



PATIENT

Remy Strybos

SPECIES

Canine

BREED

Corgi

SEX

MN

AGE

10mo

WEIGHT

11.2kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Barthelemy

HOSPITAL NAME

Bridgeland Vet Clinic

REFERRING VET

Bridgeland Vet

INVOICE

12106ag

DATE

11/08/2022

PRESENTING CLINICAL SIGNS

Profuse vomiting started on weekend. Renovations have been going on in home so dietary indiscretion possible. Empirically tx with cerenia, antibiotic injection, SQ fluids with some improvement but minor. Continues to have abdominal discomfort, hyporexia, lethargy. Fasted 24 hours for this scan.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

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 4.8 cm in length. The right kidney measured 5.5 cm in length.

The area of the aortic trifurcation was free of pathology.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.43 cm width at the caudal pole and 0.24 cm width at the cranial pole. 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 and 0.44 cm width at the cranial pole.

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.

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.

Gastrointestinal

The stomach presented intact yet subtly prominent wall layering. The lumen of the stomach contained mild to moderate variably echogenic yet generally non-shadowing ingesta, fluid and chyme with no signs of ileus, obstruction or foreign material. The pylorus wall measured 0.35 cm in width. The gastric body wall measured 0.35 cm in width.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was primarily empty with minor non-obstructive duodenojejunal ileus. No evidence of small intestinal obstruction or foreign material.



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

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Pancreas

SPECIES

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.

Canine

Free Abdomen

BREED

No omental masses or peritoneal effusion was present.

Corgi

Focal to intermittent mildly prominent to enlarged mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example of a lymph node measured 1.5 cm x 0.7 cm. These lymph nodes were not consistent with neoplastic or significant inflammatory criteria.

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ULTRASONOGRAPHIC FINDINGS

AGE

- Mild gastritis/gastroenteritis pattern with mild retained variably echogenic gastric ingesta/chyme/fluid

10mo

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

Given the lack of obstructive pattern or definitive GI foreign material, there is no indication for immediate surgical intervention. Potential for inflammatory bowel episode i.e. gastroenteritis possibly owing to dietary indiscretion, occult parasitism, emerging inflammatory bowel disease or other inflammatory gastroenteropathy are all potentials. Hospitalization with 24-hour IVF and GI support with monitoring for evidence of gastric emptying is suggested. Potential recheck sonogram if persistent/progressive GI signs despite empirical therapy is recommended. A spec cPL could be considered to assess for minor to low-grade pancreatitis which may present sonographically normal as a contributing factor.

