



PATIENT	PRESENTING CLINICAL SIGNS
Rocky Pereira	HBC last night dog has not eaten since last night
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	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.
Yorkie	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 3.8 cm in length. The right kidney measured 3.9 cm in length.
SEX	The area of the aortic trifurcation was free of pathology.
MN	The area of the residual prostate appeared normal and free of pathology.
AGE	Adrenal Glands
5	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.34 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 0.70 cm width at the caudal pole and 1.6 cm length.
WEIGHT	Spleen
9.6	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.
INTERPRETED BY	Liver/Gallbladder
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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.
IMAGING PERFORMED BY	Gastrointestinal
Jenn	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate variably echogenic non-shadowing ingesta with no signs of ileus, obstruction or foreign material. Indistinct non-specific pyloric shadowing measuring ~ 2.0 cm in diameter was present which may indicate ingesta or gas. .
HOSPITAL NAME	INVOICE
Rockaway Animal Hospital	12833ag
REFERRING VET	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.
Dr. Maniar	DATE
	01/31/2023
	Normal visible colon wall layers were present with apparent formed feces in lumen.



PATIENT

Pancreas

Rocky Pereira

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 omental masses, overt lymphadenopathy or peritoneal effusion was present.

BREED

Yorkie

ULTRASONOGRAPHIC FINDINGS

- Retained variably echogenic gastric ingesta with focal non-specific pyloric shadowing

SEX

MN

Secondary findings

- Unremarkable small bowel
- Intact urinary bladder, no evidence of peritoneal effusion

AGE

5

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the time frame from most recent reported meal, the presence of gastric ingesta may indicate some degree of metabolic gastric hypomotility or delayed gastric emptying. Overt evidence of pyloric outflow obstructive criteria was not obvious, yet the subtle pyloric shadowing is non-specific and the potential for a small amount of pyloric foreign material cannot be definitively excluded.

WEIGHT

9.6

No evidence of intra-abdominal trauma or bleeding.

Supportive care over the next 24 hours with documented 12 hour NPO and sonographic reassessment of the stomach would be ideal.

