



**PATIENT**

Arthur Kazlau

**PRESENTING CLINICAL SIGNS**

History: Watery diarrhea, suspect foreign body.  
Abnormal PE/Chem/CBC/UA Results: CBC/Chem: pending.

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

**BREED**

Vizla

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. Aortic trifurcation was normal.

**SEX**

Neutered Male

The residual prostate was mildly prominent in size yet maintained symmetrical capsule contour and homogeneous parenchyma. No evidence of residual prostatic pathology. The residual prostate measured 1.6 cm in diameter.

**AGE**

4 Years

Normal size and margination was 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 6.6 cm in length. The right kidney measured 5.4 cm in length.

**WEIGHT**

50 Lbs.

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.4 cm in length x 0.64 cm width at the caudal pole.

**INTERPRETED BY**

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

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 1.7 cm in length x 0.38 cm width at the caudal pole.

**IMAGING PERFORMED BY**

Kelly Vazquez

**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.

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VH

**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.

**REFERRING VET**

Dr. Goldman

**Gastrointestinal**

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The stomach presented intact and sonographically unremarkable wall layering with a normal wall layer ratio. The stomach contained a mild to moderate amount of retained echogenic ingesta/chyme, exhibiting subtle distal acoustic shadowing. No evidence of mechanical pyloric outflow obstruction.

**DATE**

2/8/22

The small intestine exhibited intact wall layering and maintained 1:3 muscularis/mucosa ratio with areas of duodenojejunal pinpoint mucosal speckling. Generalized mild duodenal and segmental jejunal ileus



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was present with minor oral to aboral fluid movement. Concurrent segments of empty jejunum were also present to the level of the colon. Overt evidence of definitive area of small intestinal mechanical obstruction or foreign body was not present.

**SPECIES**

Canine

The colon exhibited intact to mildly prominent wall layering containing semi-formed to soft feces.

**Pancreas**

**BREED**

Vizla

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.

**Free Abdomen**

**SEX**

Neutered Male

No overt lymphadenopathy or peritoneal effusion was present.

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

4 Years

- Gastroenterocolitis pattern, exhibiting areas of duodenojejunal mucosal speckling and generalized mild duodenal to segmental jejunal ileus- no overt foreign body

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

50 Lbs.

The presence of retained gastric ingesta/chyme and mild generalized duodenal to segmental jejunal ileus is not overtly consistent with obstructive pattern and without definitive foreign body noted, this could be secondary to dietary indiscretion, acute inflammatory bowel episode, gastroenterotoxic insult, dysbiosis, infectious gastroenteritis or other gastroenteropathy. Technically, the possibility of a mild amount of nonobstructive hair, fabric, cloth or similar within the stomach is possible and could not be definitively excluded. However, given the lack of definitive foreign body or obvious obstructive pattern, conservative management for acute inflammatory bowel episode would be reasonable. Further assessment may include GI panel to include PLI, TLI, cobalamin and folate as well as fresh fecal analysis to assess for parasitic ova and Giardia, pending CBC and chemistry panel. Ideally, recheck sonogram in 24-48 hours for further assessment of the duodenojejunal ileus and gastric ingesta recommended. Hospitalization with IV fluids, gastrointestinal support, broad spectrum antibiotics and high colony count probiotics would be reasonable initially.

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Canine

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**AGE**

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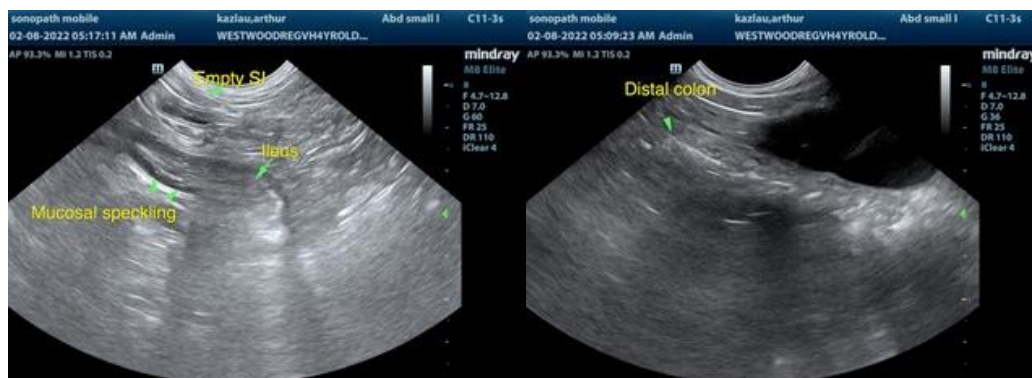
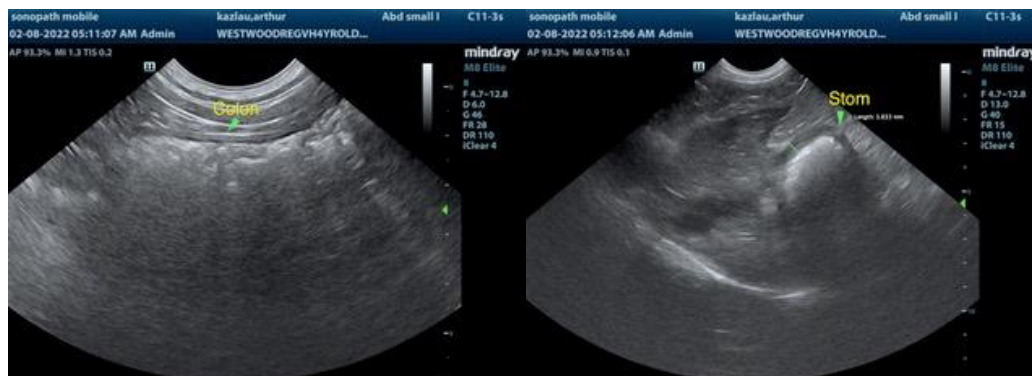
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The information and recommendations provided are based on the images presented by the



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**referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.**

**SPECIES**

Canine

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.

**BREED**

Vizla

**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
**info@SonoPath.com**

**SEX**

Neutered Male

**AGE**

4 Years

**WEIGHT**

50 Lbs.

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