

PATIENT PRESENTING CLINICAL SIGNS

Blaze Shaffer Anorexia for ~1 week, was vomiting, lethargy, hiding.

Medication: Omeprazole

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Feline

Urinary System

BREED The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

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 3.7 cm in length. The right kidney measured 4.0 cm in length.

AGE 2021 The area of the aortic trifurcation was free of pathology.

Adrenal Glands

WEIGHT 11.8 The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.37 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.39 cm width.

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
 Rebekah Jakum, CVT
 ARDMS/RVT

Liver

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

Little Gap AH

Gastrointestinal

REFERRING VET

Dr. Shelly

The stomach presented intact wall layering with a normal wall layer ratio. Suspicious variably hyperechoic non-shadowing ingesta/echo was present in the area of the antrum and pylorus. The lumen of the stomach contained mild retained anechoic fluid.

INVOICE

11952ag

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Generalized duodenal plication with hyperechoic linear foreign body was present appearing to involve the majority of the duodenum and potentially extending into the upper jejunum. Concurrent segments of empty small intestine without evidence of mechanical ileus were also present.

DATE
 10/21/2022

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



PATIENT *Pancreas*

Blaze Shaffer The pancreas base and right pancreatic limb was indistinctly visualized owing to regional increased pancreatic omental artifact. Potential for concurrent low-grade pancreatic inflammation is possible.

SPECIES *Free Abdomen*

Feline Regional peri duodenal hyperechoic mesentery was present.

BREED Focally enlarged gastric and pancreaticoduodenal lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly margined. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node size was 1.0 cm in diameter.

DSH

No overt evidence of peritoneal free fluid.

SEX

ULTRASONOGRAPHIC FINDINGS

MN

- Suspicious pyloric ingesta vs possible echo
- Duodenal and potential upper jejunal plication with linear foreign body, associated regional hyperechoic mesentery
- Intermittent likely reactive gastric and pancreaticoduodenal lymph nodes
- Potential for concurrent mild pancreatitis

AGE

2021

WEIGHT

11.8

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This study confirms the presence of a duodenal/jejunal linear foreign body with secondary intestinal plication. It is suspected that the foreign body may be anchored within the pylorus. Exploratory laparotomy with enterotomy +/- gastrotomy is recommended.

INTERPRETED BY

R. McKenzie Daniel,
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(Canine and Feline)

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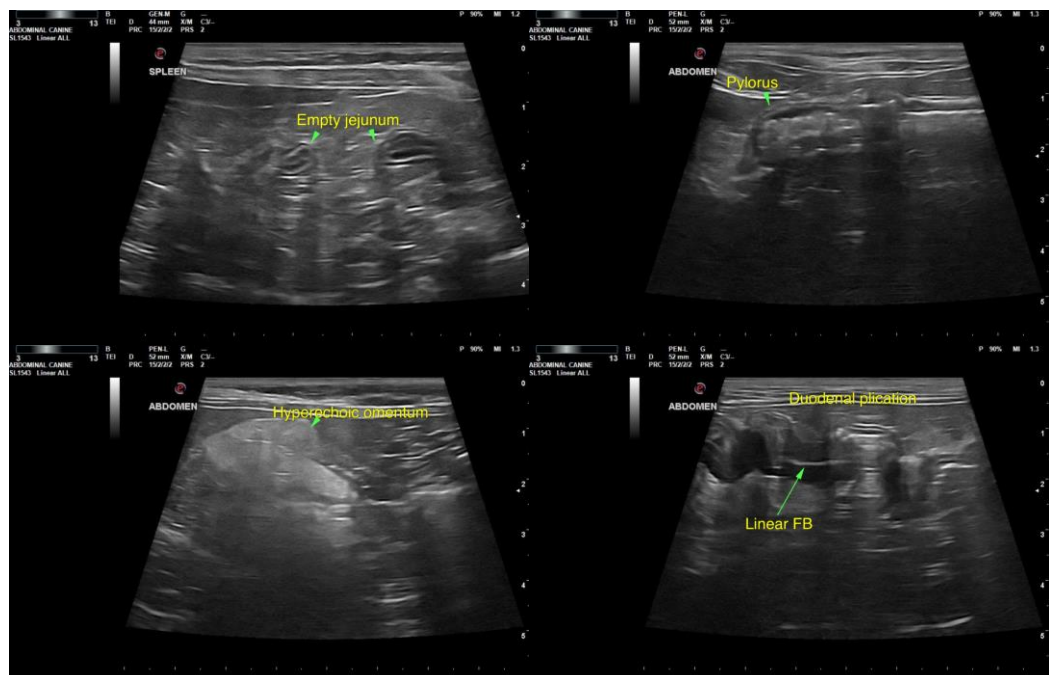
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PATIENT

