



**PATIENT**

Lewes Pry

**SPECIES**

Canine

**BREED**

Mini Labradoodle

**SEX**

MN

**AGE**

2 years

**WEIGHT**

31 lbs.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Rodriguez

**HOSPITAL NAME**

Foxfield VS

**REFERRING VET**

Dr. Rodriguez

**INVOICE**

**DATE**

1/11/23

**PRESENTING CLINICAL SIGNS**

Hyporexia since 1/07/2023. At small amount of rice and chicken this am  
Abnormal PE/Chem/CBC/UA Results: WNL 1/7/23

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm 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 area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 5.0 cm in length. The right kidney measured 5.2 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 0.60 cm width at the caudal pole and 1.8 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 0.70 cm width at the caudal pole and 2.0 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 was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild potentially retained variably echogenic non-shadowing chyme. Within the chyme focal to several curvilinear echoes exhibiting distal acoustic shadowing were present, an example measured 1.0 cm in diameter. The echoes did not appear to be obstructive to pyloric outflow. empty with no signs of ileus, obstruction, or foreign material. The ventral gastric body wall measured 0.32 cm.



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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained segmental non-shadowing chyme with no signs of ileus, obstruction, or foreign material. The duodenum wall measured 0.35 cm width. The jejunum wall measured 0.25 cm width.

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

### **Pancreas**

The parenchyma of the left limb, body, and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease were evident.

### **Free Abdomen**

No peritoneal effusion was present. Focal, mildly prominent to enlarged mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of a lymph node measured 2.9 cm x 1.0 cm.

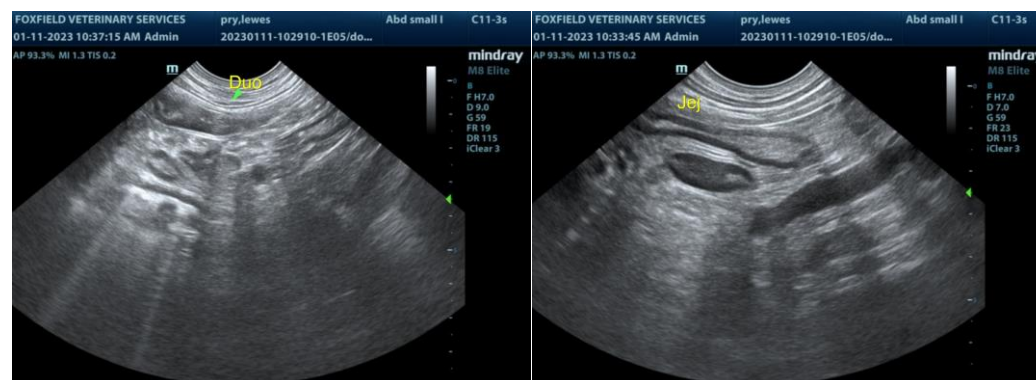
## ULTRASONOGRAPHIC FINDINGS

### **Primary Findings**

- Gastroenteritis pattern with focally shadowing gastric ingesta/chyme
- Focal/intermittent benign to reactive mesenteric lymphadenopathy
- Sonographically normal pancreas

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of GI obstructive criteria was present. The focally shadowing echoes within the retained gastric ingesta/chyme were non-specific and may correlate with ingesta or medication. The possibility of non-obstructive gastric foreign bodies cannot be excluded. Suspect mild acute gastroenteritis pattern. Given this presentation, no indication for immediate surgical intervention. Acute gastroenteritis protocol and sonographic monitoring of the gastric echoes over the next 12-24 hours would be reasonable.





