



**PATIENT**

Barney Caffey

**SPECIES**

Canine

**BREED**

Basset Hound

**SEX**

Neutered Male

**AGE**

2 Years

**WEIGHT**

50 Pounds

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Kathleen Byrnes

**HOSPITAL NAME**

Animal Emergency  
Clinic of the High  
Country

**REFERRING VET**

Byrnes Relief  
Veterinary Services

**INVOICE**

46515

**DATE**

4/8/23

**PRESENTING CLINICAL SIGNS**

P had exploratory and R&A done on 4/4 at rDVM. The R&A may have removed the cecum. P not doing well post surgery. Large amount of free fluid in abdomen, Free air in cranial abdomen unable to see all of liver, area of pancreas is hyperechoic with loss of detail FNA of fluid- bloody in house cytology- degenerate neutrophils, rbc's, macrophages- no intracellular bacteria seen

Abnormal PE/Chem/CBC/UA Results: HCT 61, PLT 71 (unsure if clot present, unsure if blood smear performed), WBC 15.6 Chem17 Alb 2.1, ALKP 405, Tbil 1.2, Amylase >2500, Lipase 3477

**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 were noted.

The residual prostate was free of pathology.

No overt medial iliac or sublumbar lymphadenopathy.

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 6.3 cm. The right kidney measured 7.0 cm.

**Adrenal Glands**

The adrenal glands were overtly normal in size, position, and shape. The left and right adrenal glands measured 0.48 cm in 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**

The liver presented normal in size. The hepatic parenchyma revealed diffuse reduced echogenicity compared to the spleen and renal cortical parenchyma with a mild coarse echotexture. Increased portal vein prominence was evident. The capsule of the liver was normal in margination. Distinct masses or nodules were not evident. The hepatic and portal vasculature were normal in appearance. The gallbladder was indistinctly visualized, subjectively normal. The common bile duct was overtly normal.

**Gastrointestinal**

The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. Indistinctly visualized potential for mild retained gastric ingesta.

The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A segmental to diffuse ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present without obstruction or foreign material. Segmental intestinal corrugation also noted.



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The colon walls were moderate to markedly prominent with mild thickened to echogenic submucosa. Generalized empty colonic lumen.

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**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 was evident.

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Basset Hound

**Free Abdomen**

Moderate to marked peritoneal effusion noted, exhibiting effusion echogenic changes suggestive of effusion cellularity. Generalized non-uniform hyperechoic omentum noted.

**SEX**

Neutered Male

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

2 Years

- Moderate to severe gastroenterocolitis pattern with possible retained gastric ingesta, segmental intestinal ileus, and corrugation pattern.
- Moderate to severe volume peritoneal effusion exhibiting effusion echogenic changes with generalized non-uniform hyperechoic omentum – consistent with peritonitis.
- Hypoechoic liver

**WEIGHT**

50 Pounds

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

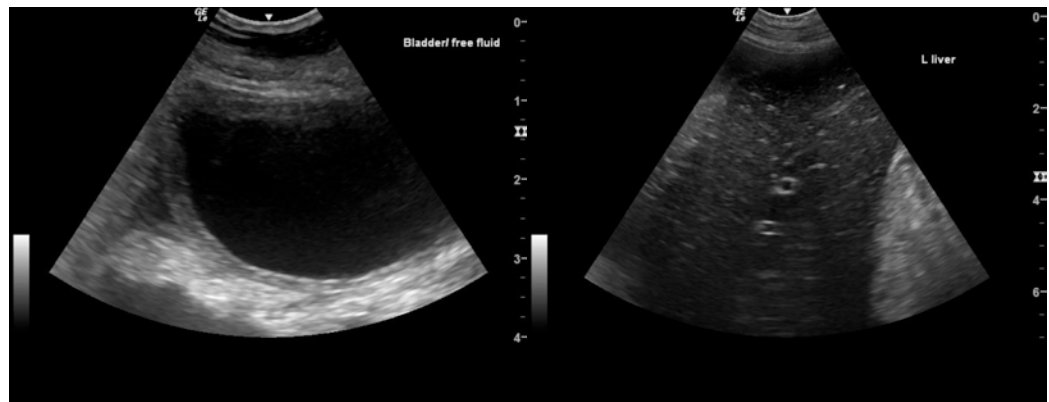
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Immediate exploratory laparotomy is indicated. Definitive evidence of recurrent gastrointestinal obstruction was not obvious, yet the possibility of remaining gastrointestinal material cannot be definitively excluded. Gastrointestinal biopsies are warranted to rule out potential underlying or chronic intestinal disease.

