



PATIENT

Mariah Parrish

SPECIES

Canine

BREED

Pit Bull

SEX

Spayed Female

AGE

1.5 Years

WEIGHT

26.8 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Lindsay Powell, CVT

HOSPITAL NAME

Hershey Animal
Emergency Center

REFERRING VET

Dr. Shally Gastelu

INVOICE

73191

DATE

2/23/26

PRESENTING CLINICAL SIGNS

Presented Sunday 2/22 at 11:15a for vomiting and diarrhea. Patient escaped yesterday for about 2 hours. surrounded by woods and other houses. Since coming back last night she been vomiting and having diarrhea. Lethargic at home. not eating.

Abnormal PE/Chem/CBC/UA Results: Abd: Uncomfortable, nauseous and lip licking on palpation Improved throughout the evening with supportive care. CBC: Unremarkable PCV/TS: 51/6.9 Chem 15: Alb 4.2 (H) EPOC: iCa 1.43 (H) Pancreatic lipase: 54 Parvo Ag test: Negative 3 view abdominal radiographs: Moderate GI gas distension, granular material in bowel, one markedly dilated bowel loop (possible small intestine or ileocecal junction vs colon), colon largely empty BP: 12a- 134/79(90) Repeat Rads Granular soft tissue opaque foamy content visible in some loops in the right mid abdomen in a similar position to previous study. Otherwise rather empty GIT, empty colon: unspecific findings.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

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. Left kidney measured 6.5 cm. Right kidney measured 7.3 cm.

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. Left adrenal gland measured 0.56 cm at the caudal pole. Right adrenal gland measured 0.67 cm at the caudal pole.

Spleen

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

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.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.



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The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. Mild segmental ileus without overt mechanical obstruction to the level of the colon. Mild segmental intestinal gas present.

The visualized colon exhibited normal intact wall layering and empty lumen with mild luminal gas.

Pancreas

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

Intermittent mildly enlarged mesenteric nodes were present. An example measured 1.4 cm in diameter. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

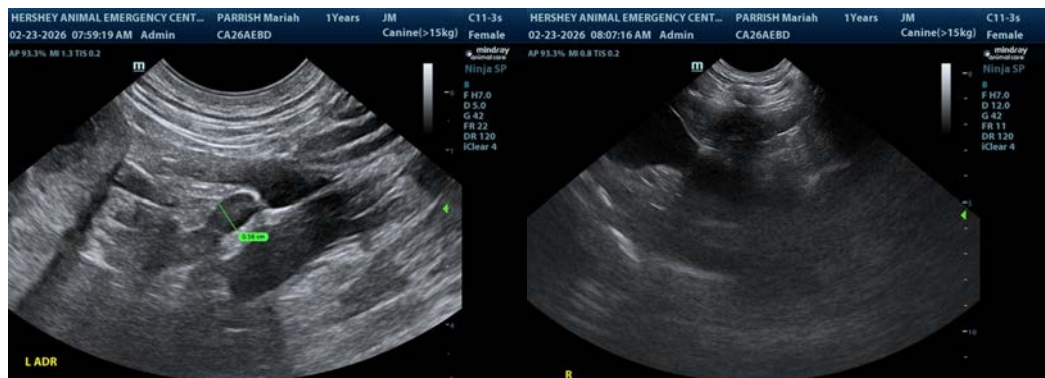
No evidence of peritoneal effusion.

ULTRASONOGRAPHIC FINDINGS

- Gastroenterocolitis exhibiting mild intestinal ileus/gas.
- Heterogeneous pancreas.
- Intermittent mild mesenteric lymphadenopathy – Consistent with benign criteria i.e., reactive hyperplasia or possible lymphadenitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of gastrointestinal mechanical obstruction or obstructive foreign material. A small amount of non-obstructive to passing foreign material in conjunction with radiographic findings obscured by intestinal gas possible. No indication for immediate surgical intervention. Spec cPL could be considered to assess for mild pancreatitis. Gastrointestinal support with coverage for potential dietary indiscretion or infectious gastroenterocolitis should prove beneficial. Sonographic reassessment recommended if persistent progressive gastrointestinal signs.