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SPECIES

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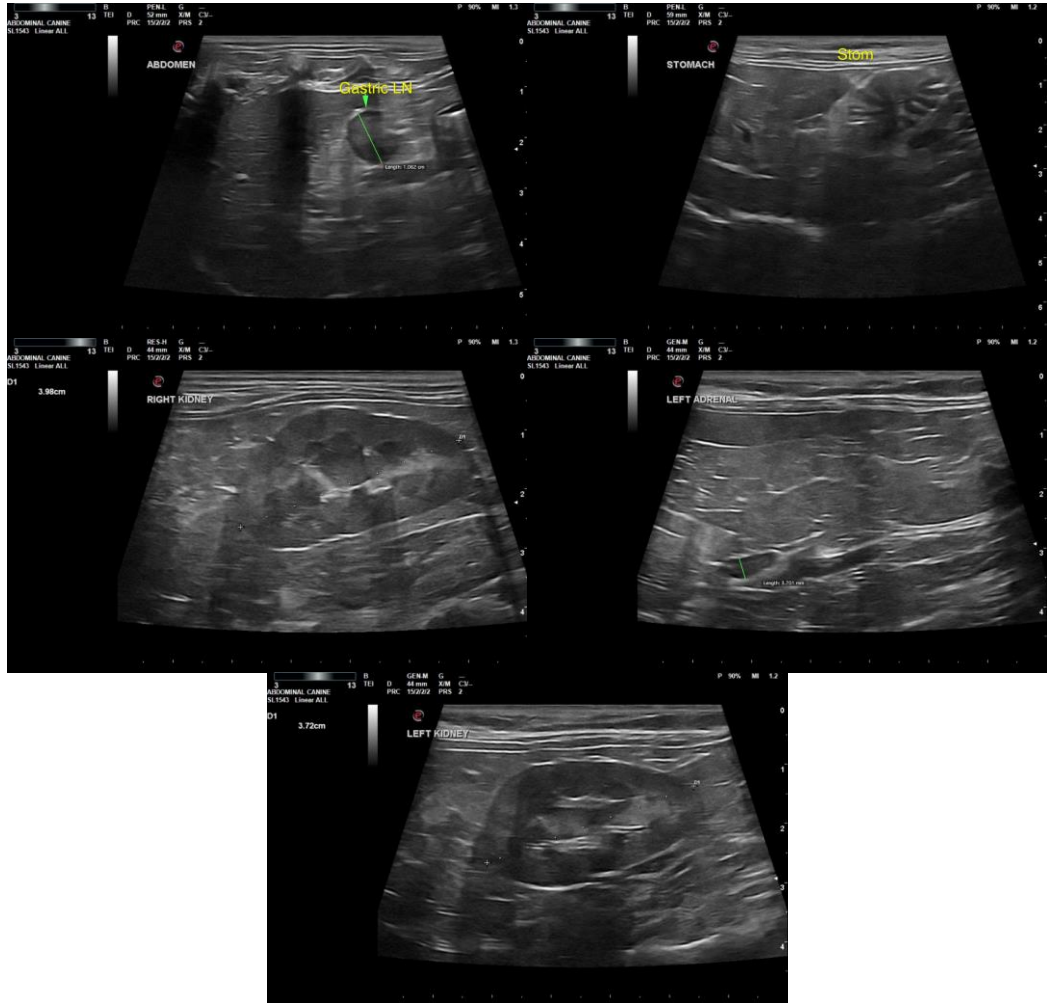
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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