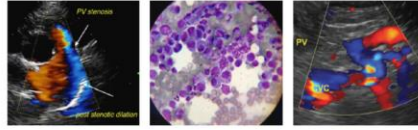


IMAGING PERFORMED BYSVS Mobile Imaging CT 262 - 366 - 5970
fredgromalak@gmail.comEDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com**PATIENT**Gracie Harrison
49651A**SPECIES**

Canine

BREED

Siberian Husky

SEX

Intact Female

AGE

5 years

WEIGHT

24.5 kg

INTERPRETED BYR. McKenzie Daniel,
DVM, DABVP
(Canine and Feline)**IMAGING PERFORMED BY**

Tom McNeill

HOSPITAL NAME

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Dr. Marroquin**INVOICE**

13572

DATE

3/30/22

PRESENTING CLINICAL SIGNS

On Thursday, Gracie vomited up six to eight squeakers. On Saturday she had diarrhea. Monday morning around 430a, Gracie vomited up two more squeakers. She has only eaten about two mouthfuls of kibble since Saturday. Anything she tries to eat she vomits back up. She is still drinking water and urinating. She has not had a BM since Saturday when she had the diarrhea. Per owners she has been a bit more lethargic than usual.

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.

No overt pathology was noted in the area of the uterus or bilateral ovaries.

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 5.9 cm in length. The right kidney measured 6.6 cm in length.

Adrenal Glands

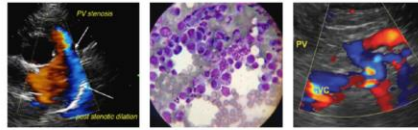
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.42 cm width at the caudal pole and 0.40 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.64 cm width at the caudal pole and 0.48 cm width at the cranial 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/ 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.

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Gastrointestinal

The stomach exhibited marked distention with retained anechoic fluid extending into the pylorus and pyloric outflow tract. No overt evidence of gastric retained ingesta, shadowing echoes, or mechanical pyloric outflow obstruction.

The small intestine exhibited upper to mid duodenal fluid dilation without overt evidence of peristaltic activity. The fluid dilation in the duodenum extended caudally to the approximate level of the duodenal flexure where a strongly shadowing subjective curvilinear echo measuring approximately 2.0-3.0 cm in diameter was present. The small intestine, primarily the jejunum and ileum to the level of the colon distal to the strongly shadowing distal duodenal echo, was empty without concurrent areas of metabolic / mechanical ileus and exhibited intact normal wall layering with 1:3 muscularis/mucosa ratio.

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

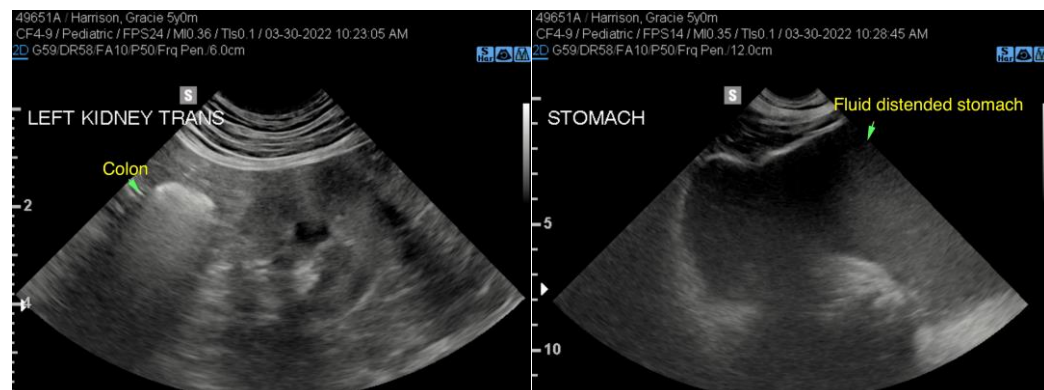
No overt lymphadenopathy, effusion, or evidence of peritonitis was present.

ULTRASONOGRAPHIC FINDINGS**Primary Findings**

- Obstructive distal duodenal foreign body with proximal gastroduodenal obstructive pattern, empty sonographically unremarkable small intestinal distal

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

This study confirms the presence of obstructive foreign body potentially correlating to a squeaker, given the patient's history, although other obstructive foreign body is possible. Given this presentation, exploratory laparotomy with expectation toward enterotomy in the area of the distal duodenum is recommended.