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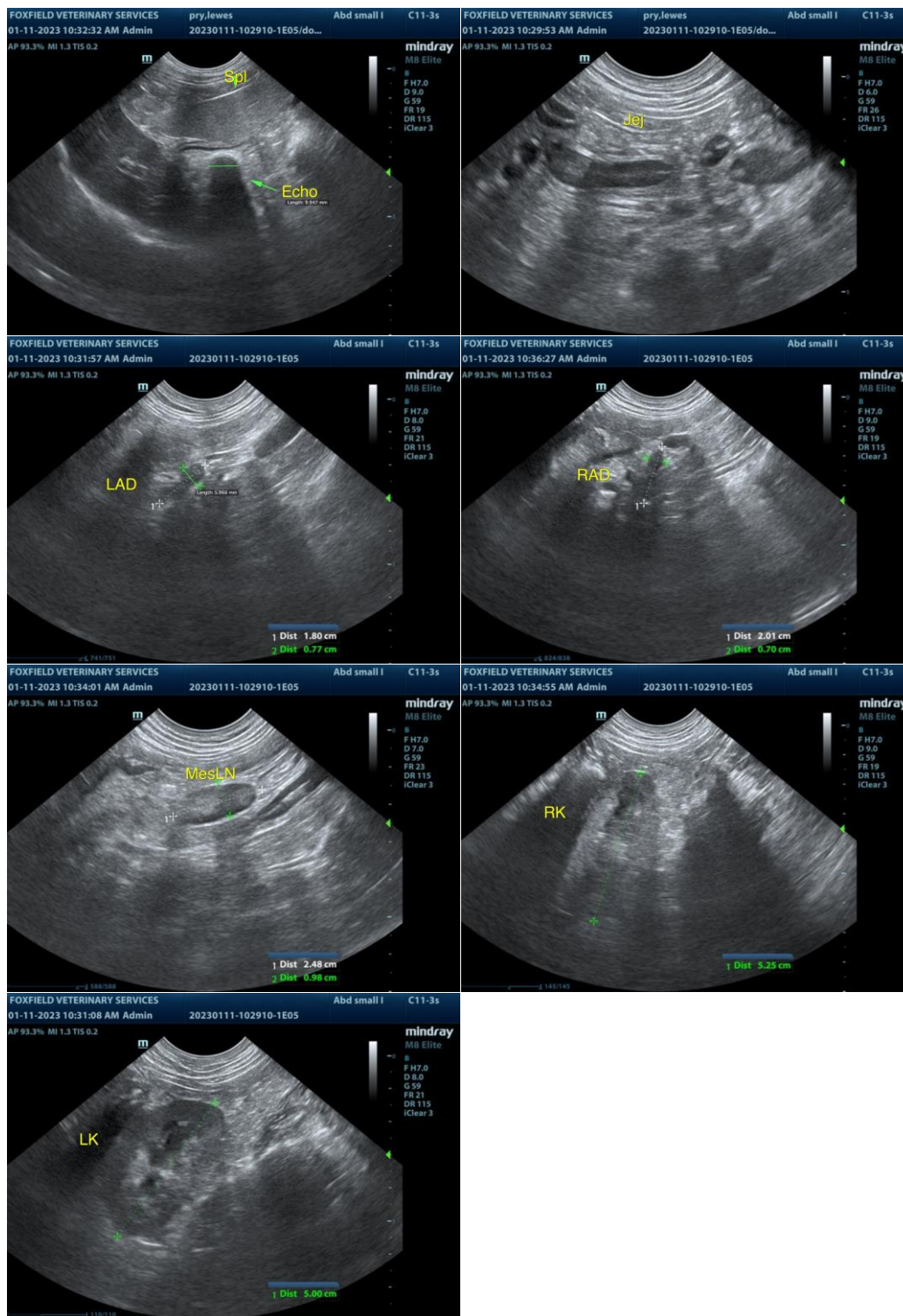
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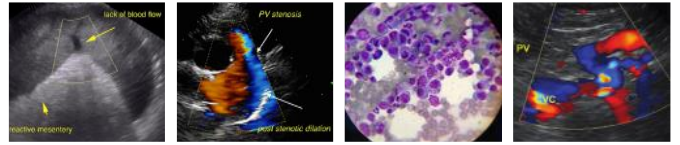
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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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**info@SonoPath.com**

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