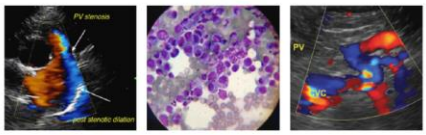

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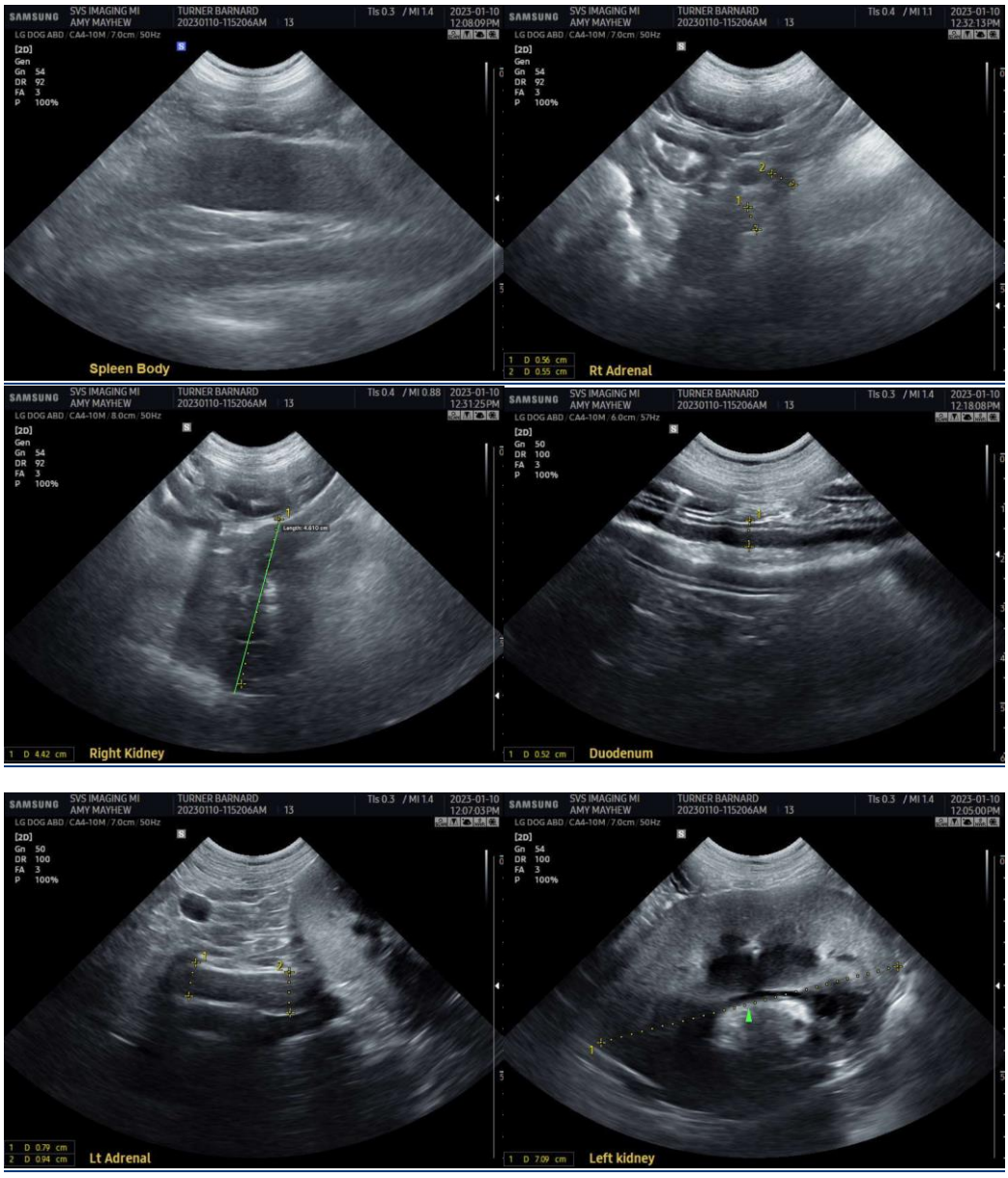

The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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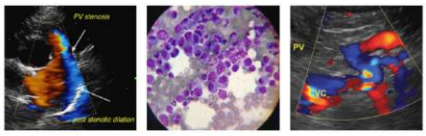

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