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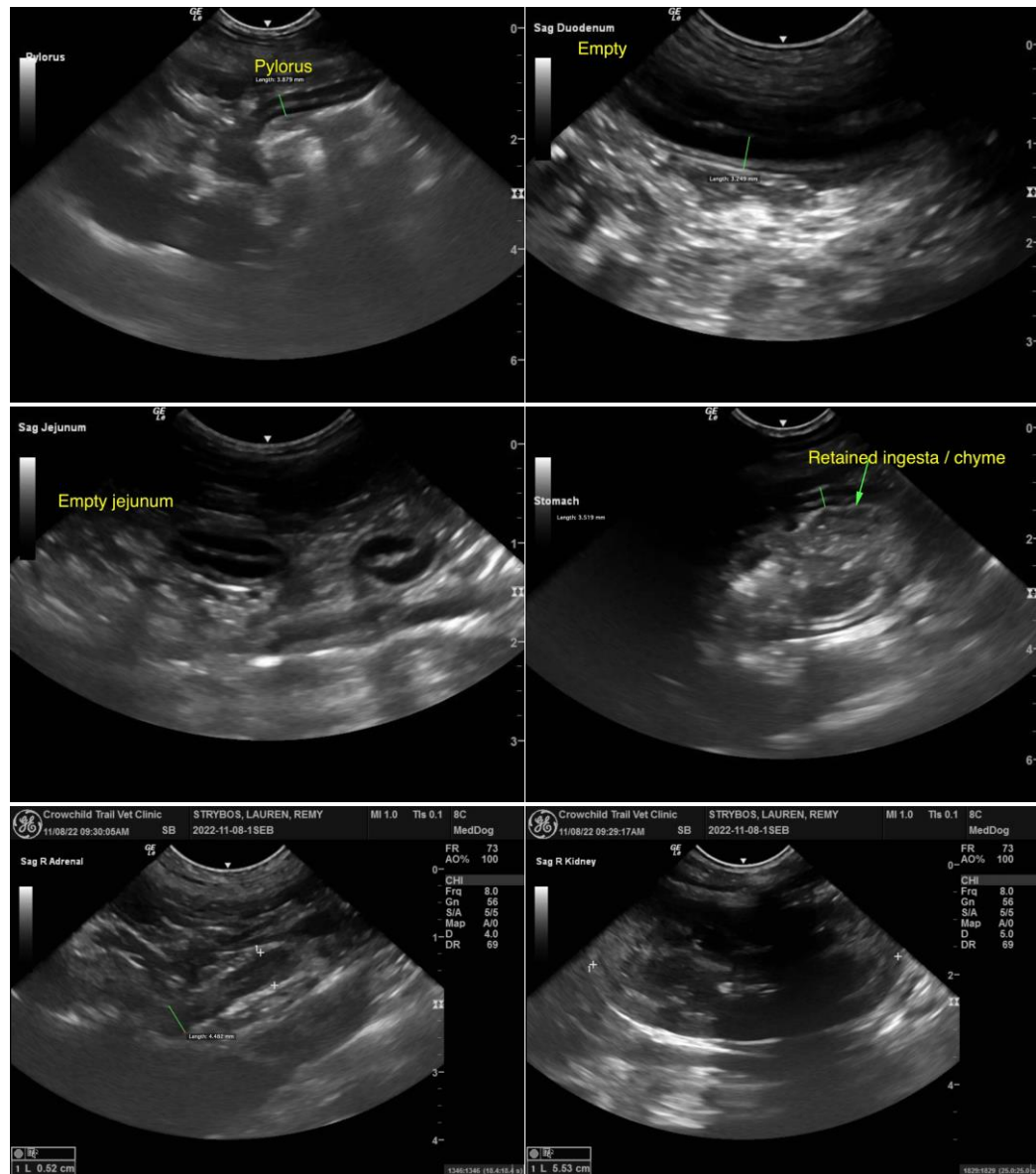
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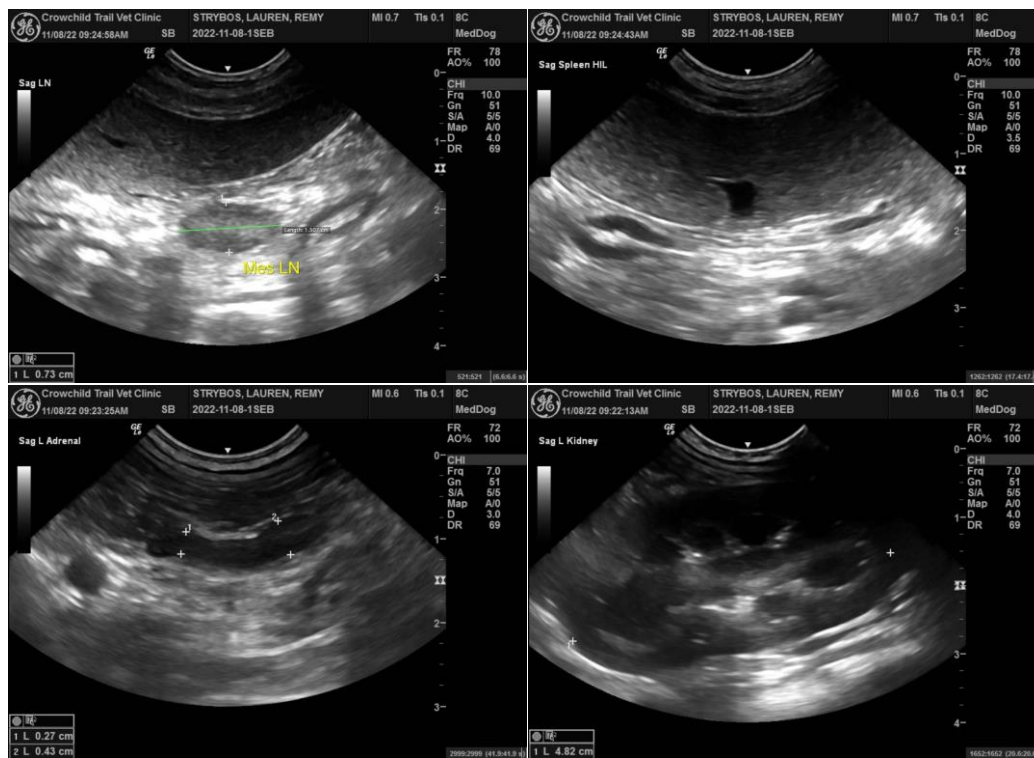
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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