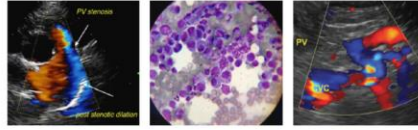


IMAGING PERFORMED BYSVS Mobile Imaging CT 262 - 366 - 5970
fredgromalak@gmail.com**PATIENT**Purry Gomez
266446**SPECIES**

Feline

BREED

DSH

SEX

Male Neutered

AGE

11 years

WEIGHT

4.8 kg

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

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

WVRC- Dr. Mallo

INVOICE

13594

DATE

4/1/22

PRESENTING CLINICAL SIGNS

Onset of vomiting about 5 days ago with severe hyporexia. Prior history of foreign body ingestion (hair ties).

Abnormal PE/Chem/CBC/UA Results: rDVM performed ABXR 03/31/2022 and concern for possible obstruction.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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 3.7 cm in length. The right kidney measured 3.7 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 0.29 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.31 cm width.

Spleen

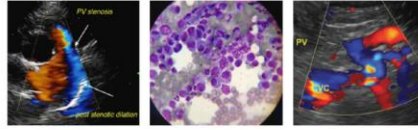
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute 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.

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. Very minor retained pyloric fluid was noted with no signs of ileus, obstruction, or foreign material. The gastric body wall width measured 0.26 cm.

IMAGING PERFORMED BYSVS Mobile Imaging CT 262 - 366 - 5970
fredgromalak@gmail.com**PATIENT**Purry Gomez
266446**SPECIES**

Feline

BREED

DSH

SEX

Male Neutered

AGE

11 years

WEIGHT

4.8 kg

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

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

WVRC- Dr. Mallo

INVOICE

13594

DATE

4/1/22

The small intestine presented intact wall layering and maintained a 1:3 muscularis/mucosa ratio with segmental mild to moderate yet variable retained intestinal fluid exhibiting potential for oral/aboral movement of the fluid and possible hyperperistalsis. Focal shadowing echo measuring approximately 1.5-2.0 cm in diameter was present in the subjective mid intestinal tract, likely jejunum in location. Concurrent segments of empty normal-appearing small intestine without evidence of metabolic / mechanical ileus to the level of the Ileum and colon were present. No overt pathology was noted in the area of the ileocolic junction. The jejunum wall width measured 0.27 cm. The duodenum wall width measured 0.23 cm. The ileocolic wall width measured 0.30 cm.

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

Intermittent jejunal lymph nodes were present. These lymph nodes were homogenous, mildly hypoechoic and smoothly marginated. A normal width: length ratio was maintained (<0.5). Evidence of perilymphatic to regional peri-intestinal reactive mesentery in the area of intestinal fluid retention and the shadowing intestinal echo was evident. An example of lymph node size was 1.8 cm x 0.45 cm. Potential for very scant pockets of peri-intestinal free fluid is possible yet not definitive.

ULTRASONOGRAPHIC FINDINGS***Primary Findings***

- Segmental small intestinal obstructive pattern with focal strongly shadowing Intestinal luminal echo, concurrent empty small intestine to level of the Ileocolic junction
- Probable mild associated jejunal lymphadenitis
- Mild regional peri-intestinal to perilymphatic reactive mesentery, potential scant peri-Intestinal free fluid

Secondary Findings

- Mild age-related kidneys

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The sonographic abnormalities are consistent with small intestinal foreign body, likely jejunal in location with associated segmental to partial intestinal obstructive pattern. Laparotomy for gross assessment and expectation toward enterotomy with a full examination of the gastrointestinal tract is recommended. Intestinal biopsies at the time of surgery could be considered to assess for underlying intestinal disease, given the patient's history of pica.

