



PATIENT

Vinny Fidacaro

SPECIES

Canine

BREED

Poodle Mix

SEX

MN

AGE

9

WEIGHT

68

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

Dr. Maniar

INVOICE

15398

DATE

11/5/22

PRESENTING CLINICAL SIGNS

prev u/s yesterday showed poss foreign material Dog has been NPO

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

The area of the residual prostate free of pathology.

The area of the aortic trifurcation was free of pathology.

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 6.3 cm in length. The right kidney measured 6.3 cm in length.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.2 cm length x 0.60 cm width at the caudal pole. The right adrenal gland was not definitively visualized.

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. The previously noted splenic nodule was not visualized in this study.

Liver/ Gallbladder

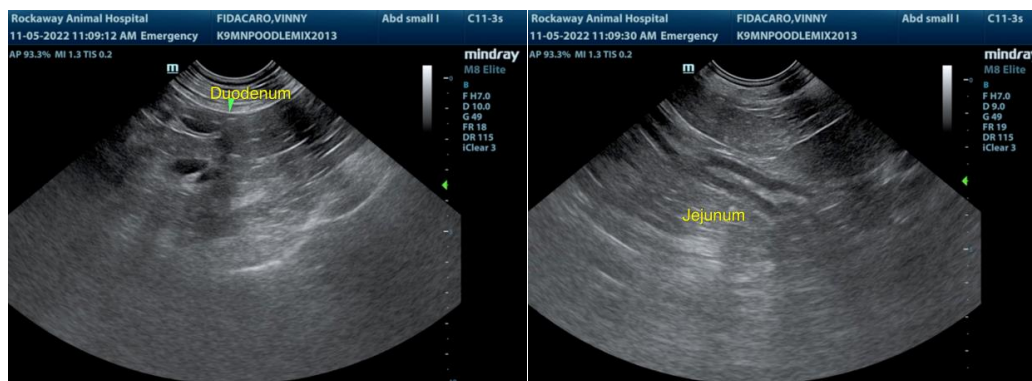
The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach exhibited moderate distention with persistent hyperechoic to shadowing gastric ingesta. No overt evidence of mechanical pyloric outflow obstruction was noted.



PATIENT	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 mechanical / metabolic intestinal ileus, obstruction, or intestinal foreign material.
Vinny Fidacaro	
SPECIES	Normal visible colon wall layers were present with apparent formed feces in lumen.
Canine	Pancreas
BREED	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.
Poodle Mix	
SEX	Free Abdomen
MN	No overt lymphadenopathy or peritoneal effusion was present.
AGE	ULTRASONOGRAPHIC FINDINGS
9	<ul style="list-style-type: none"> Moderate gastric distention with persistent shadowing gastric ingesta Sonographically unremarkable small bowel
WEIGHT	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
68	In conjunction with previous ultrasound and assuming documented NPO, the persistent shadowing gastric ingesta may suggest retained food with metabolic gastric hypomotility, although concern for gastric foreign material is warranted.
INTERPRETED BY	If clinical signs, i.e., inappetence, vomiting, etc., are present, exploratory laparotomy with gastrotomy should be considered. Alternatively, endoscopy if available could be considered for further assessment of the gastric interior.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Continued sonographic monitoring for evidence of gastric emptying over the next 12 hours with as-needed supportive care would be a more conservative approach. Correlation with clinical signs and history is recommended.
IMAGING PERFORMED BY	
Jenn	
HOSPITAL NAME	
Rockaway AH	
REFERRING VET	
Dr. Maniar	
INVOICE	
15398	
DATE	
11/5/22	





PATIENT

Vinny Fidacaro

SPECIES

Canine

BREED

Poodle Mix

SEX

MN

AGE

9

WEIGHT

68

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

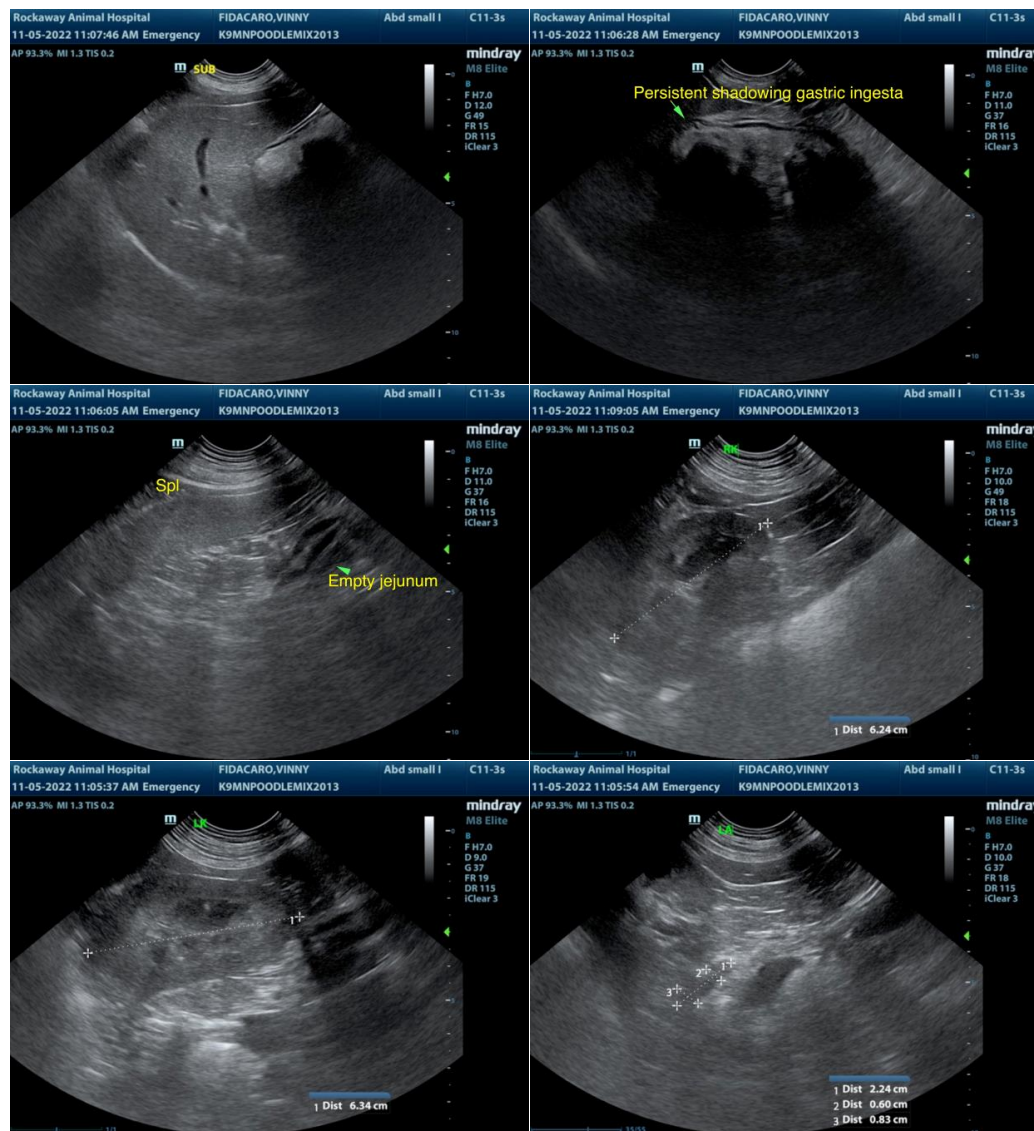
Dr. Maniar

INVOICE

15398

DATE

11/5/22



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