



PATIENT	PRESENTING CLINICAL SIGNS
Little Adelstein	Presented today for acute vomiting with blood. Has history of hematochezia with dietary indiscretion. No specific dietary indiscretions reported by owner today.
SPECIES	Abnormal PE/Chem/CBC/UA Results: Generally healthy appearing little dog, PE pretty unremarkable CBC/Chemistries: normal Radiographs: no obvious signs obstruction or fb
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Yorkshire Terrier	Urinary System
SEX	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 were noted.
Spayed Female	The area of the aortic trifurcation was free of pathology.
AGE	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. Pinpoint, discreet medullary mineral noted in both kidneys. The left kidney measured 3.2 cm. The right kidney measured 3.5 cm.
7 Years	
WEIGHT	Adrenal Glands
3.4 kg	The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.46 cm at the cranial pole and 0.44 cm at the caudal pole. The right adrenal gland measured 0.47 cm at the cranial pole and 0.36 cm at the caudal pole.
INTERPRETED BY	Spleen
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.
IMAGING PERFORMED BY	Liver
Dr. Callihan	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. Minor echogenic luminal debris noted, considered incidental, given the lack of cholestasis. The cystic and common bile ducts were normal.
HOSPITAL NAME	Gastrointestinal
Animal Emergency Care	The stomach presented intact yet mildly prominent wall layering with intermittent mildly prominent rugal fold. The stomach contained a mild to moderate amount of retained echogenic fluid and chyme, without evidence of gastric foreign material. No evidence of mechanical pyloric outflow obstruction.
REFERRING VET	The small intestine presented intact wall layering with primarily maintained 1:3 muscularis/mucosa ratio. Segmental subjective mild prominent jejunal wall layering noted and potential minor jejunal corrugation, which may suggest minor segmental jejunal spasming. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.
Dr. Bailey	
INVOICE	
43170	
DATE	
12/3/22	



PATIENT

Normal visible colon wall layers were present with semi formed to soft feces in lumen.

Little Adelstein

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 overt lymphadenopathy or peritoneal effusion was present.

Yorkshire Terrier

ULTRASONOGRAPHIC FINDINGS

SEX

- Gastroenteritis pattern with hypomotile stomach
- Sonographically unremarkable colon containing semiformed to soft fecal matter

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

No evidence of gastrointestinal foreign material or mechanical obstruction. Dietary intolerance/food hypersensitivity, acute inflammatory bowel, emerging IBD, low-grade to chronic pancreatitis (which may present sonographically normal) are all potentials. No evidence of gastrointestinal neoplastic criteria, which is thought unlikely.

7 Years

WEIGHT

Empirical therapy for inflammatory gastroenteropathy warranted. GI panel to include PLI, TLI, cobalamin and folate, and resting cortisol could be considered if recurrent gastrointestinal signs.

3.4 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Dr. Callihan

HOSPITAL NAME

Animal Emergency
Care

REFERRING VET

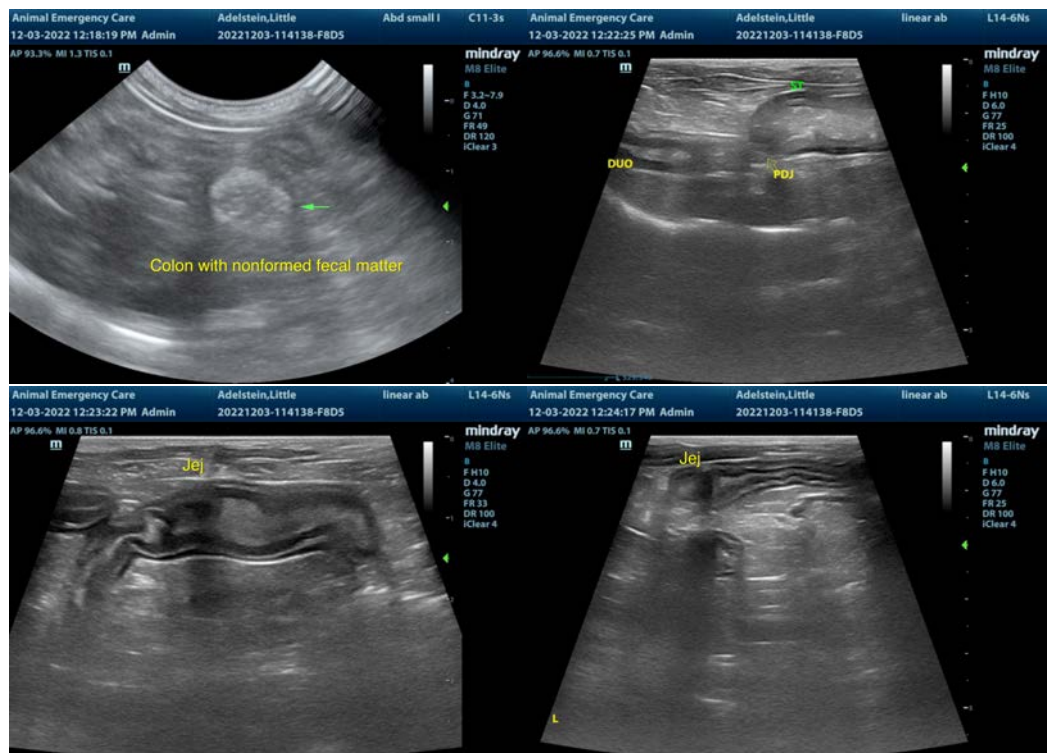
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PATIENT