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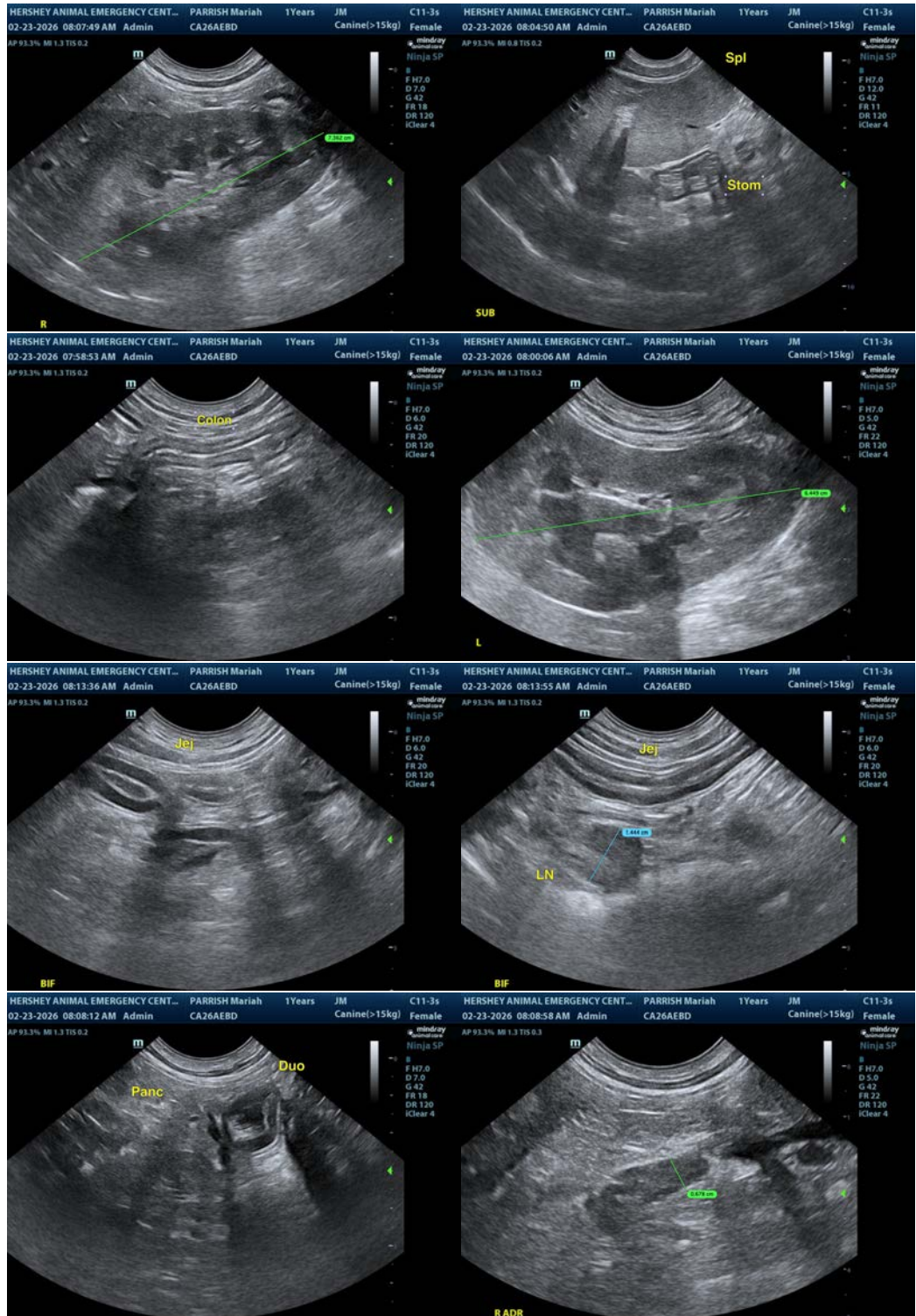
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

info@SonoPath.com