

**PATIENT**

Dixie Ford 50715A

SPECIES

Canine

BREED

Golden Retriever

SEX

Intact Female

AGE

5 Months

WEIGHT

16.5 kg

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

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VETMadison VS- Dr.
Graham**INVOICE**

15225

DATE

5/17/22

PRESENTING CLINICAL SIGNS

History: Patient presented on 5/15 for vomiting and lethargy. It was discovered she chewed up a bottle of ibuprofen, unknown quantity of pills ingested. Hospitalized for the past couple of days. Diarrhea and abdominal distension noted today. AFAST scan revealed abdominal effusion.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of – 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.

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 6.8 cm in length. The right kidney measured 7.95 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 0.60 cm width at the caudal pole and 0.45 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 0.56 cm width at the caudal pole and 0.69 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

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.

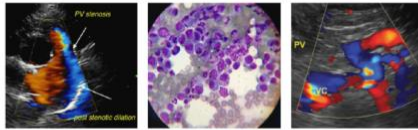
Gastrointestinal

The stomach exhibited intact and sonographically unremarkable wall layering with moderate retained mildly echogenic fluid.

The small intestine exhibited primarily generalized moderate fluid distention, involving the duodenum and jejunum, extending caudally to likely distal jejunal or potential proximal ileal intussusception. The intussusception potentially measured 5-7 cm in length with subjective mild inflammatory mural changes noted in the intussusciptens. The intussusception did not appear to involve the ileocolic junction. The intestinal segments not involved with the intussusception exhibited intact wall layering and subjective maintained 1:3 muscularis to mucosa ratio.

IMAGING PERFORMED BY

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



PATIENT

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

Dixie Ford 50715A

Pancreas

SPECIES

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.

Canine

Free Abdomen

BREED

Multiple mid abdominal mesenteric lymph nodes were present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). An example measured 4.4 cm x 1.6 cm.

Golden Retriever

SEX

Mild volume, subjectively anechoic free fluid was noted. Regional periintestinal reactive mesentery noted.

Intact Female

ULTRASONOGRAPHIC FINDINGS

AGE

- Intussusception with subjective proximal intestinal obstructive pattern- suspect area of mid to distal jejunum or potential ileum
- Associated periintestinal reactive mesentery and subjective benign/reactive mesenteric lymphadenopathy
- Mild volume anechoic peritoneal free fluid

5 Months

WEIGHT

16.5 kg

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

Exploratory laparotomy with gross inspection of the gastrointestinal tract with potential reduction or resection anastomosis of the intussusception recommended. Overt evidence of concurrent foreign body was not definitively evident, although the possibility of small amounts of foreign material given the patients history cannot be definitively excluded. The free fluid is nonspecific with potential differentials, including mild amount of incidental free fluid sometimes seen in young patients, effusion secondary to segmental intestinal inflammation with peritonitis considered less likely.

IMAGING PERFORMED BY

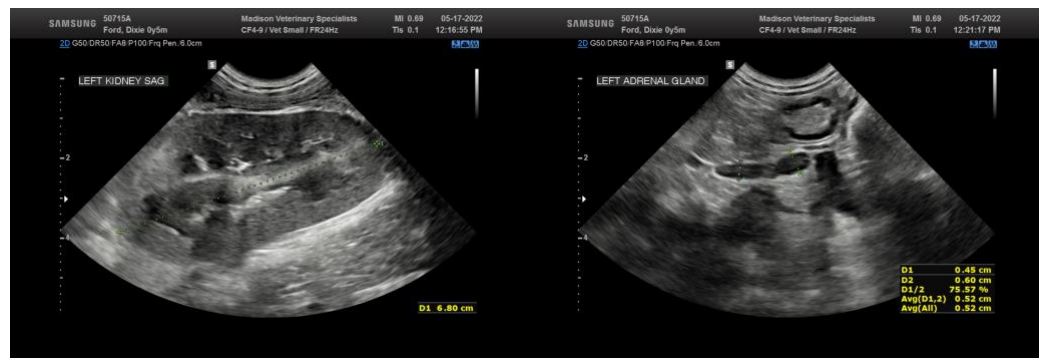
Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

