



PATIENT

Pheonix Zielinski

SPECIES

Canine

BREED

Australian Shepard

SEX

FE

AGE

7

WEIGHT

51.2

PRESENTING CLINICAL SIGNS

DVM suspicious of pyometra. BAPH wanted US before surgery. Abnormal PE/Chem/CBC/JA Results: Severely elevated WBC

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder was non-distended in size containing primarily anechoic urine with no evidence of inflammatory urinary bladder criteria. No urinary bladder tumors were noted. The urethra exhibited overtly normal structure and tone to a depth of 3.0 cm.

A solitary medial iliac lymph node was present. 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 3.4 cm x 1.2 cm.

The visualized uterus exhibited generalized to variable mural thickening with segmental, primarily mild to anechoic luminal fluid. An example of uterine horn width measured 1.6 cm. An example of uterine wall measured 0.5 cm width. The left and right ovaries were not definitively visualized.

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

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, pyelectasia, or overt nephritis criteria. The left kidney measured 6.0 cm in length. The right kidney measured 6.1 cm in length.

IMAGING PERFORMED BY

Adrienne Waffle

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.64 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.63 cm width at the caudal pole.

HOSPITAL NAME

Torch Lake
Veterinary Clinic

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.

REFERRING VET

Karen Reabe

INVOICE

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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 containing primarily anechoic content with mild echogenic, nonorganized gallbladder debris. The cystic and common bile ducts were normal.

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Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild echogenic, nonshadowing ingesta without signs of obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Minor segmental intestinal ingesta / chyme was noted with no obstructive pattern.

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

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 were evident.

Free Abdomen

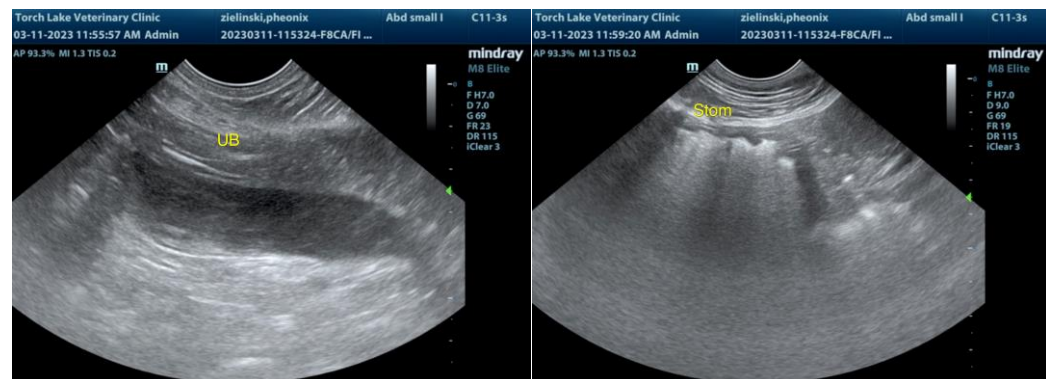
No omental masses, overt or significant omental lymphadenopathy, or evidence of peritoneal effusion were noted.

ULTRASONOGRAPHIC FINDINGS

- Variably thickened uterus exhibiting primarily mildly segmental luminal fluid - strongly suggestive of endometritis with segmental subjective mild pyometra, hydrometra, or similar
- Mild subjective benign / reactive mesenteric lymphadenopathy
- Sonographically unremarkable non-distended urinary bladder

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Assuming no evidence of pathology on three-view chest radiographs, the only intraabdominal cause of the severely elevated WBCs would be the uterus. Exploratory laparotomy with expectation toward ovariohysterectomy is recommended.





