



PATIENT

Mia Hayward

PRESENTING CLINICAL SIGNS

History: Ate a piece of garden fabric yesterday and vomited several times this am.
Abnormal PE/Chem/CBC/UA Results: Pending

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Mixed

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra 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.

SEX

Spayed Female

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 6.7 cm in length. The right kidney measured 5.3 cm in length.

AGE

6 Months

Adrenal Glands

WEIGHT

35 Pounds

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.3 cm x 0.54 cm.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.5 cm x 0.52 cm.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

A. Rodriguez

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.

HOSPITAL NAME

Foxfield VS

The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

REFERRING VET

A. Rodriguez

Gastrointestinal

The stomach presented wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. The gastric body wall measured 0.63 cm width. Minor retained anechoic fluid was present. No overt evidence of retained ingesta or overt gastric foreign material.

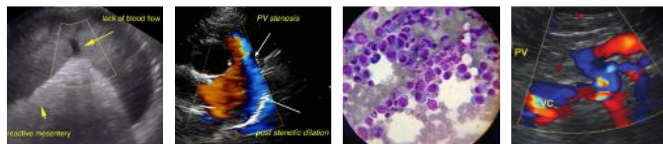
INVOICE

15052

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained echogenic, non-shadowing ingesta consistent with normal food. Segmental to primarily generalized mild small intestinal ileus noted, containing anechoic to mildly echogenic fluids.

DATE

5/6/22



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Overt evidence of mechanical obstructive pattern was not present. The jejunum wall measured 0.39 cm. The duodenum wall measured 0.44 cm.

SPECIES

Canine

The colon walls presented intact yet mildly prominent wall layering with mild thickened to echogenic submucosa. The generalized colon, specifically the proximal colon contained semi-formed to non-formed consistent with diarrhea.

Pancreas

BREED

Mixed

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.

SEX

Spayed Female

Free Abdomen

Multiple, mildly prominent to enlarged mesenteric nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum and maintaining a normal width: length ratio (<0.5).

AGE

6 Months

Minor periintestinal reactive mesentery present. No free fluid was noted.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

35 Pounds

- Acute gastroenterocolitis
- Multiple subjectively benign mesenteric lymph nodes- hyperplasia, minor reactive lymphadenitis secondary to inflammatory bowel episode or immunologic immaturity likely

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

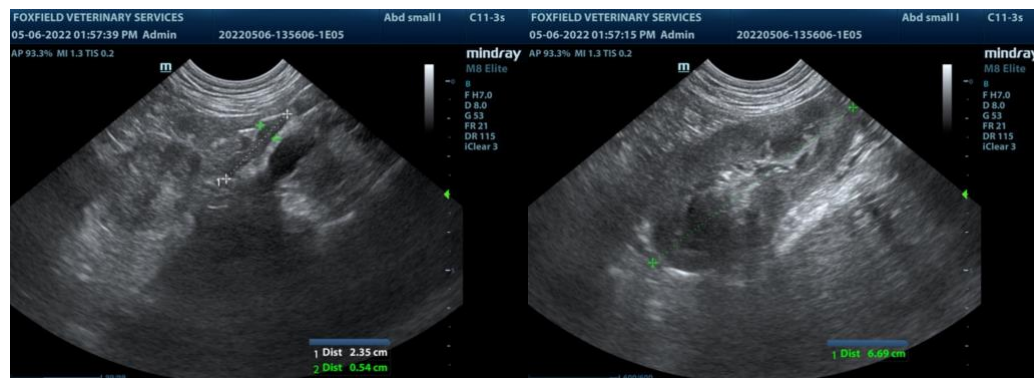
Given the primarily generalized gastrointestinal ileus, acute gastroenterocolitis without overt evidence of mechanical obstructive pattern or obvious foreign material is likely. Given the patients history, dietary indiscretion, infectious gastroenterocolitis, enterotoxic insult with potential for occult parasitism possible. Technically, the possibly of a small amount of passing or past fabric like material cannot be excluded yet given the lack of definitive obstructive pattern or foreign material, no overt indication for immediate surgical intervention. Correlation with pending lab work suggested. Initial supportive care for acute gastroenterocolitis is recommended with assessment of clinical response and potential recheck sonogram in 24-hours.

