



PATIENT PRESENTING CLINICAL SIGNS

Hershey Lory consumed pizza dough, diarrhea

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine Urinary System

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

No overt pathology in the area of the prostate.

SEX
Male
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 6.2 cm. The right kidney measured 5.5 cm.

AGE Adrenal Glands

6 Years
The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.1 cm length x 0.49 cm at the caudal pole. The right adrenal gland was not definitively visualized.

WEIGHT Spleen

52 Pounds
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.

INTERPRETED BY

R. McKenzie Daniel,
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Liver

IMAGING PERFORMED BY

Jenn

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

Rockaway AH

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild retained nonshadowing ingesta and chyme, most consistent with post prandial presentation without signs of ileus, obstruction or foreign material.

REFERRING VET

Dr. Maniar

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material.

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

INVOICE

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Pancreas

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.

DATE

2/14/22



PATIENT

Free Abdomen

Hershey Lory

No overt lymphadenopathy or peritoneal effusion was present.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

- Sonographically unremarkable abdomen
- Mild retained, non-shadowing gastric ingesta

BREED

Lab X

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The presence of non-shadowing gastric ingesta/chyme is non-specific and may correlate with recent meal ingestion. Some degree of metabolic gastric stasis may be considered if documented NPO. No evidence of gastrointestinal foreign material or mechanical obstruction. Continued supportive care should prove beneficial. Monitoring of renal parameters recommended given ingestion of pizza dough.

SEX

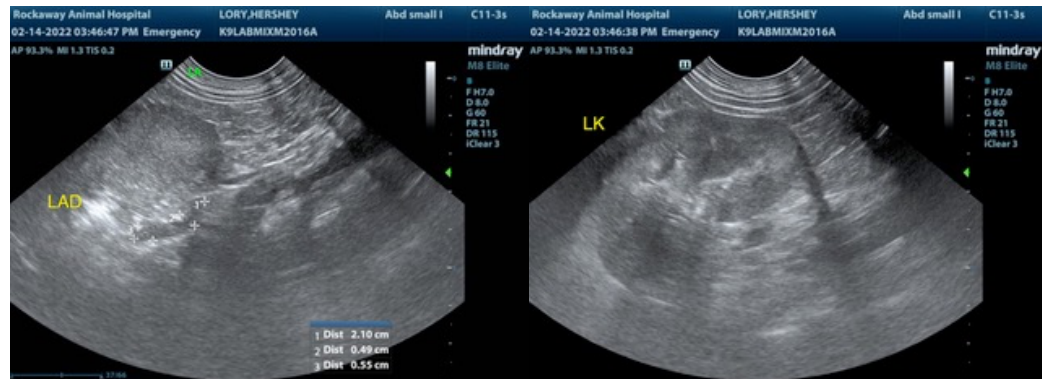
Male

AGE

6 Years

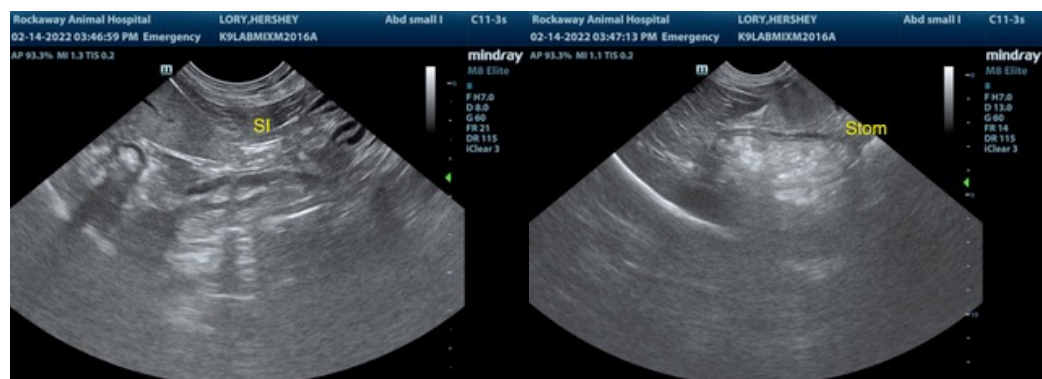
WEIGHT

52 Pounds



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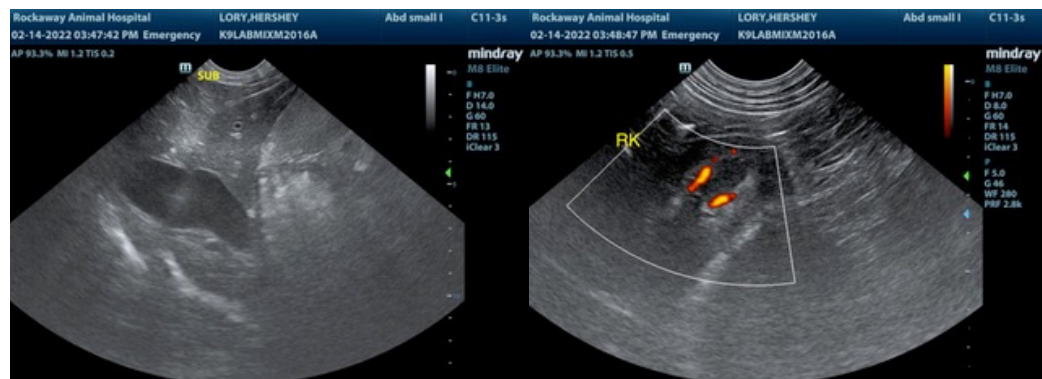


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HOSPITAL NAME

Rockway AH



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PATIENT

Hershey Lory

SPECIES

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BREED

Lab X

SEX

Male

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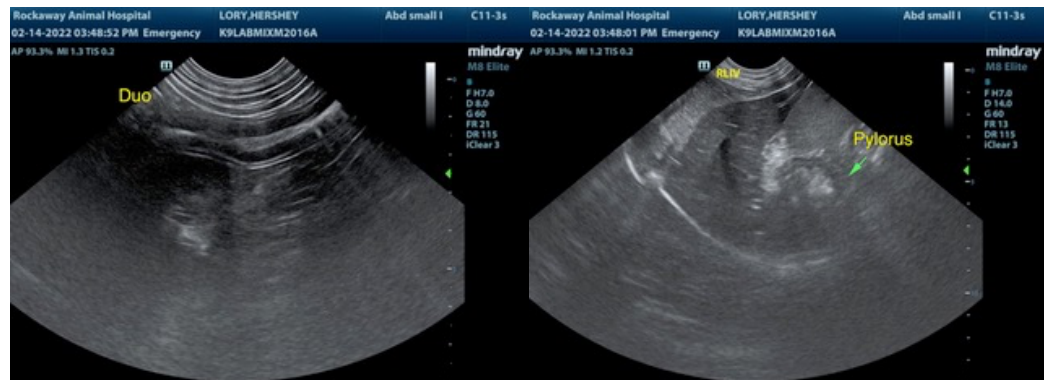
Dr. Maniar

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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.

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