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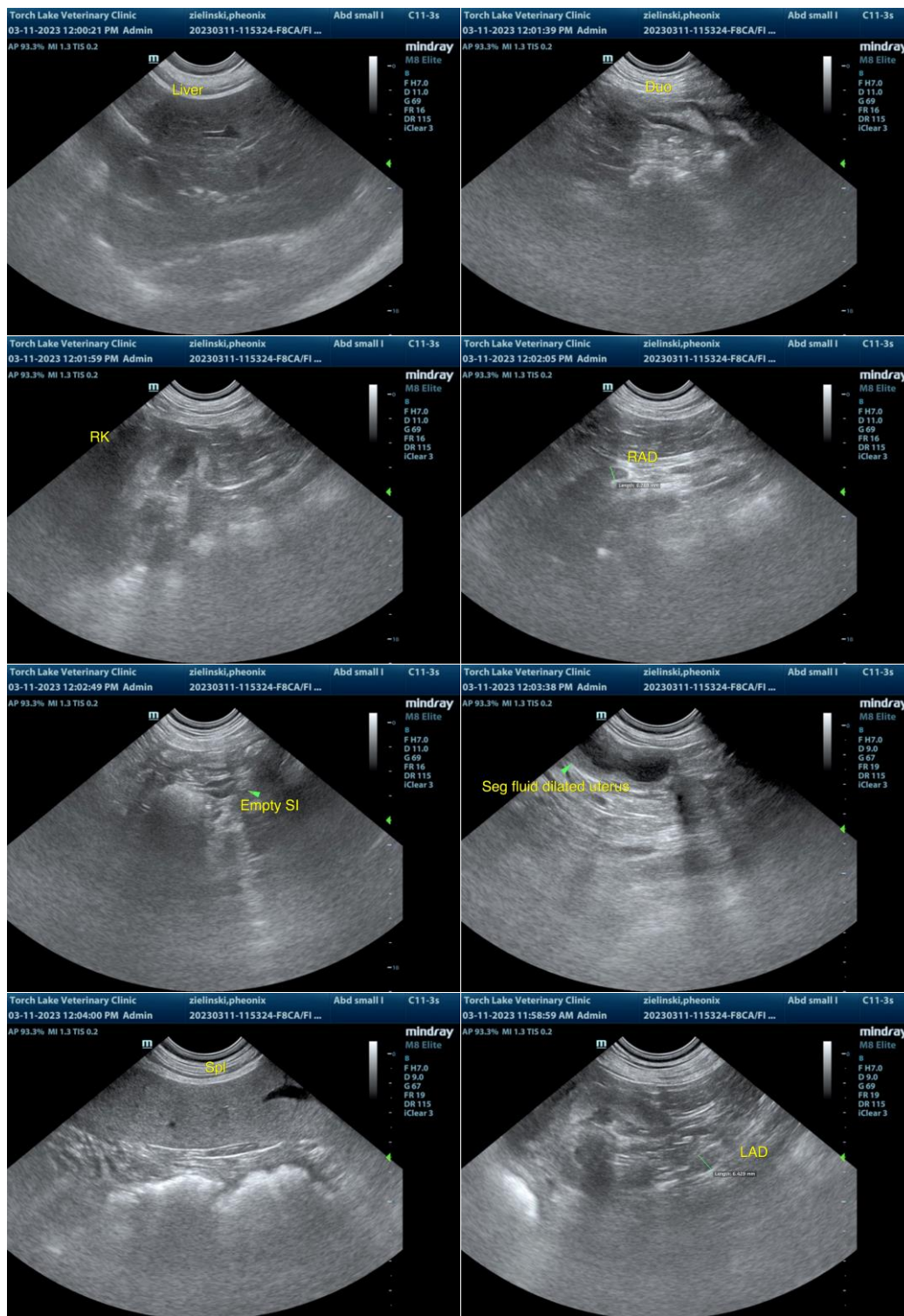
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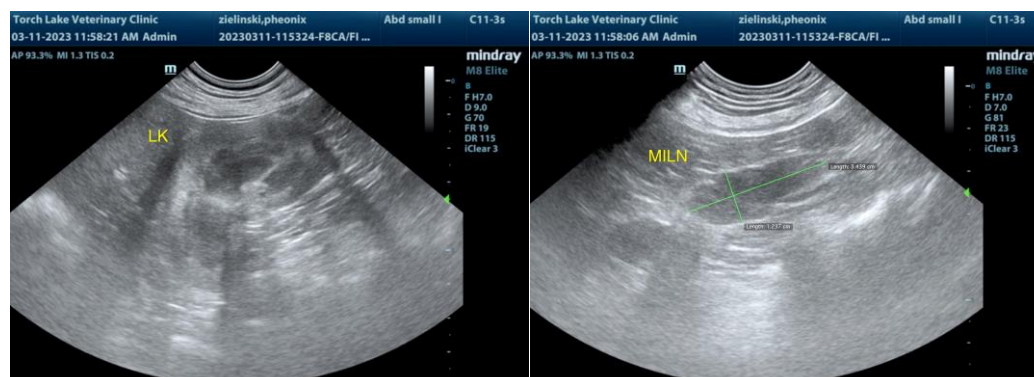
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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