



<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Oakley Woods	Came in for F/U for gastrotomy now ate a t shirt
<b>SPECIES</b>	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
Canine	<b>Urinary System</b>
<b>BREED</b>	The urinary bladder, trigone, and cystourethral junction 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.
Lab Mix	
<b>SEX</b>	The area of the aortic trifurcation was free of pathology.
MN	
<b>AGE</b>	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 5.4 cm in length. The right kidney measured 5.4 cm in length.
1	
<b>WEIGHT</b>	<b>Adrenal Glands</b>
40.5	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.9 cm length x 0.4 cm width at the caudal pole. The right adrenal gland was not definitively visualized.
<b>INTERPRETED BY</b>	<b>Spleen</b>
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.
<b>IMAGING PERFORMED BY</b>	<b>Liver/ Gallbladder</b>
Jenn	The liver exhibited subjective mild enlargement. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size containing primarily anechoic content with mild hyperechoic to possible emerging mineralized debris primarily along the inner luminal. No evidence of peripheral gallbladder inflammatory criteria was noted.
<b>HOSPITAL NAME</b>	
Rockaway AH	
<b>REFERRING VET</b>	
Dr. Maniar	
<b>INVOICE</b>	<b>Gastrointestinal</b>
15399	A strongly shadowing gastric luminal echo measuring approximately 3.0 cm in diameter was noted in the gastric body extending into the area of the pylorus. The visualized gastric walls were sonographically normal. Subtle evidence of perigastric reactive mesentery was noted. No evidence of perigastric or peritoneal free fluid was noted.
<b>DATE</b>	
11/5/22	



## PATIENT

Oakley Woods

## SPECIES

Canine

## BREED

Lab Mix

## SEX

MN

## AGE

1

## WEIGHT

40.5

## INTERPRETED BY

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

## IMAGING PERFORMED BY

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## REFERRING VET

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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.

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**

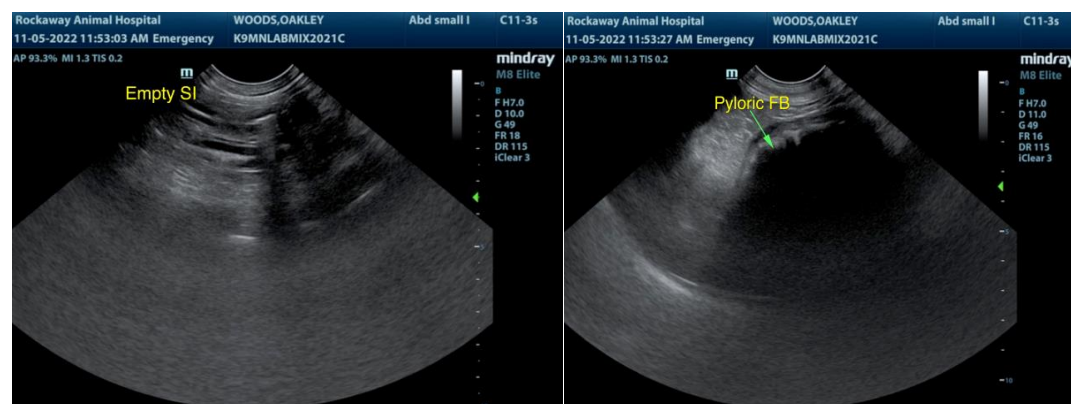
No evidence of perigastric or peritoneal free fluid was noted. No overt lymphadenopathy was present.

## ULTRASONOGRAPHIC FINDINGS

- Gastric foreign body subjectively occupying the majority of the gastric lumen
- Sonographically unremarkable small bowel - no evidence of an obstructive pattern or intestinal foreign material
- Subjective mild hepatomegaly - benign
- Mild hyperechoic to possible emerging mineralized gallbladder debris

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Gastrotomy is recommended as the subjective size of the gastric foreign body and occupation of the majority of the gastric lumen likely precludes endoscopic retrieval and/or evacuation via emesis induction. Correlation with abdominal radiographs is advised if not done.





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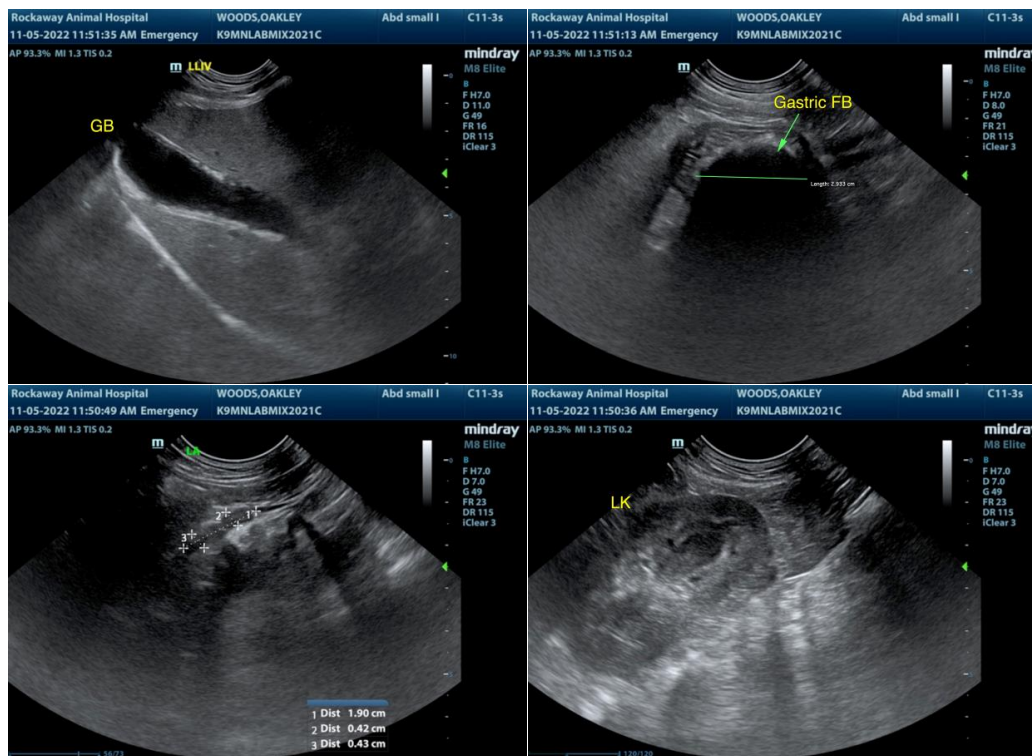
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)  
info@SonoPath.com