



PATIENT

Bey Nofziger

SPECIES

Canine

BREED

Old English Mastiff

SEX

Neutered Male

AGE

8 Years

WEIGHT

168 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jasmine Palacios

HOSPITAL NAME

Rivers Edge PMC

REFERRING VET

Dr. Travis Gibson

INVOICE

21861

DATE

3/31/23

PRESENTING CLINICAL SIGNS

History: Patient became restless mid-day yesterday. Owner took patient to an emergency facility last night, where a radiograph was performed. Screw was present in the stomach at that time. There was not a Dr. available, so she took home. Patient was seen here this morning at 9am. The screw had moved.

Abnormal PE/Chem/CBC/UA Results: See attached rads: Digital radiography- Screw present in mid abdomen roughly the level of ileum, feces in colon

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone and cystourethral junction 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.

The residual prostate exhibited mild prominent to enlarged size with maintained symmetrical capsule contour and homogenous parenchyma without evidence of parenchymal mineralization or intraparenchymal cysts. No evidence of periprostatic inflammation. The residual prostate measured approximately 4.2 cm in diameter.

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 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 7.9 cm in length. The right kidney measured 7.6 cm in length.

Adrenal Glands

Both adrenal glands are mildly prominent in size based on normal canine adrenal parameters yet considered a normal patient variant given the size of the patient, without evidence of adrenal gland pathology. The left adrenal gland measured 1.4 cm width at the caudal pole. The right adrenal gland measured 1.0 cm width 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



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

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material.

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Normal visible colon wall layers were present with generalized formed to shadowing fecal matter throughout the colon.

Pancreas

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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

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No omental masses, overt lymphadenopathy or evidence of peritoneal effusion/peritonitis was present.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

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- Sonographically unremarkable gastrointestinal tract/colon with mild gastric ingesta
- Normal peritoneal cavity- no evidence of peritoneal effusion/peritonitis

Secondary Findings

- Mildly prominent/enlarged residual prostate- nonspecific

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The mildly prominent to enlarged residual prostate may be a normal patient variant given the reported neuter status. No evidence of residual prostate inflammatory or neoplastic criteria. Correlation with clinical history +/- rectal palpation, if possible, is suggested.

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The ingested screw was not definitively visualized within the intestine or colon. Visualization of the screw may be somewhat limited owing to patient size/conformation with potential nonvisualization owing to gas artifact or movement of the screw into the colon, presently surrounded by shadowing fecal matter. No evidence of gastrointestinal obstructive pattern, nor evidence of intestinal perforation or secondary peritoneal free fluid/peritonitis. Given no evidence of visceral pathology, with potential for passage of the screw into the colon, continued clinical and radiographic monitoring with possible increased feeding frequency and as needed gastrointestinal support would be reasonable. Recheck sonogram if persistence of the screw in a focal aspect of the intestine or if clinical signs consistent with intestinal obstruction and/or peritonitis is recommended.