IMAGING PERFORMED BY

SVS Mobile Imaging CT 262-366-5970
fredgromalak@gmail.com



PATIENT

Purry Gomez
266446

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

11 years

WEIGHT

4.8 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

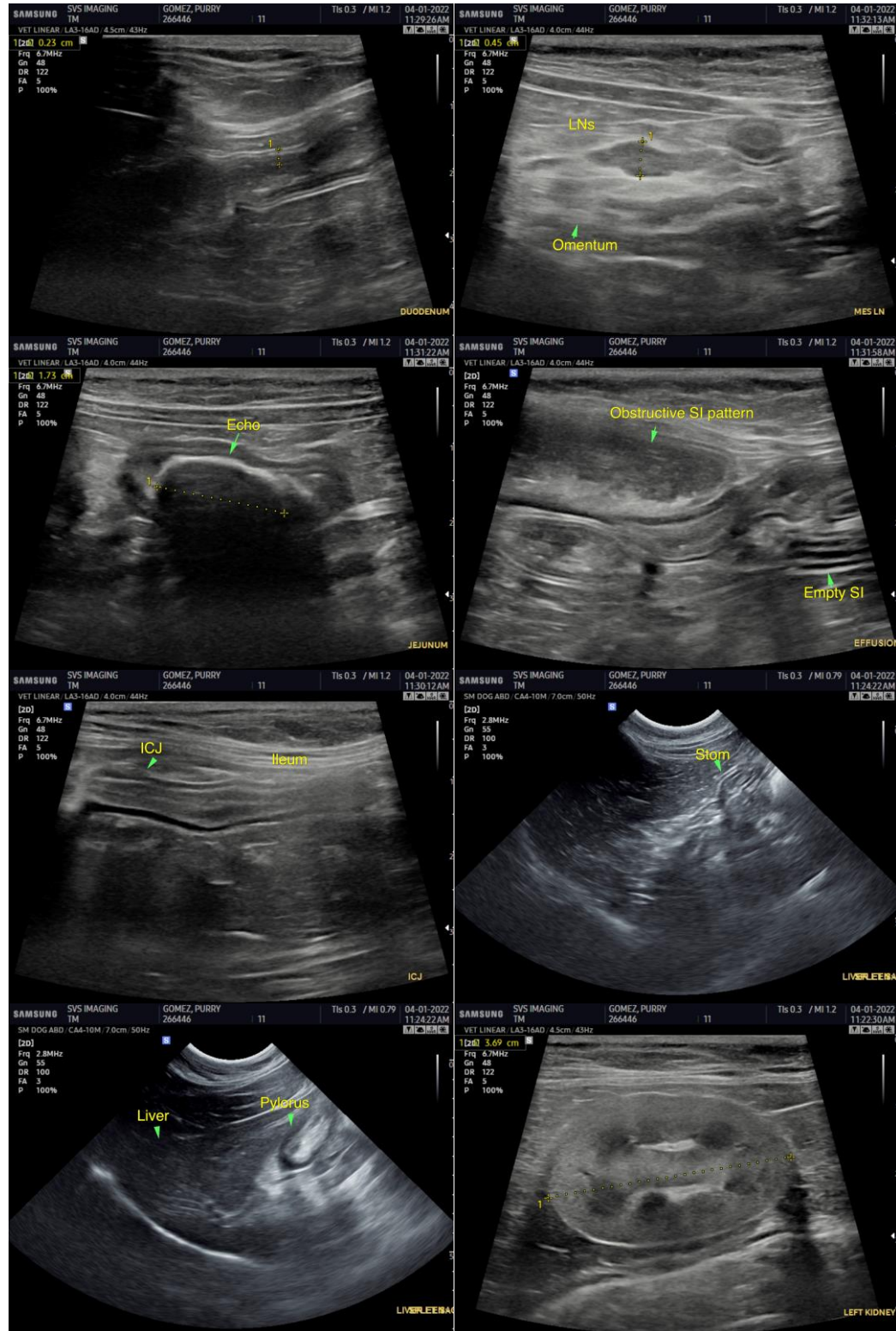
WVRC- Dr. Mallo

INVOICE

13594

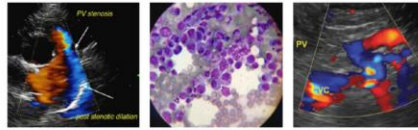
DATE

4/1/22



IMAGING PERFORMED BY

SVS Mobile Imaging CT 262 - 366 - 5970
fredgromalak@gmail.com



EDUCATIONAL TELECONSULTATION SERVICES™
1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Purry Gomez
266446

SPECIES

Feline

BREED

DSH

SEX

Male Neutered

AGE

11 years

WEIGHT

4.8 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

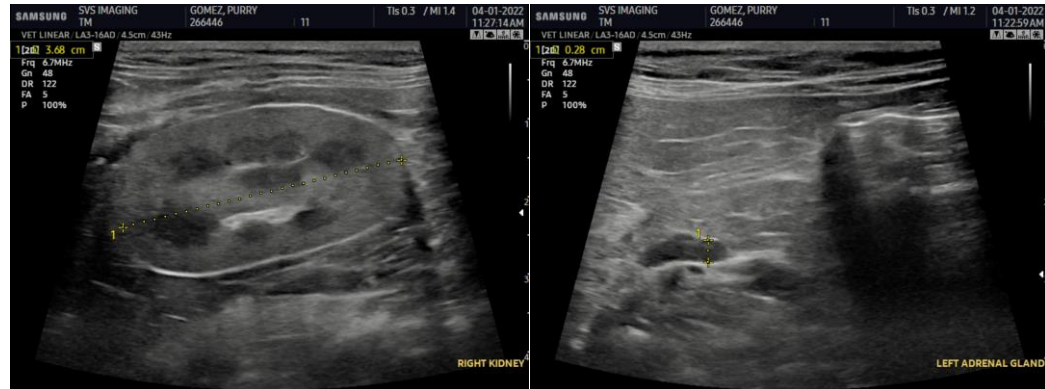
WVRC- Dr. Mallo

INVOICE

13594

DATE

4/1/22



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)
info@SonoPath.com