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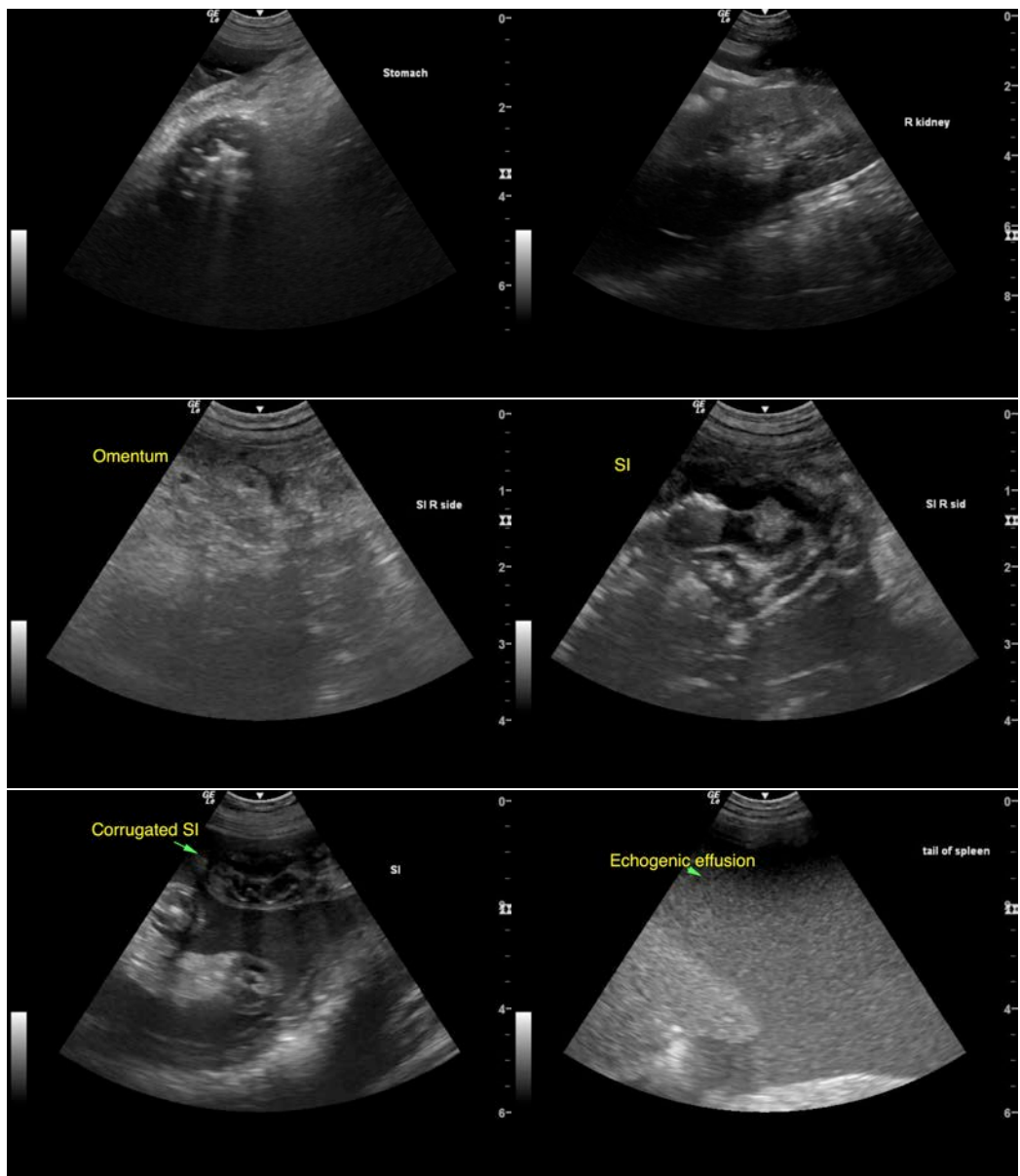
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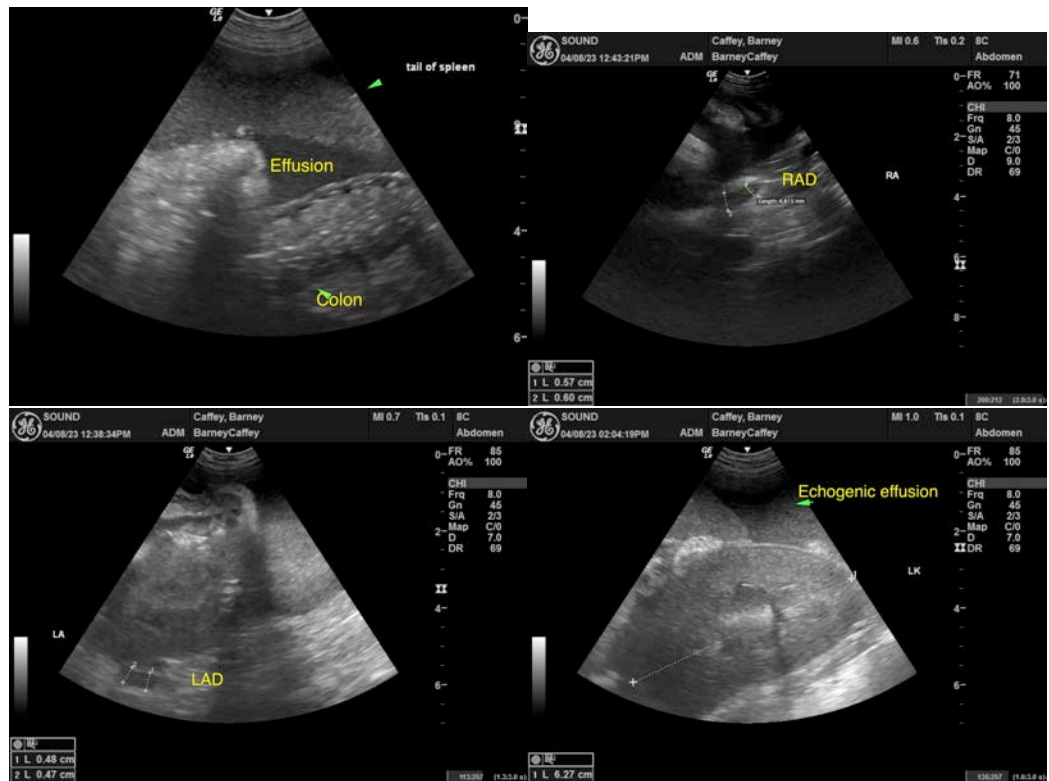
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)**

info@SonoPath.com