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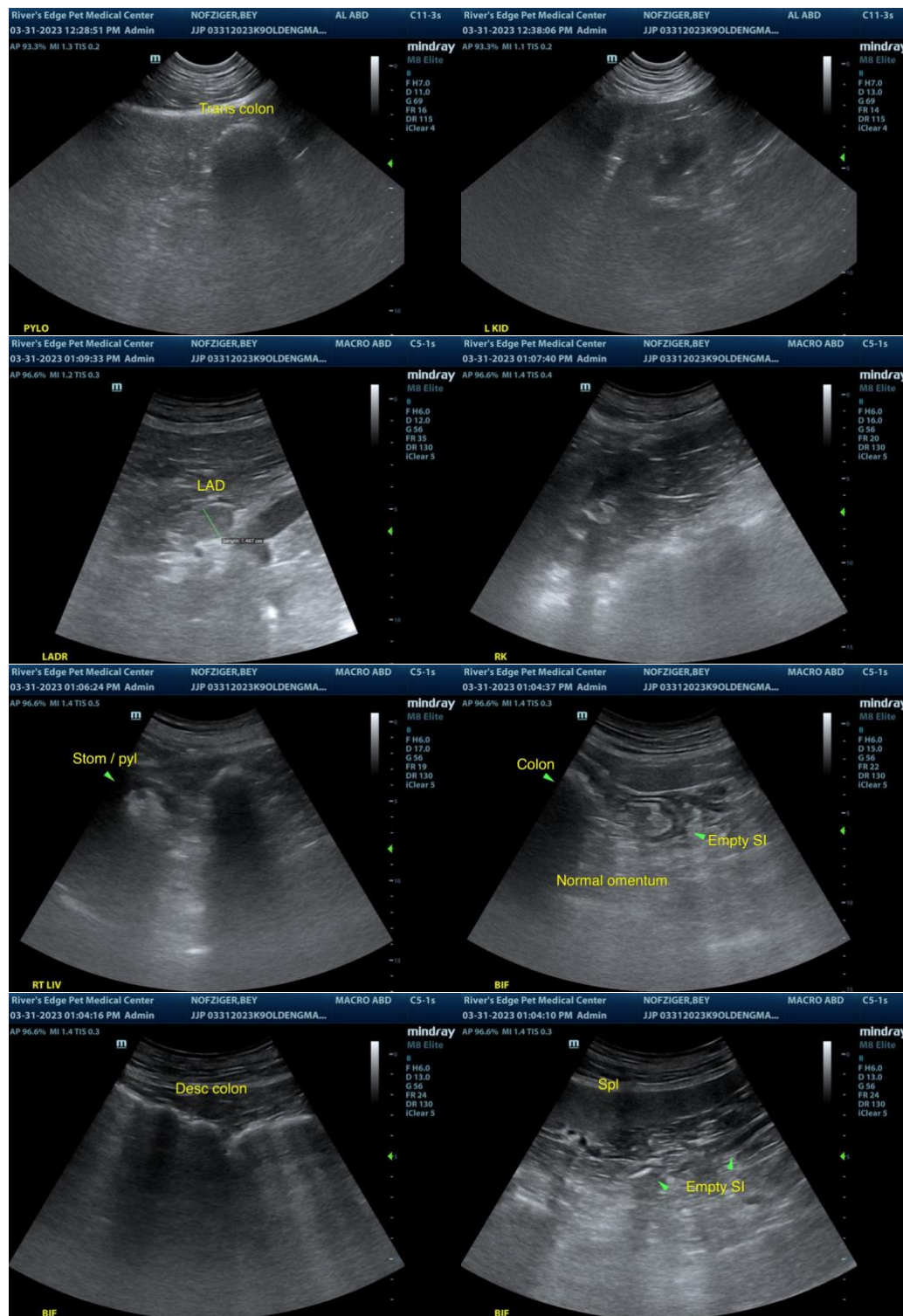
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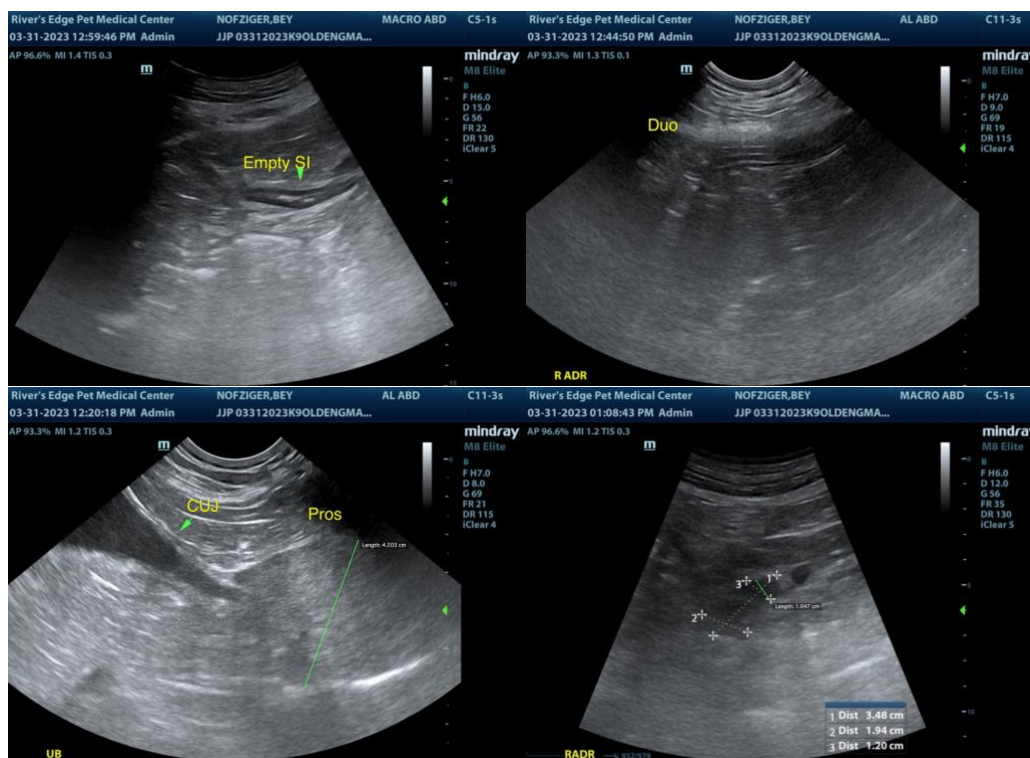
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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