



PATIENT PRESENTING CLINICAL SIGNS

Ruby Grabow Recheck exam from emergency hospital initial exam last Wednesday. Today Abdomen was subjectively distended, mm were hemoconcentrated.

SPECIES Abnormal PE/Chem/CBC/UA Results: CBC showed hemoconcentration, Chem17 and lytes were WNL, CPL was normal
Canine

BREED Current Medications Cerenia, metamucil.

Mini Australian Shepherd Radiographic Findings Three views of the abdomen were taken. The two lateral views showed a ground glass appearance in the cranial abdomen. There appeared to be a soft tissue opacity caudal to the liver and cranial to the tail of the spleen on both laterals as well. The VD showed food in the stomach with poss enlarged gastric mucosa.

SEX

FS

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

AGE *Urinary System*

10yr The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2 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 were noted.

WEIGHT

23.60lb

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 4.1 cm in length. The right kidney measured 5.5 cm in length.

INTERPRETED BY

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

The area of the aortic trifurcation was free of pathology.

IMAGING PERFORMED BY

Sara Hansen

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.58 cm width at the caudal pole and 2.2 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.66 cm width at the caudal pole and 2.0 cm length.

HOSPITAL NAME

South Willamette
Veterinary Clinic

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.

REFERRING VET

Dr. Shelton

INVOICE

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Liver/Gallbladder

The liver was subjectively borderline to mildly enlarged. 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.

DATE

01/16/2023



PATIENT *Gastrointestinal*

Ruby Grabow The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild to moderate non-shadowing variably echogenic ingesta/chyme/fluid with no signs of ileus, obstruction or foreign material.

SPECIES

Canine The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained mild segmental ingesta/chyme and luminal gas with no signs of ileus, obstruction or foreign material.

BREED

Mini Australian Shepherd The colon exhibited generalized distention containing non-formed to liquid fecal matter consistent with diarrhea.

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Pancreas

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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 was evident.

AGE

10yr

Free Abdomen

WEIGHT

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

23.60lb

ULTRASONOGRAPHIC FINDINGS

- Mild to moderate retained gastric ingesta/fluid with generalized colonic distention containing non-formed/liquid fecal matter-subjective gastroenterocolitis pattern

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(Canine and Feline)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The gastroenterocolic presentation is suggestive of potential inflammation if the patient is exhibiting GI signs/diarrhea.

IMAGING PERFORMED BY

Sara Hansen

Overall, there is no overt evidence of significant abdominal visceral pathology as a definitive cause of the patient's clinical signs. No evidence of abdominal neoplastic criteria, GI foreign material or obstructive criteria was present. Correlation with clinical history is recommended.

As needed GI support, dietary therapy +/- empirical deworming and resting cortisol level may be considered if clinically indicated.

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The radiographic soft tissue opacity caudal to the liver and cranial to the tail of the spleen is suspected to be consistent with distended transverse to proximal descending colon or possibly stomach.