Madison VS- Dr.
Graham



INVOICE

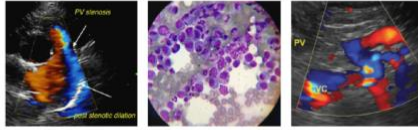
15225

DATE

5/17/22

IMAGING PERFORMED BY

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



Clinical Sonography & Telecytology

EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Dixie Ford 50715A

SPECIES

Canine

BREED

Golden Retriever

SEX

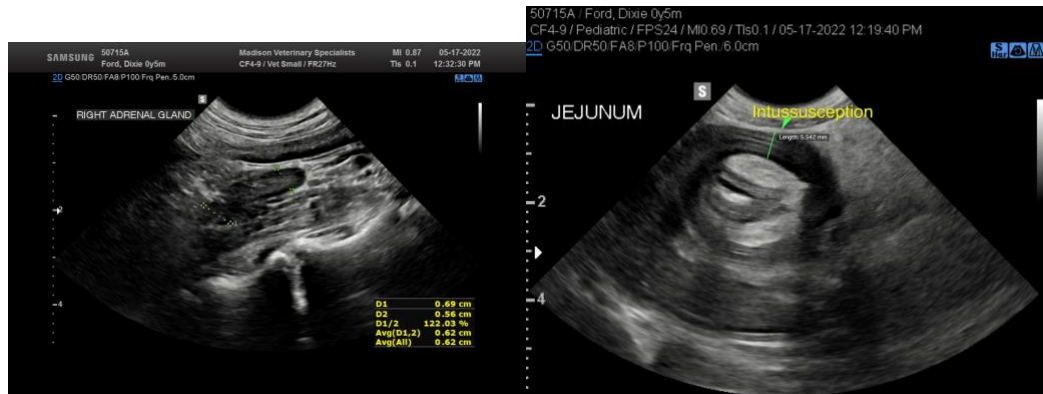
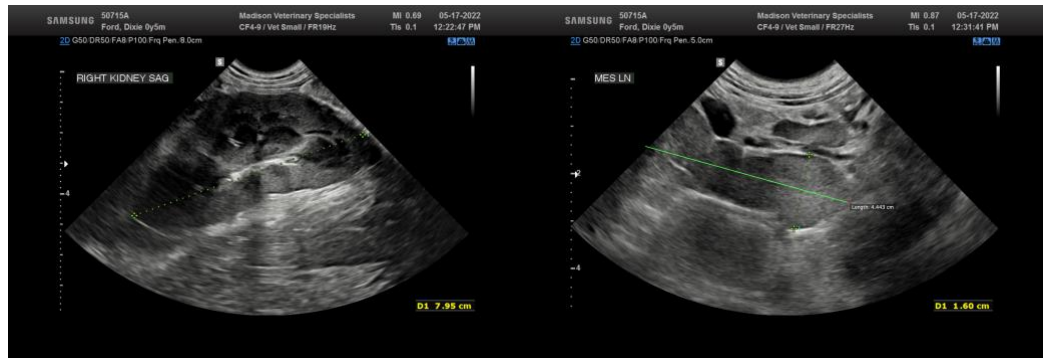
Intact Female

AGE

5 Months

WEIGHT

16.5 kg



INTERPRETED BY

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

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

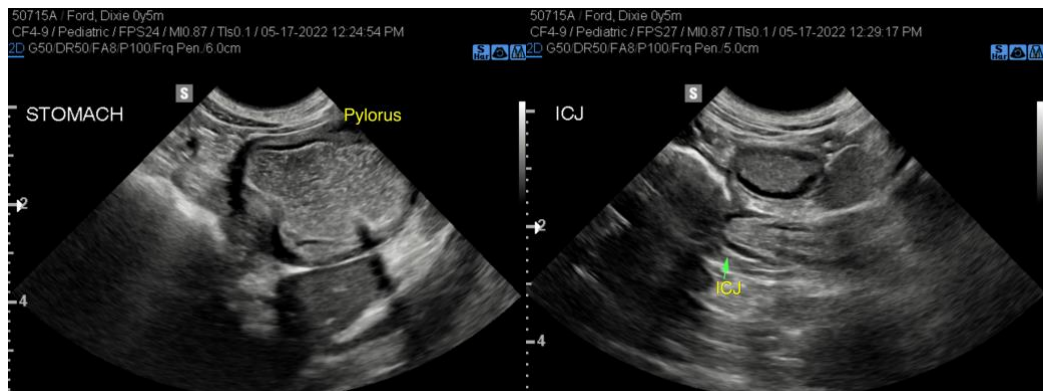
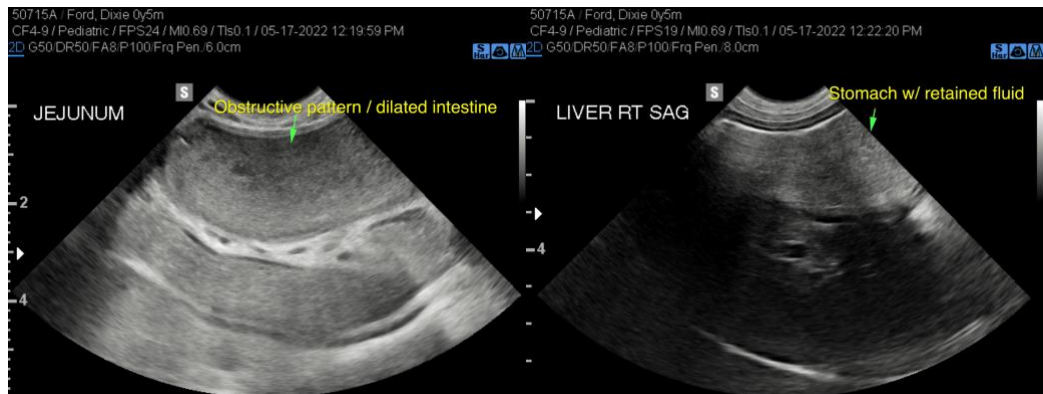
Madison VS- Dr.
Graham

INVOICE

15225

DATE

5/17/22



IMAGING PERFORMED BY

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



Clinical Sonography & Teletology

EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

PATIENT

Dixie Ford 50715A

SPECIES

Canine

BREED

Golden Retriever

SEX

Intact Female

AGE

5 Months

WEIGHT

16.5 kg

INTERPRETED BY

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

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

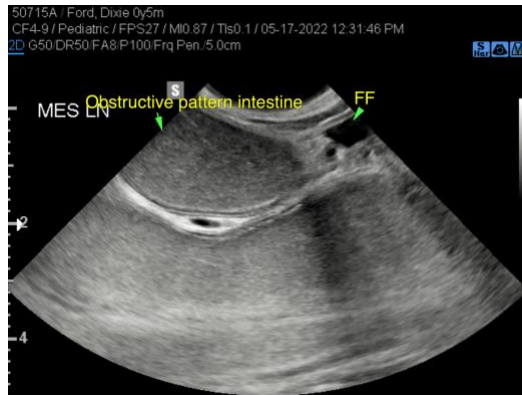
Madison VS- Dr.
Graham

INVOICE

15225

DATE

5/17/22



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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)
info@SonoPath.com