



PATIENT

Bella Bjornson

SPECIES

Canine

BREED

Boxer

SEX

F/S

AGE

10

WEIGHT

32.7 kg

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Belan

HOSPITAL NAME

Alpine 24/7 AH

REFERRING VET

Dr. Neilsen

INVOICE

16068

DATE

2/8/23

PRESENTING CLINICAL SIGNS

History of spondylosis and disc compression cervical thoracic and thoracolumbar spine. Also indiscriminate eater Sedated with butorphanol for scan
Abnormal PE/Chem/CBC/UA Results: Persistent elevation of lipase

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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 was noted.

The area of the aortic trifurcation was free of pathology.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 6.6 cm in length. The right kidney measured 6.4 cm in length.

Adrenal Glands

The bilateral adrenal glands exhibited subjective borderline to mild subnormal size, given the patient's breed and body weight. The left adrenal gland measured 0.33 cm width at the caudal pole and 0.32 cm width at the cranial pole. The right adrenal gland measured 0.33 cm width at the caudal pole and 0.31 cm width at the cranial pole.

Spleen

The spleen was normal in size and contour with subtle generalized parenchyma heterogeneity exhibiting intermittent, discrete, non-disruptive, hypoechoic nodules. An example of a discrete splenic nodule measured 0.9 cm diameter. The nodules did not distort the splenic capsule. Normal splenic vascularity was noted.

Liver/ Gallbladder

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. The stomach contained luminal gas with a solitary, strongly shadowing luminal echo measuring potentially 3.0-3.5 cm in diameter. No overt mechanical pyloric outflow obstruction was noted.