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal
Hospital

REFERRING VET

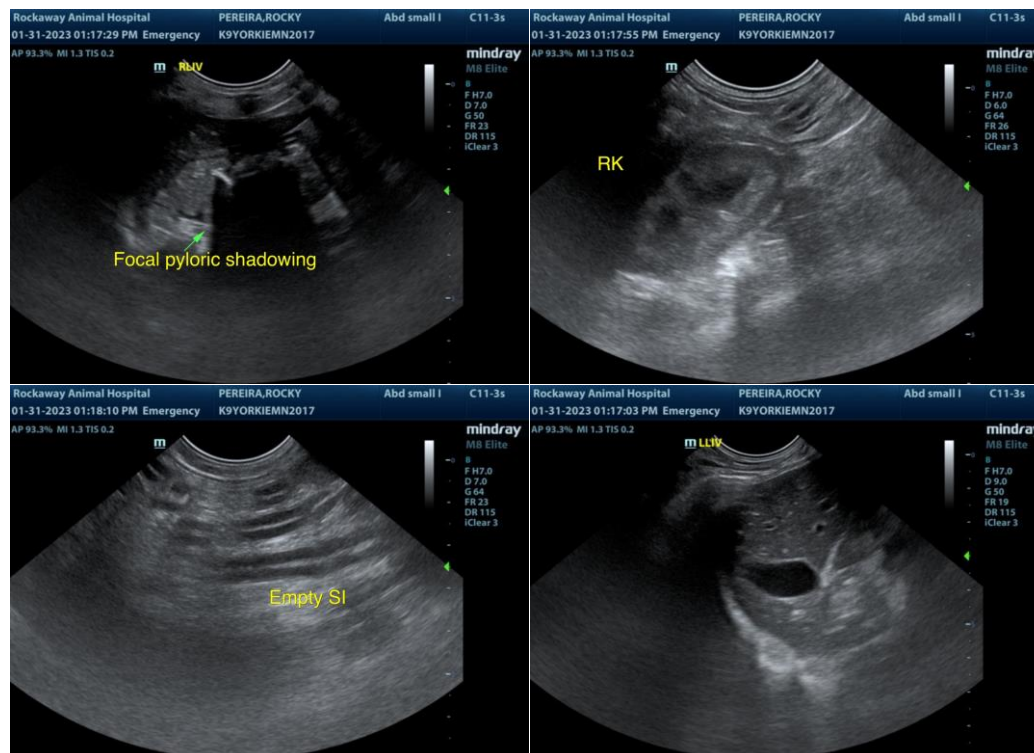
Dr. Maniar

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PATIENT

Rocky Pereira

SPECIES

Canine

BREED

Yorkie

SEX

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AGE

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WEIGHT

9.6

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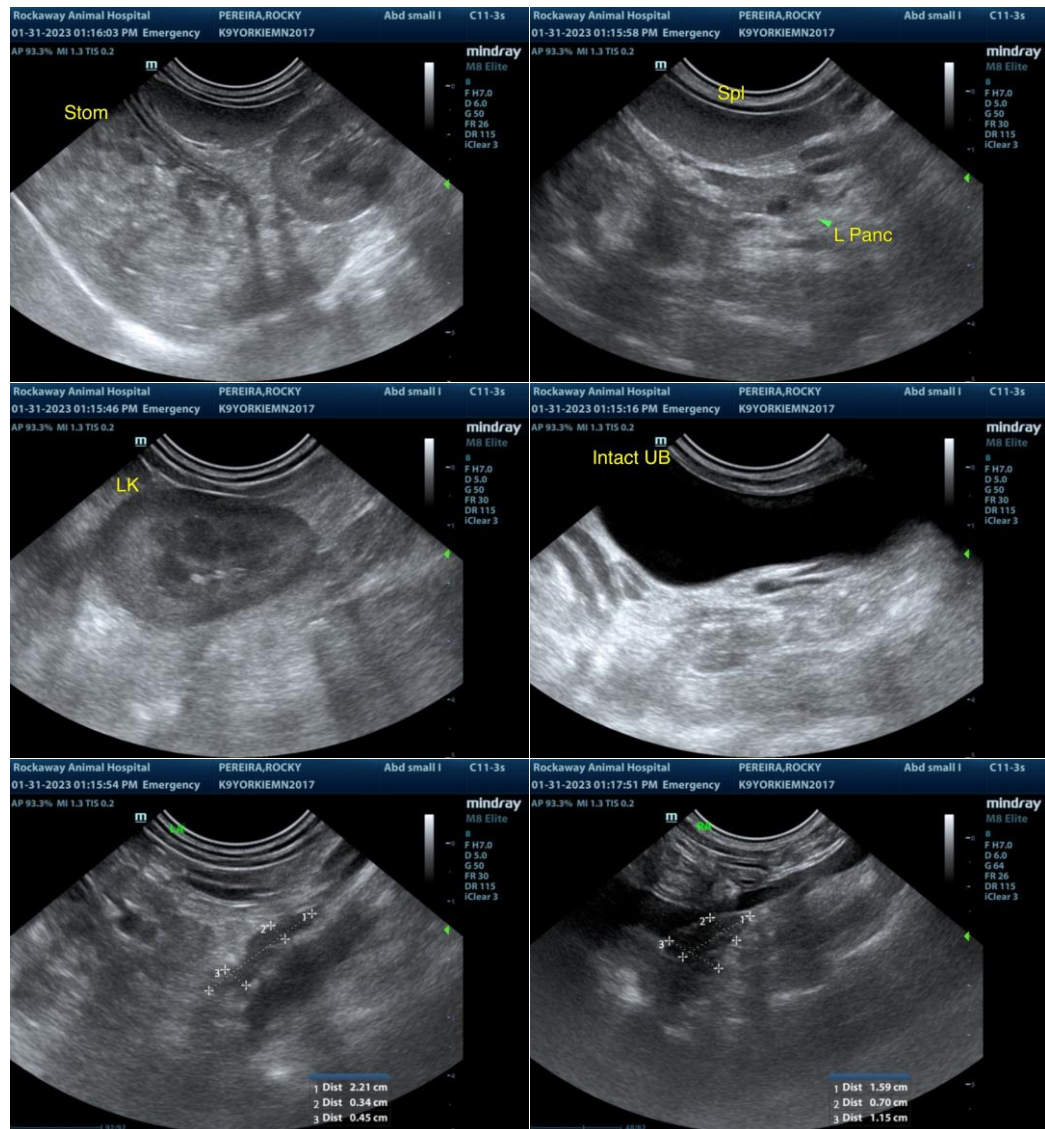
Dr. Maniar

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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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