Little Adelstein

SPECIES

Canine

BREED

Yorkshire Terrier

SEX

Spayed Female

AGE

7 Years

WEIGHT

3.4 kg

INTERPRETED BY

R. McKenzie Daniel,
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(Canine and Feline)

IMAGING PERFORMED BY

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HOSPITAL NAME

Animal Emergency
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REFERRING VET

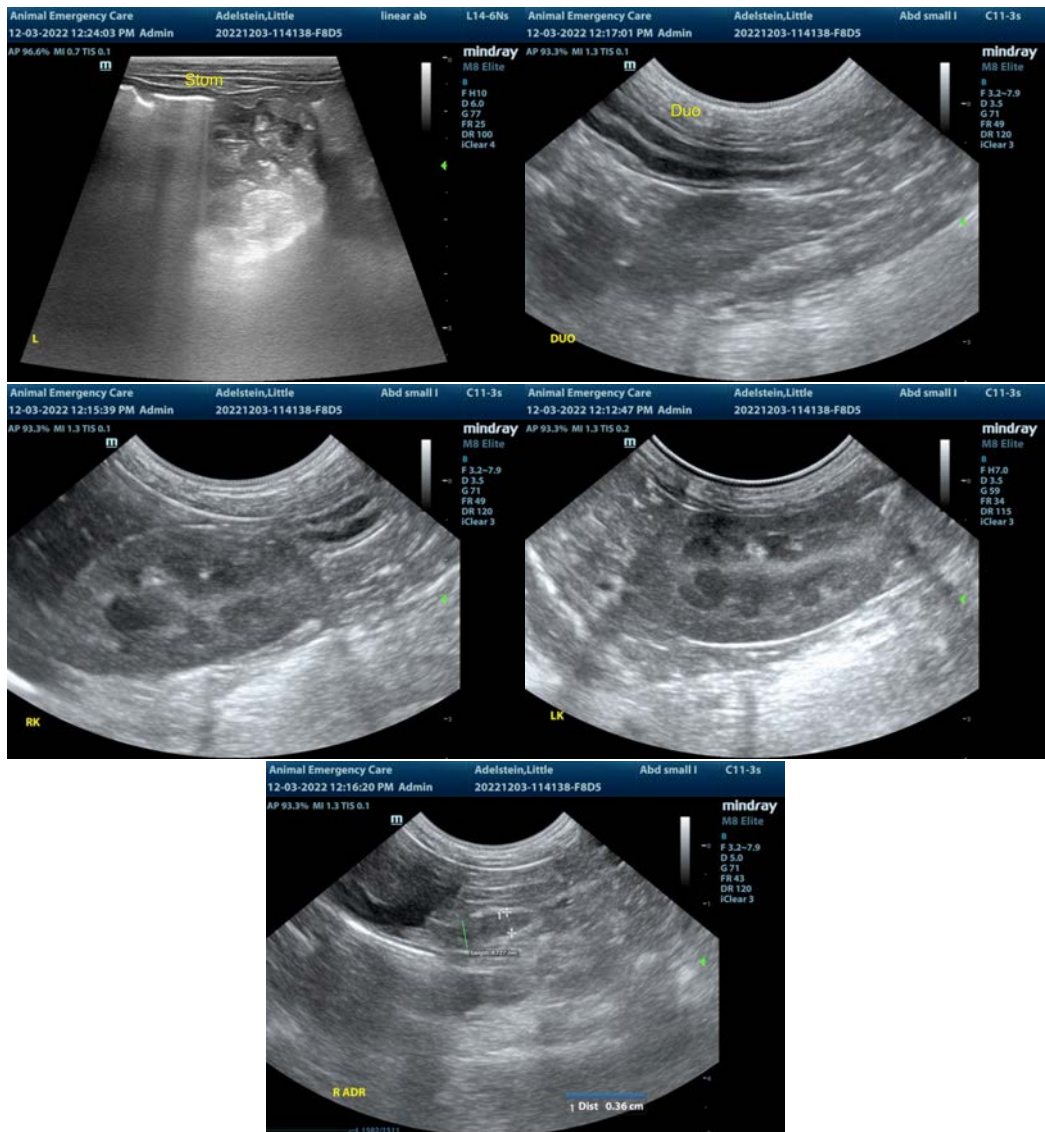
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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