PATIENT	The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Minor segmental duodenojejunal ileus was noted, yet no evidence of small intestinal obstructive pattern or foreign material.
Bella Bjornson	
SPECIES	Normal visible colon wall layers were present with apparent formed feces in lumen.
Canine	Pancreas
BREED	The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.
Boxer	Free Abdomen
SEX	Solitary, mid-to-cranial abdominal mesenteric lymph node was present adjacent to the transverse colon and regional small intestine. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). The lymph node measured 2.2 cm in diameter. No evidence of regional perilymphatic inflammation was noted. No omental masses or evidence of peritoneal effusion was noted.
F/S	
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WEIGHT	ULTRASONOGRAPHIC FINDINGS
32.7 kg	<ul style="list-style-type: none"> • Strongly shadowing gastric luminal echo - suggestive of gastric foreign body / material • Sonographically unremarkable small bowel - no evidence of obstructive pattern or intestinal foreign material • Probable focal benign / reactive mesenteric lymph node • Heterogeneous pancreas - not consistent with active pancreatitis, minor remodeling owing to previous pancreatitis or low-grade chronic pancreatitis possible • Subjective borderline to minor subnormal bilateral adrenal glands - nonspecific • Subtle heterogeneous to discretely nodular spleen - likely benign, suspect patient variant, incidental mild hyperplasia, hematopoiesis or similar
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Correlation of the heterogeneous spleen with pending splenic cytology is suggested.
IMAGING PERFORMED BY	Given the timeframe between ultrasound study and interpretation, a sonographic reassessment of the shadowing gastric echo for evidence of persistence or movement out of the stomach is recommended. If persistent, gastric endoscopy for further clarification and possible retrieval may be considered.
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INVOICE	Pending splenic cytology, or if laparotomy is elected in this case with potential gastrotomy, gross inspection of the spleen, as well as a possible mesenteric lymph node biopsy, is recommended.
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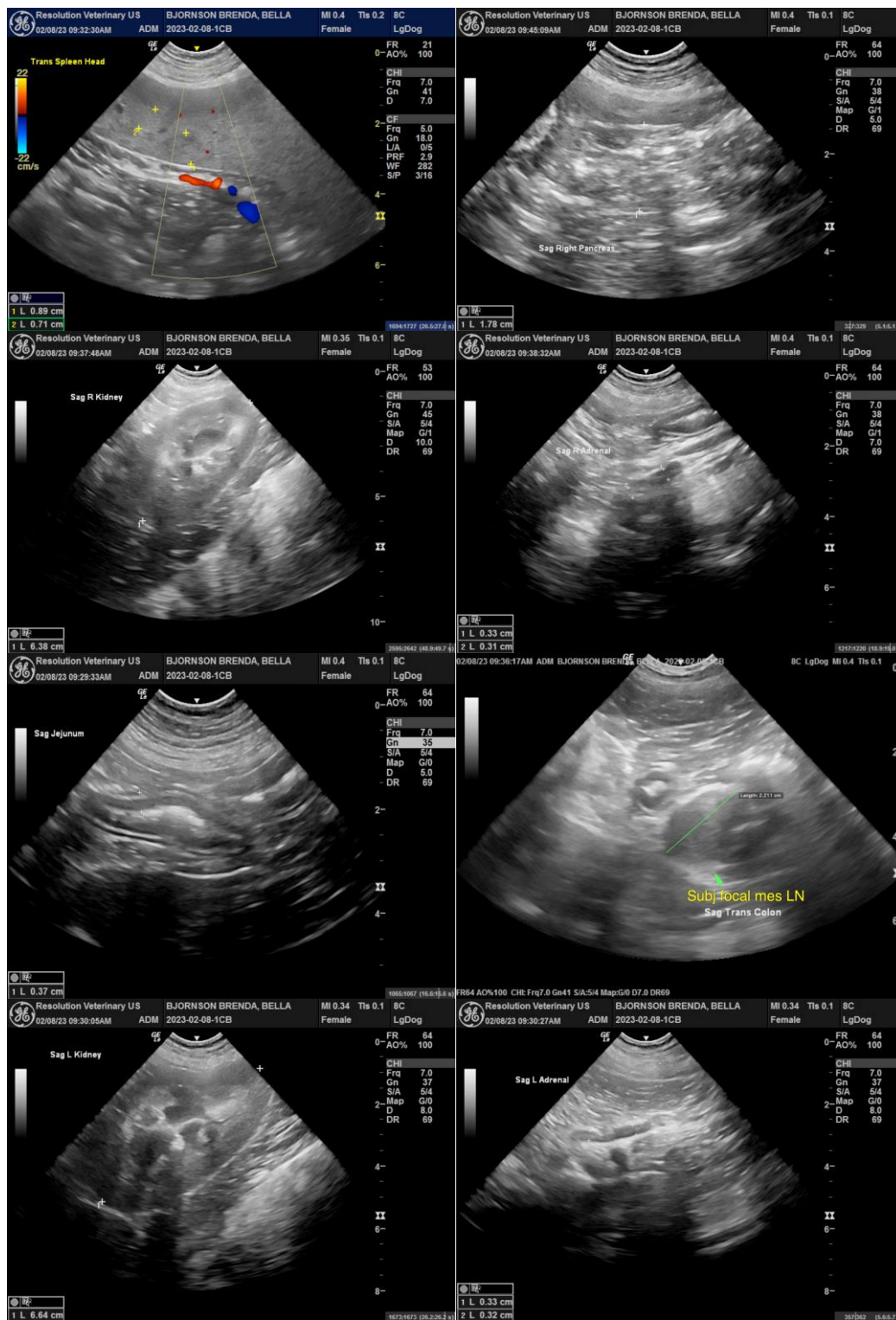
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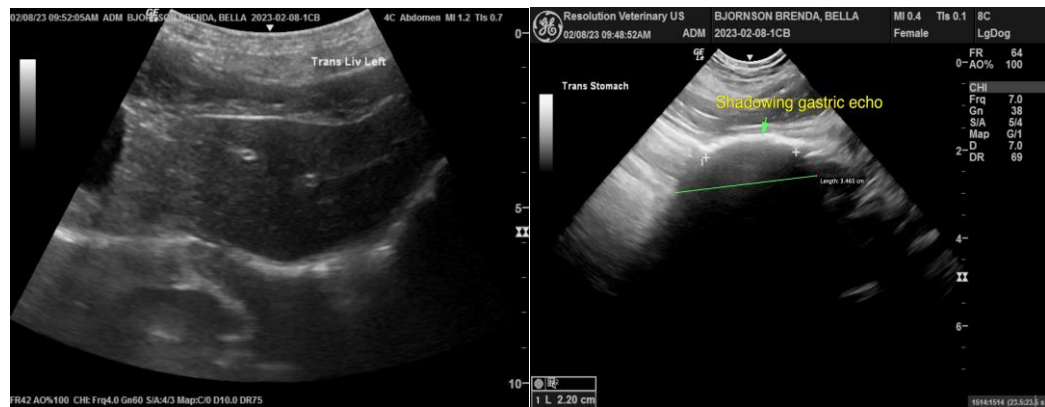
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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