



PATIENT	PRESENTING CLINICAL SIGNS
Molly Davenport	Hx of pica. Vomiting over 24 hours; normal bowel movements yesterday, diarrhea today. right lat abdomen rad- gas in stomach. owner has not noted any item specifically missing but Molly does chew on toys.
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.
Mixed	
SEX	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 5.6 cm in length. The right kidney measured 5.4 cm in length.
FS	
AGE	The area of the aortic trifurcation was free of pathology.
8mo	
WEIGHT	Adrenal Glands
48lb	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.44 cm width at the caudal pole and 2.2 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.51 cm width at the caudal pole and 2.1 cm length.
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
Daine McFadden	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.
HOSPITAL NAME	Gastrointestinal
Andover AH	The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. Moderate retained anechoic fluid, minor chyme and luminal gas was present. No evidence of overt GI foreign material or pyloric outflow obstruction.
REFERRING VET	
Dr. Hummel	
INVOICE	
12357ag	The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A segmental to diffuse jejunal ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present without obstruction or foreign material. Minor duodenal corrugation was present. No evidence of pathology at the level of the ileocolic junction.
DATE	
12/05/2022	



PATIENT

Molly Davenport

Normal visible colon wall layers were present with generalized distention containing apparent non formed feces in lumen.

SPECIES

Pancreas

Canine

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.

BREED

Mixed

Free Abdomen

SEX

FS

Focal, 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).

AGE

8mo

ULTRASONOGRAPHIC FINDINGS

- Acute gastroenterocolitis pattern with hypermotile stomach and possible typhlitis
- Intermittent associated mild benign/reactive mesenteric lymphadenopathy-hyperplasia or reactive lymphadenitis owing to inflammatory bowel episode or immunologic immaturity possible

WEIGHT

48lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt evidence of GI foreign body or mechanical obstructive pattern. Given the patient's history the possibility of a small amount of passing non-obstructive foreign material cannot be definitively excluded yet given the lack of obstructive pattern, no indication for immediate surgical intervention.

INTERPRETED BY

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

Dietary indiscretion, infectious gastroenterocolitis, enterotoxin, emerging IBD, occult parasitism or occult Addison's disease are all potentials. Supportive care is recommended with potential recheck sonogram if persistent/progressive GI signs.