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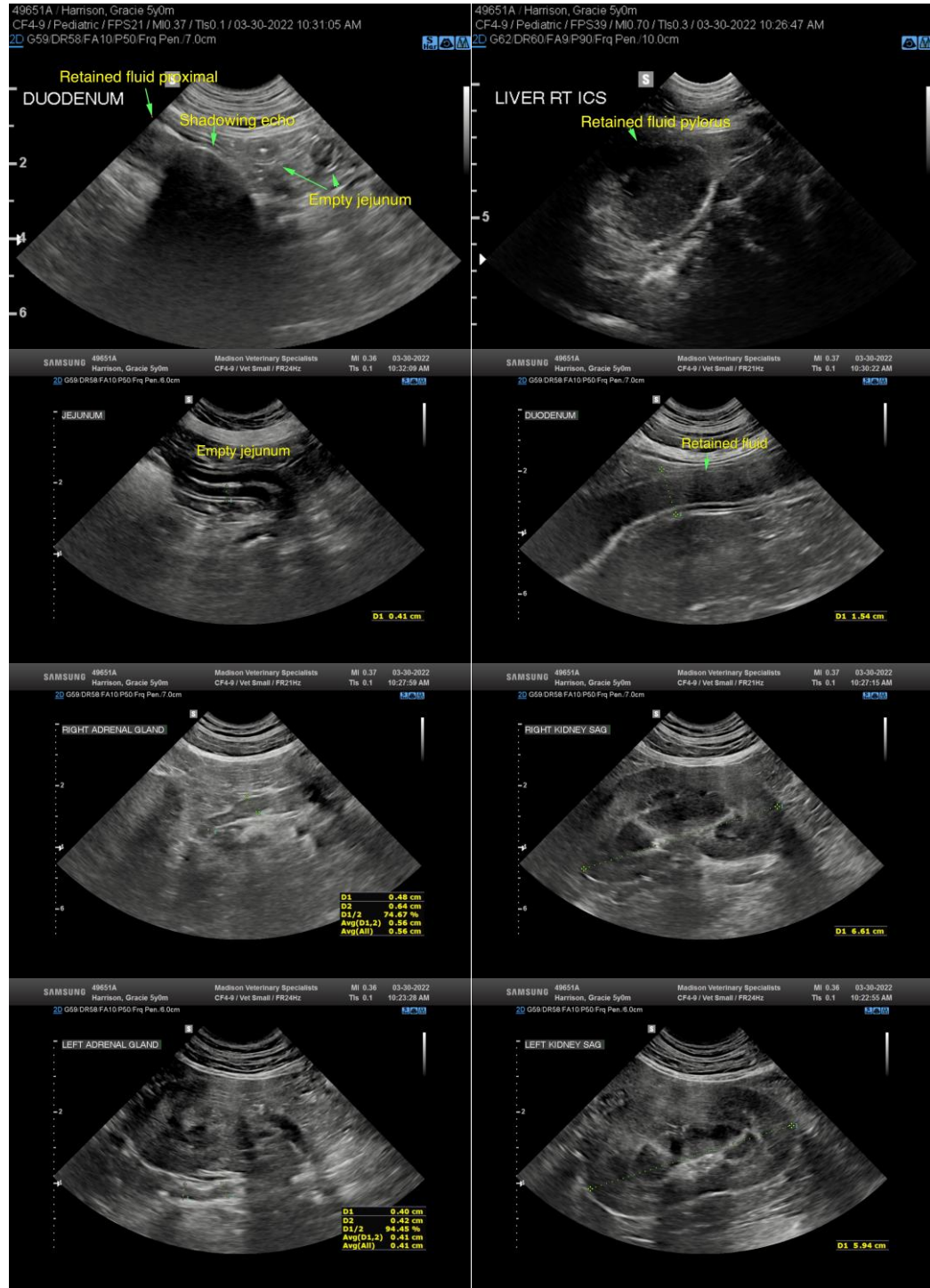
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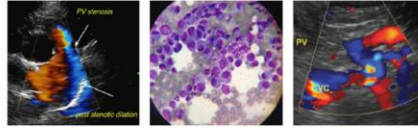
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology

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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