



PATIENT	PRESENTING CLINICAL SIGNS
Murphy Swenson	re check pre u/s on 2/16 showed full stomach poss foreign matter
SPECIES	RECHECK ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.
Golden Retriever	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 6.1 cm in length. The right kidney measured 6.4 cm in length.
SEX	The area of the aortic trifurcation was free of pathology.
MN	Adrenal Glands
AGE	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.49 cm width at the caudal pole and 2.0 cm width at the cranial pole. The right adrenal gland was indistinctly visualized subjectively measuring 0.77 cm width at the caudal pole.
3	Spleen
WEIGHT	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.
74	Liver/Gallbladder
INTERPRETED BY	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.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Gastrointestinal
IMAGING PERFORMED BY	The stomach presented intact wall layering with a normal wall layer ratio. The stomach exhibited reduced size and amount of shadowing ingesta compared to the previous study with mild retained non-shadowing hyperechoic ingesta/chyme. Within the retained gastric ingesta a small non-obstructive non-specific shadowing echo measuring 1.7 cm in diameter was present. No evidence of pyloric outflow obstruction.
Jenn	Intestine
HOSPITAL NAME	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 ileus, obstruction or overt foreign material.
Rockaway Animal Hospital	Normal visible colon wall layers were present with apparent formed feces in lumen.
REFERRING VET	Pancreas
Dr. Maniar	
INVOICE	
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DATE	
02/20/2023	



PATIENT

Murphy Swenson

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 omental masses, overt lymphadenopathy or peritoneal effusion was present.

BREED

Golden Retriever

ULTRASONOGRAPHIC FINDINGS

- Mild retained gastric ingesta without evidence of overdistention, small non-specific non-obstructive shadowing echo within the gastric ingesta
- Sonographically unremarkable small bowel

SEX

MN

Although evidence of shadowing gastric ingesta was present the appearance of the stomach is sonographically suggestive of overall gastric emptying compared to the previous study. The small non-obstructive gastric shadowing echo may correlate with ingesta, treats or medication although the possibility of small non-obstructive gastric foreign body could be present. Correlation with clinical history is recommended.

AGE

3

Endoscopy is likely ideal for further assessment and possible retrieval of the shadowing gastric echo especially if patient was documented NPO. Sonographic monitoring would be a more conservative approach.

WEIGHT

74

INTERPRETED BY

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

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway Animal Hospital

REFERRING VET

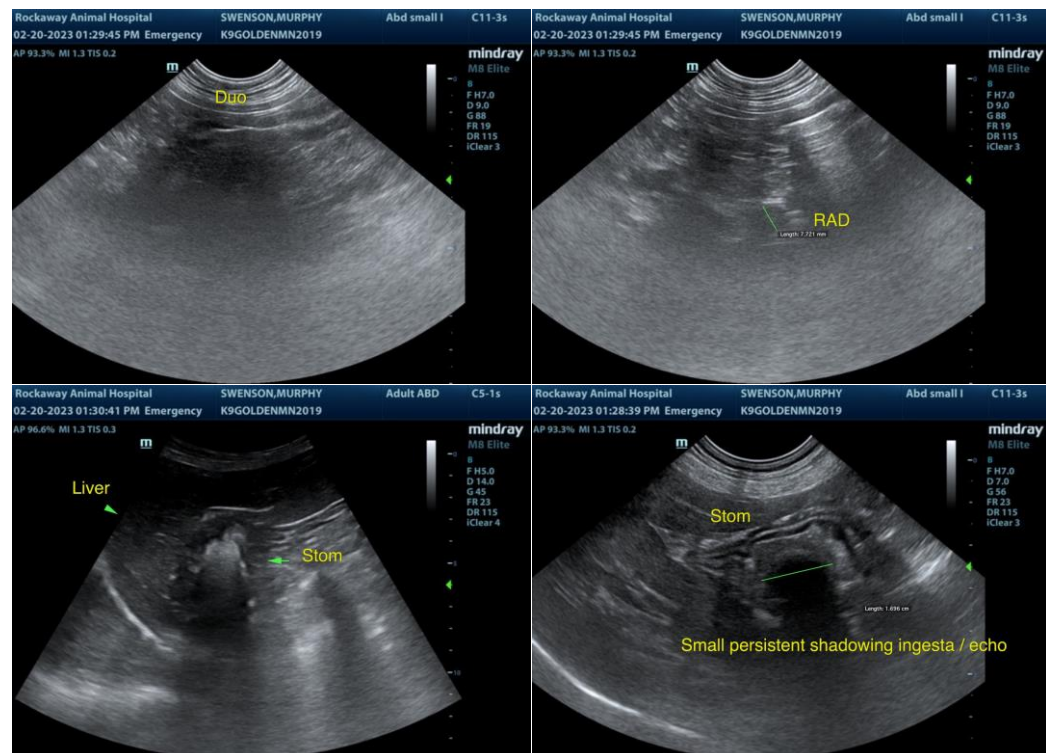
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Murphy Swenson

SPECIES

Canine

BREED

Golden Retriever

SEX

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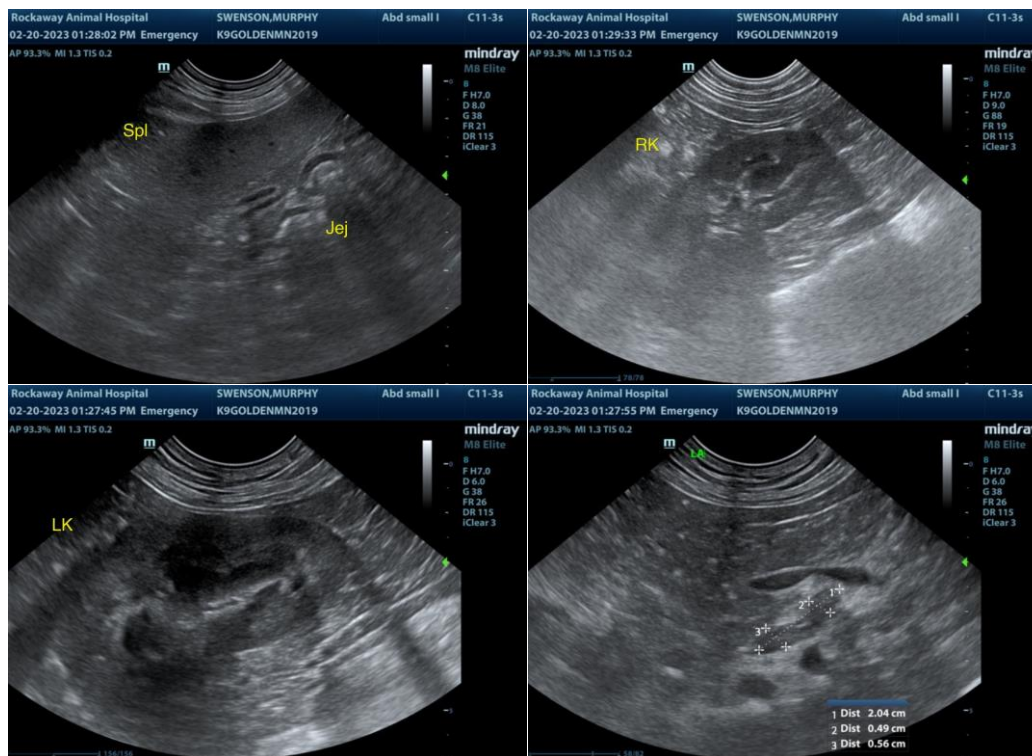
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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