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Ruby Grabow

SPECIES

Canine

BREED

Mini Australian Shepherd

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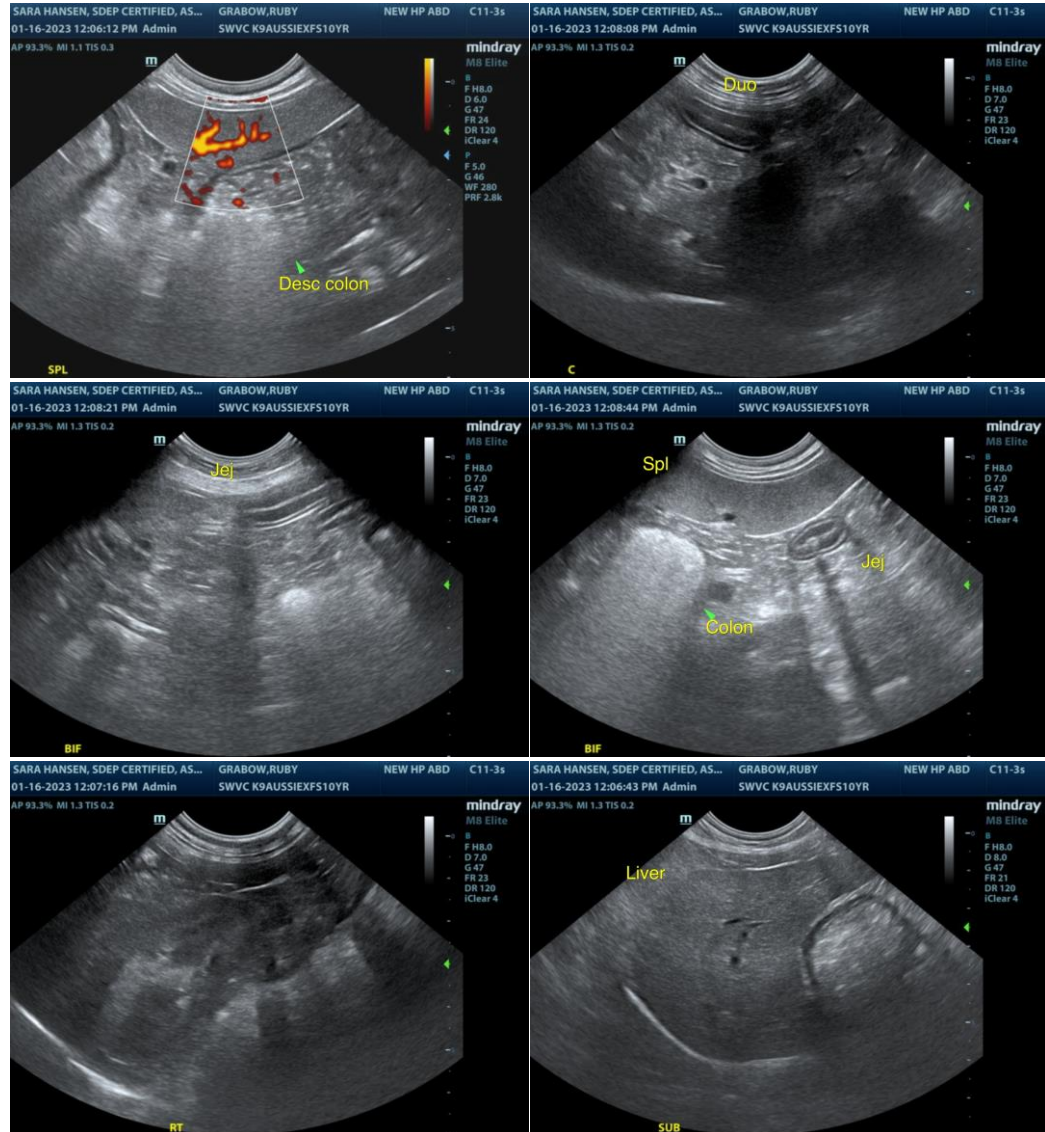
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PATIENT

Ruby Grabow

SPECIES

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Mini Australian Shepherd

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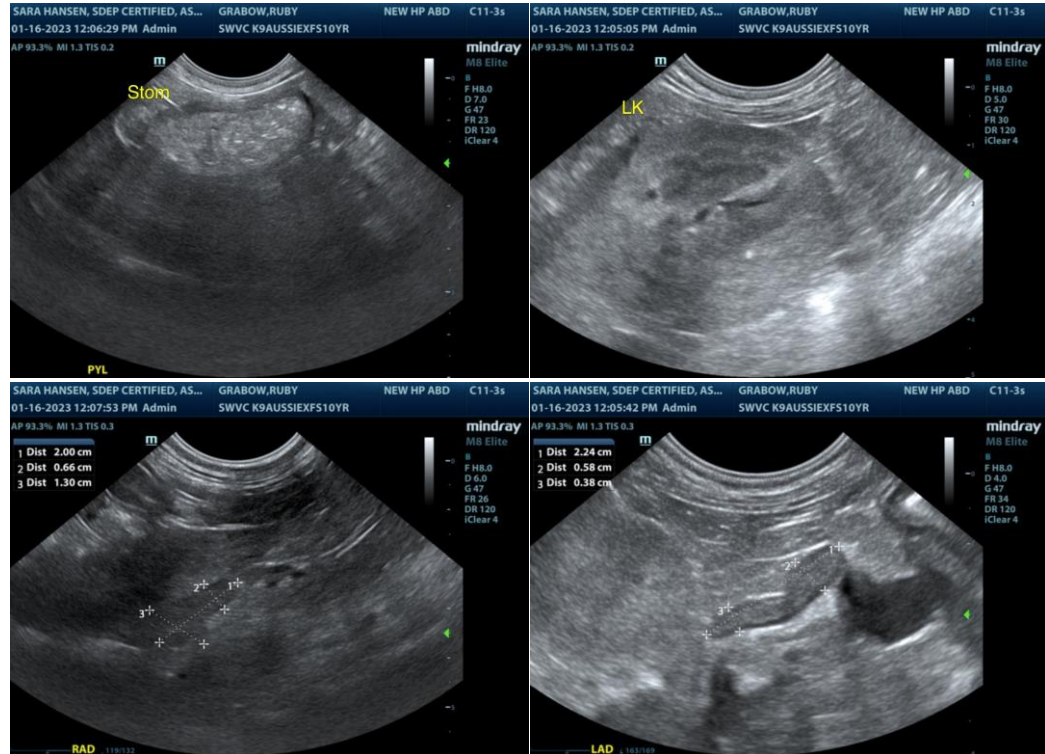
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

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