



PATIENT PRESENTING CLINICAL SIGNS

Abby Scott vomiting and inappetence for 5 days; Last full meal was 5 days ago. Diarrhea the last few days ; significant lethargy. not on any meds

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

Labrador Retriever

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

Spayed Female

The area of the aortic trifurcation was free of pathology.

AGE

6 Years

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 kidneys measured 6.9 cm each.

Adrenal Glands

WEIGHT

78 Pounds

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.6 cm length x 0.74 cm at the caudal pole. The right adrenal gland measured 3.1 cm length x 0.64 cm at the caudal pole.

Spleen

INTERPRETED BY

Eric Lindquist, DMV

DABVP, Cert. IVUSS

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

IMAGING PERFORMED BY

Diane 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

Newton Vet Hospital

Gastrointestinal

REFERRING VET

Dr. Verhalen

The stomach presented intact yet subjective mild prominent wall layering. Ventral gastric body wall measured 0.58 cm. The stomach contained a mild amount of retained, subtly shadowing ingesta.

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 minor, non-obstructive ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present with mild segmental retained intestinal digesta/chyme. No evidence of mechanical obstructive pattern or overt foreign material. No overt evidence of mural pathology such as intestinal masses or intussusception. Subtle evidence of peri intestinal reactive mesentery noted.

INVOICE

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The colon exhibited generalized mild distention, most notable in the proximal colon and area of the cecum, containing nonformed fecal matter, consistent with diarrhea.

DATE

2/1/22



PATIENT

Pancreas

Abby Scott

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.

SPECIES

Canine

Free Abdomen

No overt lymphadenopathy or peritoneal effusion was present.

BREED

Labrador Retriever

ULTRASONOGRAPHIC FINDINGS

- Acute gastroenterocolitis pattern, possible typhlitis – acute inflammatory gastroenterocolic episode, IBD, infectious gastroenterocolitis, occult gastrointestinal neoplasia considered a less likely differential diagnosis.

SEX

Spayed Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Fresh fecal analysis to assess for parasitic ova/giardia as well as GI panel to include PLI, TLI, cobalamin and folate warranted. Potential for low-grade pancreatitis may be possible and sonographically normal. Resting cortisol to rule out occult Addison's disease may be considered. Empirical medical therapy for acute gastroenterocolitis/typhlitis recommended. Recheck sonogram may be considered pending clinical response to therapy to assess for progressive inflammatory gastroenterocolic changes.

WEIGHT

78 Pounds



INTERPRETED BY

Eric Lindquist, DMV

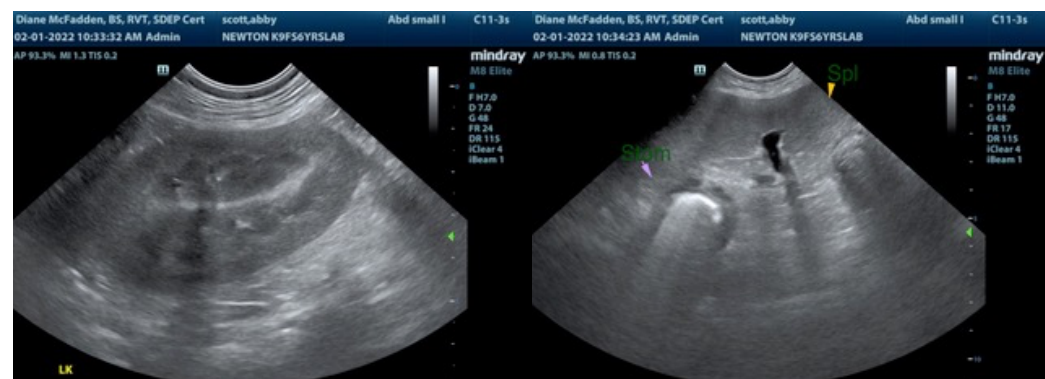
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PATIENT

