



PATIENT

Winter Johnson

SPECIES

Mustelidae

BREED

Ferret

SEX

MN

AGE

1 year

WEIGHT

2.6 lbs.

PRESENTING CLINICAL SIGNS

Possible FB.

Abnormal PE/Chem/CBC/UA Results: Pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 was noted.

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 2.7 cm in length. The right kidney measured 2.8 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 0.37 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.30 cm width.

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/ 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 visualized gastric walls were sonographically unremarkable with intact wall layering and without evidence of mural hypertrophy. The pylorus wall width measured 0.20 cm. The stomach contained a mild amount of luminal gas. The luminal gas prohibited full evaluation of the gastric lumen, yet no overt evidence of retained gastric fluid, ingesta, or obvious foreign material.

The duodenum exhibited generalized ileus exhibited by retained anechoic to echogenic duodenal fluid and chyme. The jejunum exhibited segmental mild to moderate fluid dilation with strongly shadowing

INTERPRETED BY

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DVM, DABVP
(Canine and Feline)

IMAGING PERFORMED BY

Shari Reffi, CVT

HOSPITAL NAME

Norht Warren AH

REFERRING VET

Dr. Corrado

INVOICE

12890

DATE

12/28/21



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ovoid curvilinear echo likely within the jejunal lumen, measuring approximately 1.1 cm in diameter. Segments of empty likely distal jejunum were also present. Intact small intestinal wall layering was maintained. The retained duodenal fluid appeared to exhibit oral and aboral movement

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The colon exhibited sonographically unremarkable wall layering with potential for mild generalized colon distention with nonformed feces.

BREED

Pancreas

Ferret

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.

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Free Abdomen

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Intermittent, mid-abdominal mesenteric lymph nodes were present. The lymph node were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example lymph node measured 0.43 cm width. No overt evidence of peritoneal effusion was noted. Echogenic to reactive mesentery was noted around the segmental intestinal exhibiting mild to moderate fluid distention.

WEIGHT

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ULTRASONOGRAPHIC FINDINGS

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Primary Findings

R. McKenzie Daniel,
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- Strongly shadowing ovoid intestinal luminal echo with regional to likely upper intestinal obstructive pattern exhibited by retained luminal fluid
- Mild regional peri intestinal reactive mesentery and associated subjectively benign to reactive mesenteric lymphadenopathy

IMAGING PERFORMED BY

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Shari Reffi, CVT

Assuming the patient is exhibiting gastrointestinal signs such as inappetence and based on sonographic findings, exploratory laparotomy with expectation toward enterotomy as well as gross inspection of the generalized gastrointestinal tract is recommended.

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Intestinal biopsies may be considered despite exploratory findings to assess for underlying gastrointestinal disease.

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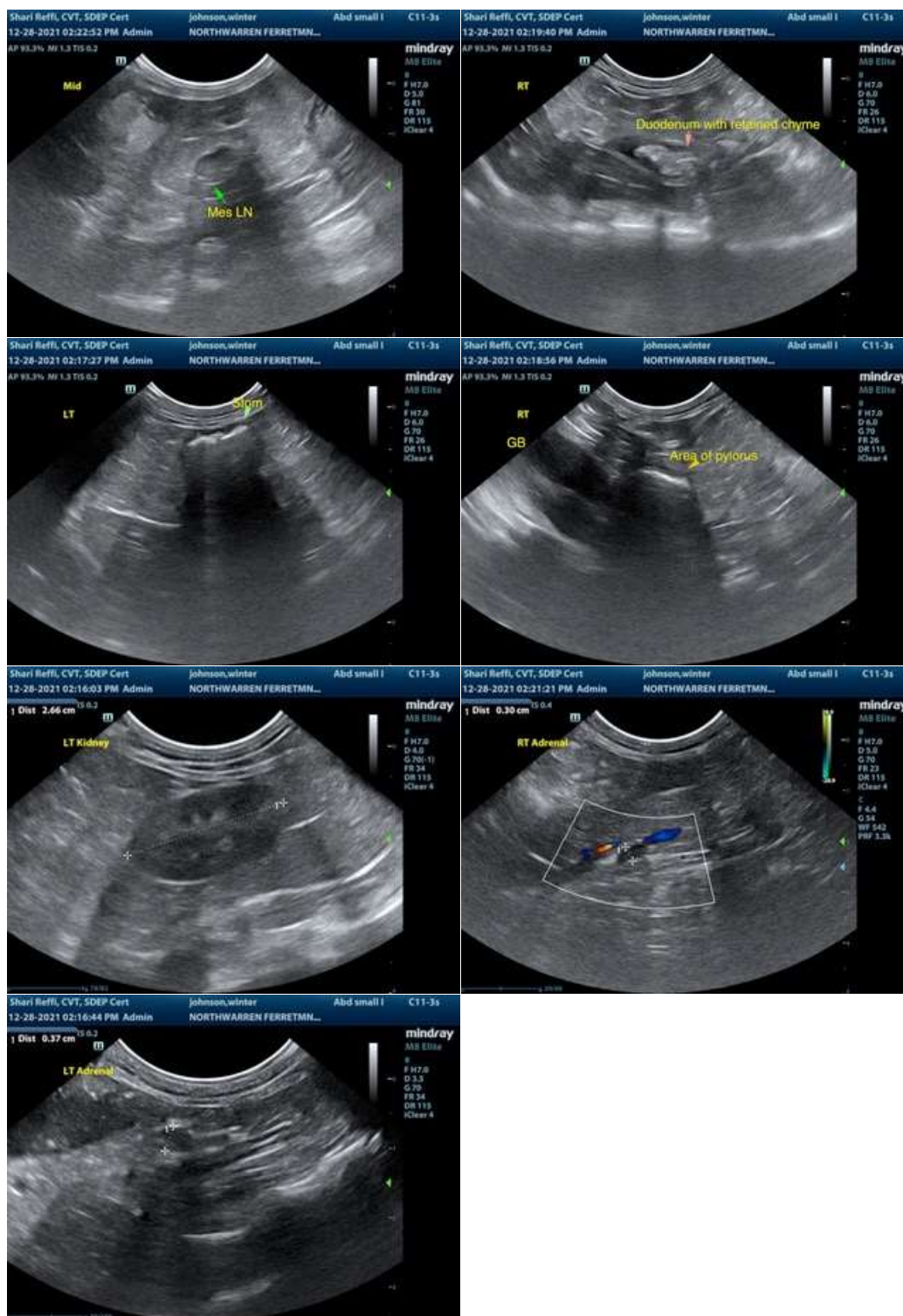
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



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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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