



PATIENT	PRESENTING CLINICAL SIGNS
Louie Paglione	History: Vomiting x24 hrs, hx of eating table food, no known fb ingestion Abnormal PE/Chem/CBC/UA Results: PE:" nsf, radiology- gas distended stomach CBC/CHEM/Ua: n/a
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of – 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.
Mix	
SEX	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 4.5 cm in length. The right kidney measured 4.6 cm in length.
Neutered Male	
AGE	Adrenal Glands
9/13	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.57 cm width at the caudal pole and 0.58 cm width at the cranial pole.
WEIGHT	The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.52 cm width at the caudal pole.
18.5 Lbs.	
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	Liver
Ashley Fatzer	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.
HOSPITAL NAME	Gastrointestinal
Andover AH	The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. The pylorus wall measured 0.45 cm. The stomach exhibited mild to moderate gas distention. Overt evidence of retained fluid, ingesta or foreign material was not definitively evident.
REFERRING VET	
Dr. Hummel	
INVOICE	
13613	The small intestine presented intact wall layering and maintained 1:3 muscularis/mucosa ratio. No evidence of small intestinal mechanical/metabolic ileus or overt foreign material. The duodenum wall measured 0.43 cm. The jejunum wall measured 0.35 cm.
DATE	
1/25/22	Normal visible colon wall layers were present with apparent formed feces in lumen.



PATIENT

Pancreas

Louie Paglione

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.

SPECIES

Canine

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

BREED

Mix

ULTRASONOGRAPHIC FINDINGS

- Mild acute gastroenteritis pattern with mild gastric gas distention

SEX

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No indication for surgical intervention given the lack of obstructive pattern within the gastrointestinal tract. Technically, the possibility of non-visualized foreign material in the stomach owing to gastric gas distention cannot be definitively excluded yet thought less likely. Potential for low-grade to chronic pancreatitis which may present sonographically normal, likewise, cannot be definitively excluded. However, medical therapy for gastroenteritis should prove beneficial in this case. Radiographic monitoring of degree of gastric gas distention recommended. Dietary indiscretion/food intolerance, acute gastroenterotoxic insult, occult parasitism or if more chronic gastrointestinal signs, structurally insignificant inflammatory bowel could be possible.

WEIGHT

18.5 Lbs.

INTERPRETED BY

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

IMAGING PERFORMED BY

Ashley Fatzer

HOSPITAL NAME

Andover AH

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DATE

1/25/22





PATIENT

Louie Paglione

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

9/13

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The information and recommendations provided are based on the images presented by the referring veterinarian. 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.



PATIENT

Louie Paglione

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com

SPECIES

Canine

BREED

Mix

SEX

Neutered Male

AGE

9/13

WEIGHT

18.5 Lbs.

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