Abby Scott

SPECIES

Canine

BREED

Labrador Retriever

SEX

Spayed Female

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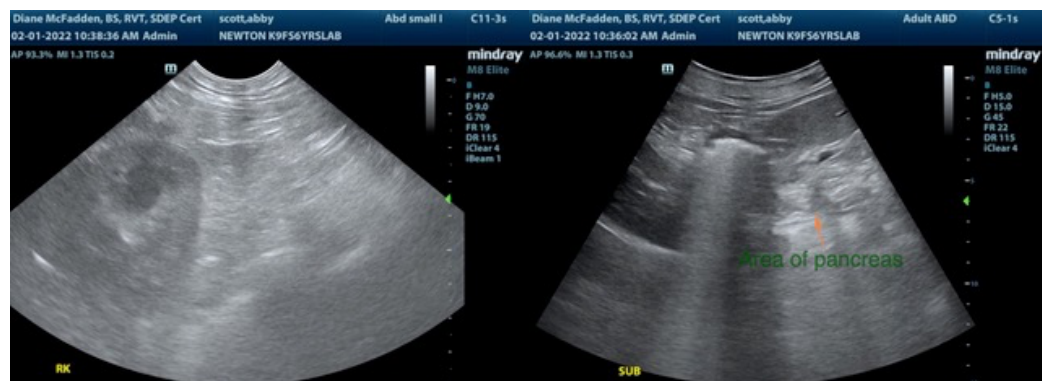
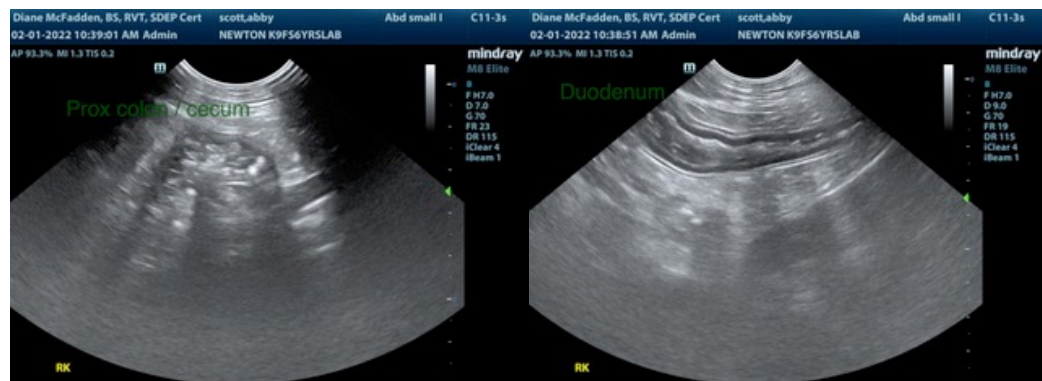
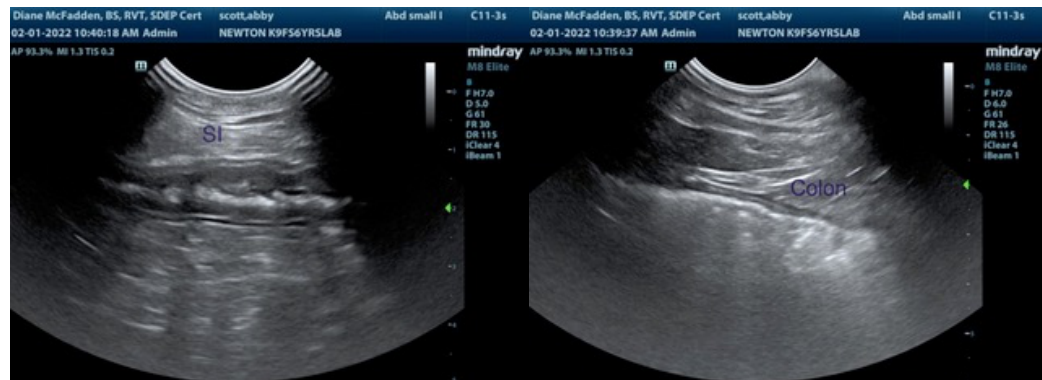
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

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