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SPECIES

Canine

BREED

Mixed

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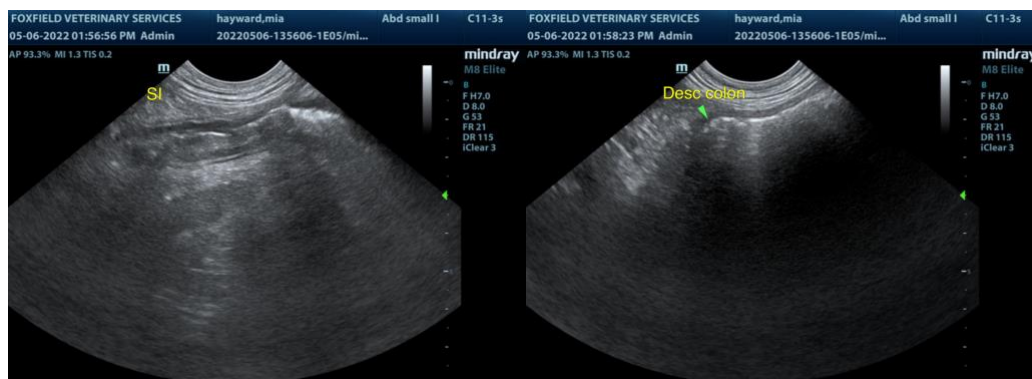
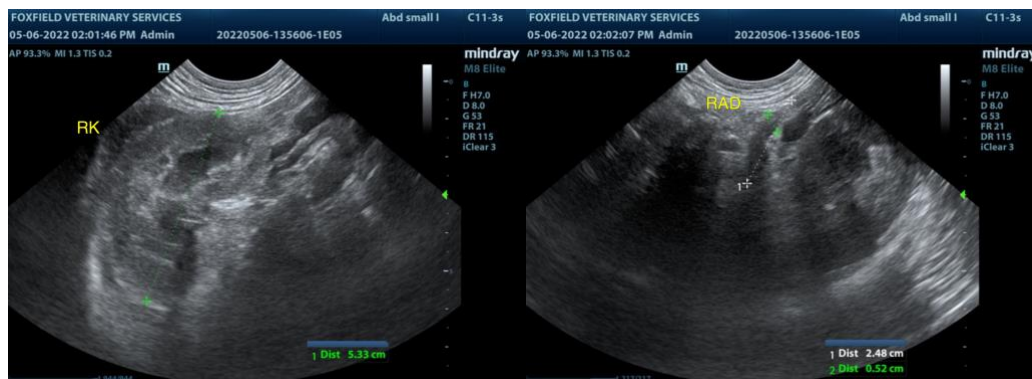
Spayed Female

AGE

6 Months

WEIGHT

35 Pounds



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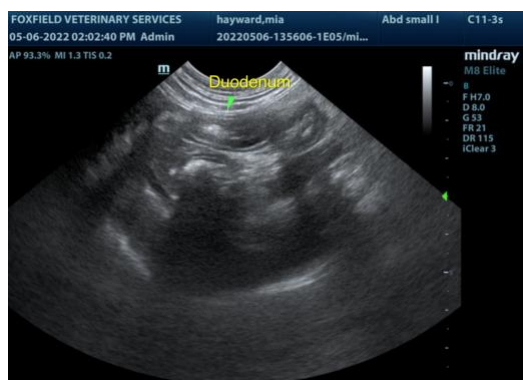
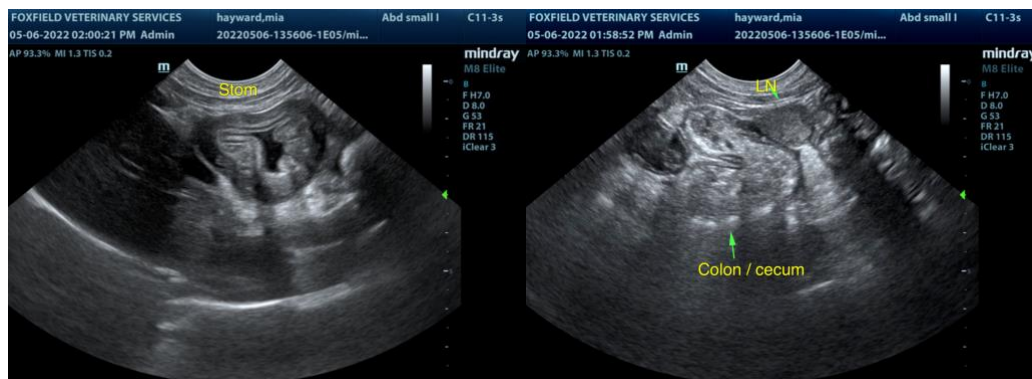
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The information and recommendations provided are based on the images presented by the



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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.

SPECIES

Canine

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info@SonoPath.com

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