

**PATIENT PRESENTING CLINICAL SIGNS**

Tanner Jacobs

Vomiting and diarrhea. Chewed up rubber backed rug. Unsure if all parts of rug are accounted for or if some was ingested. Current Medications Cerenia 60 mg SID Radiographic Findings Localized ileus, suggestive of partial obstruction. Images already submitted to Sonopath.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

*Urinary System*

Doodle

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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.

**SEX**

Male Intact

The prostate was of expected size and appearance for a young intact male canine measuring 2.2 cm diameter.

**AGE**

6 Months

No evidence of pathology in the area of the aortic trifurcation.

**WEIGHT**

56.5 lbs

Normal size and margination was 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 6.7 cm in length. The right kidney measured 6.6 cm in length.

**INTERPRETED BY**

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

*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 0.42 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.6 cm length x 0.41 cm width at the caudal pole.

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

*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.

**HOSPITAL NAME**

Cottage Grove  
Veterinary Clinic

*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.

**REFERRING VET**

Dr. Damewood

**INVOICE**

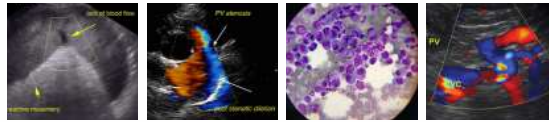
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*Gastrointestinal*

The stomach presented intact wall layering with a normal wall layer ratio. Mild retained non-shadowing chyme was present with no evidence of ileus, obstruction, or foreign material. The gastric body wall measured 0.35 cm width.

**DATE**

12-10-21



**PATIENT**

Tanner Jacobs

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Mild segmental duodenojejunal chyme was present and without evidence of mechanical / metabolic obstruction pattern. The duodenum wall measured 0.42 cm width. The jejunum wall measured 0.32 cm width.

**SPECIES**

Canine

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

***Pancreas***

**BREED**

Doodle

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.

***Free Abdomen***

**SEX**

Male Intact

Regional mid abdominal mesenteric lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic inflammation was evident. An example of lymph node size was 3.9 cm x 1.3 cm.

**AGE**

6 Months

No peritoneal free fluid was noted.

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

56.5 lbs

- Sonographically unremarkable gastrointestinal tract with mild gastric and segmental small intestinal chyme.
- Mid abdominal mild to moderately prominent mesenteric lymphadenopathy - suspect lymphoid hyperplasia, minor reactive lymphadenitis, potentially owing to inflammatory bowel episode or immunologic immaturity.

**INTERPRETED BY**

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DVM, DABVP  
(Canine and Feline)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

No overt evidence of mechanical/metabolic ileus or gastrointestinal foreign material. No indication for immediate surgical intervention.

**IMAGING PERFORMED BY**

Jenna Walsh, CVT

Conservative therapy for acute inflammatory bowel episode suspected to be owing to dietary indiscretion is recommended. If not done, fresh fecal analysis to assess for or rule out parasitic ova/giardia recommended.

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If persistent or recurrent gastrointestinal signs, recheck sonogram to assess for progressive inflammatory gastrointestinal changes, assessment of serum, cobalamin, and folate levels, +/- resting cortisol to rule out occult Addison's disease may be considered.

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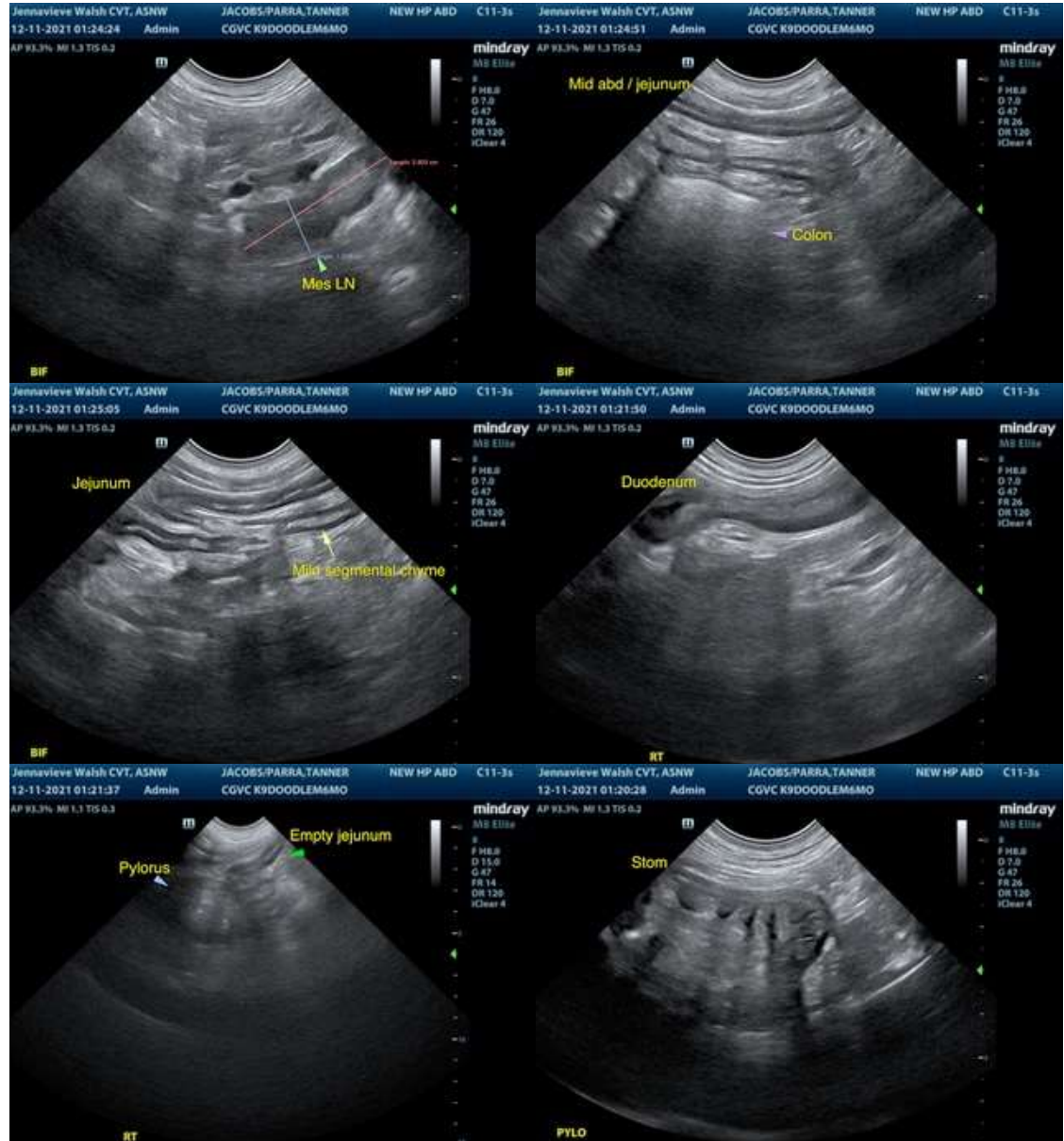
Dr. Damewood

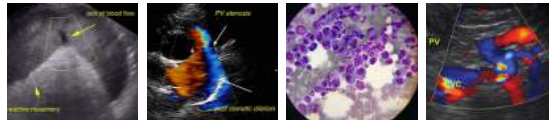
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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