IMAGING PERFORMED BY

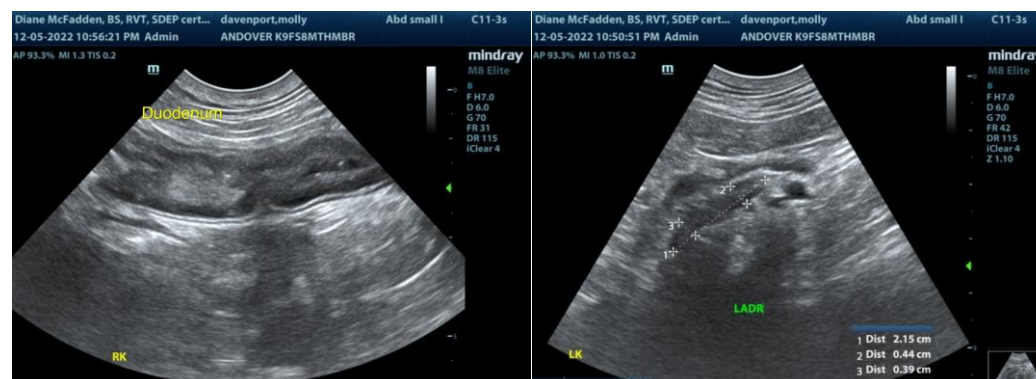
Daine McFadden

HOSPITAL NAME

Andover AH

REFERRING VET

Dr. Hummel

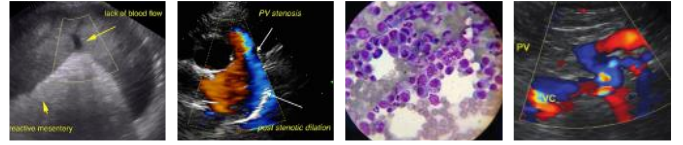


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PATIENT

Molly Davenport

SPECIES

Canine

BREED

Mixed

SEX

FS

AGE

8mo

WEIGHT

48lb

INTERPRETED BY

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

IMAGING PERFORMED BY

Diane McFadden

HOSPITAL NAME

Andover AH

REFERRING VET

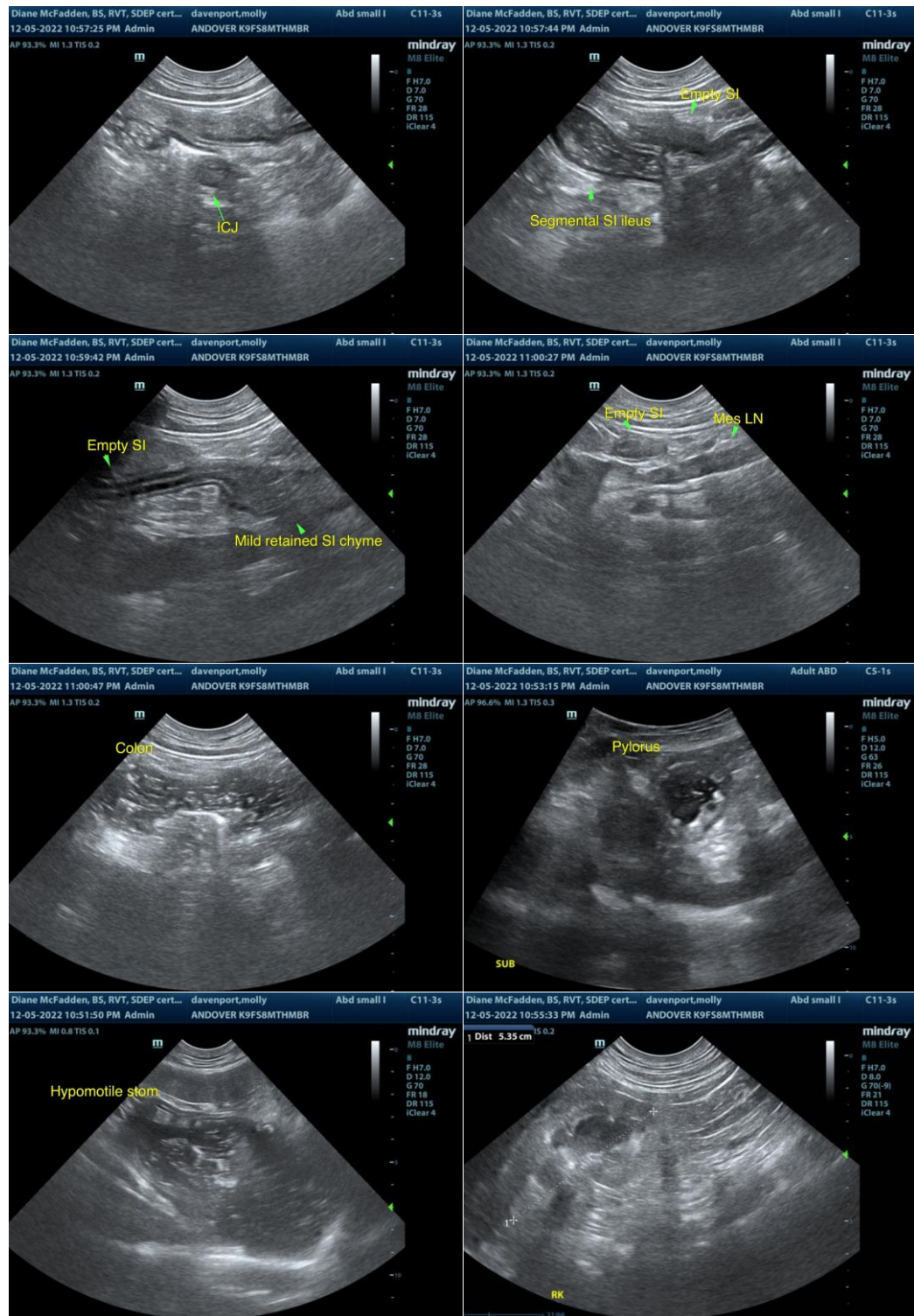
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PATIENT

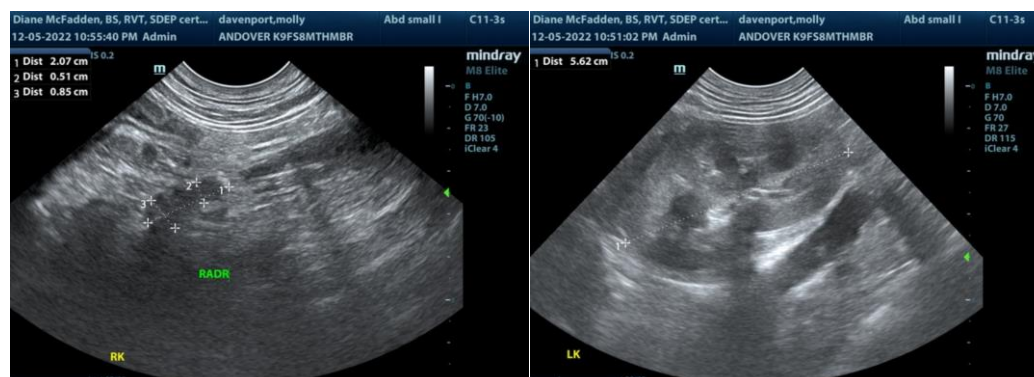
Molly Davenport

SPECIES

Canine

BREED

Mixed



SEX

FS

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.

AGE

8mo

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.

WEIGHT

48lb

R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)

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INTERPRETED BY

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

IMAGING PERFORMED BY

Daine McFadden

HOSPITAL NAME

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