



PATIENT PRESENTING CLINICAL SIGNS

Thor Brex
History: Concern for possible intestinal obstruction - gas and distention of bowel on radiographs. Vomits every time he eats. Being treated with SQ fluids, Cerenia, and famotadine 6/6/2022.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine
Urinary System

BREED
English Bulldog
The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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. Aortic trifurcation was normal.

SEX
Neutered Male
No overt pathology in the area of the residual prostate. The residual prostate measured 1.2 cm in diameter.

AGE
3 Years
Normal size and margination was 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 6.9 cm in length.

Adrenal Glands

WEIGHT
65.2 Pounds
The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.8 cm in length x 0.46 cm width at the caudal pole.

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.1 cm in length x 0.59 cm width at the caudal pole.

INTERPRETED BY

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

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

North Haledon VC

REFERRING VET

Dr. Mansfield

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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 mildly subnormal in size, likely owing to the presence of retained gastric ingesta. Thin walls and primarily anechoic luminal content present. The cystic and common bile ducts were normal.

Gastrointestinal

The stomach exhibited moderate distention with moderate retained echogenic ingesta and chyme. Subjective moderately sized strongly shadowing luminal echo was present, measuring approximately 3.0 cm in diameter, extending into the area of the antrum and pylorus.



PATIENT

Thor Brex

The small intestine presented intact wall layering and maintained 1:3 muscularis/mucosa ratio. The lumen of the small intestine was primarily empty with minor segmental ileus, not overtly consistent with small intestinal obstructive pattern.

SPECIES

Canine

The colon revealed intact sonographically unremarkable wall layering. The proximal colon exhibited mild distention with non-formed feces, extending into the transverse and descending colon.

Pancreas

BREED

English Bulldog

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

Neutered Male

Free Abdomen

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

ULTRASONOGRAPHIC FINDINGS

AGE

3 Years

- Moderate retained gastric ingesta/chyme with strongly shadowing gastric luminal echo- strongly suggestive of gastric foreign body or material
- Overtly normal small bowel with minor segmental jejunal ileus- no obvious evidence of concurrent small intestinal mechanical obstructive pattern or foreign material
- Possible colitis/typhlitis

WEIGHT

65.2 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

Exploratory laparotomy with expectation toward gastrotomy and gross inspection of the generalized gastrointestinal tract for evidence of non-visualized, potentially smaller, passing small intestinal foreign material is recommended. The possibility of passed foreign material into the colon cannot be definitively excluded. Intestinal biopsies may be considered at the time of surgery to rule out underlying intestinal disease as a potential cause of pica or if previous history of gastrointestinal signs.

IMAGING PERFORMED BY

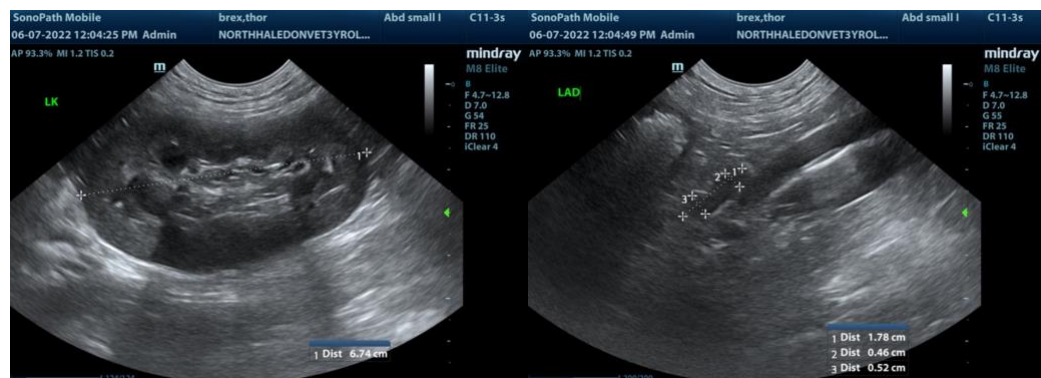
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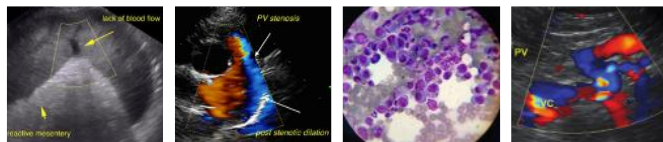


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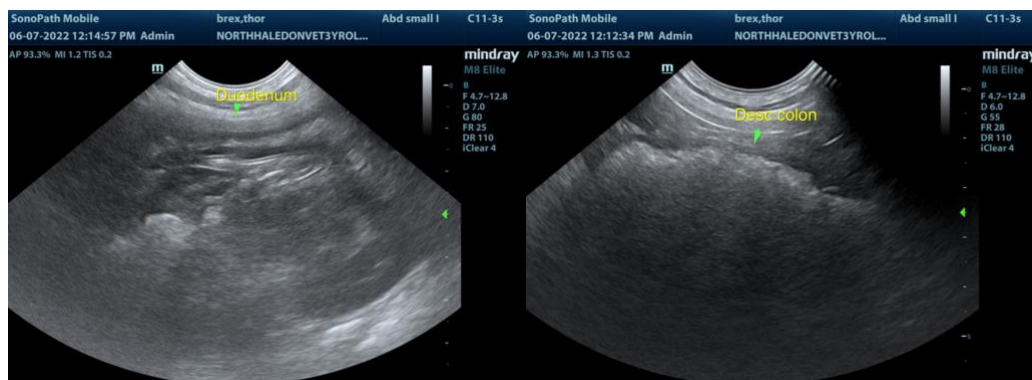
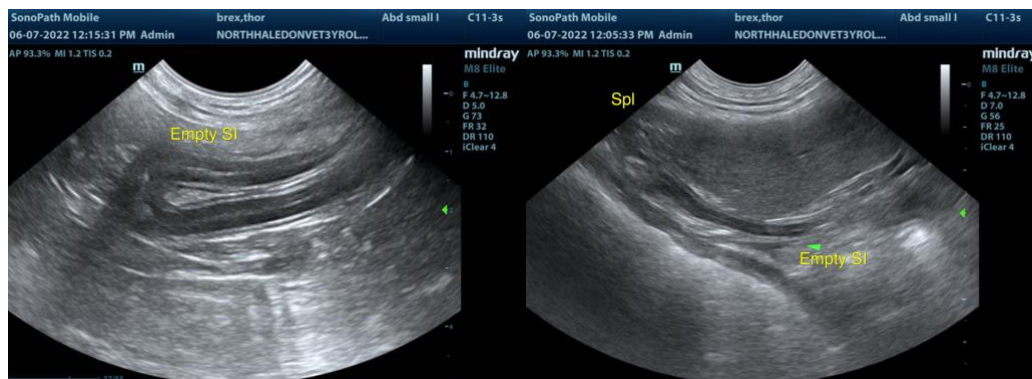
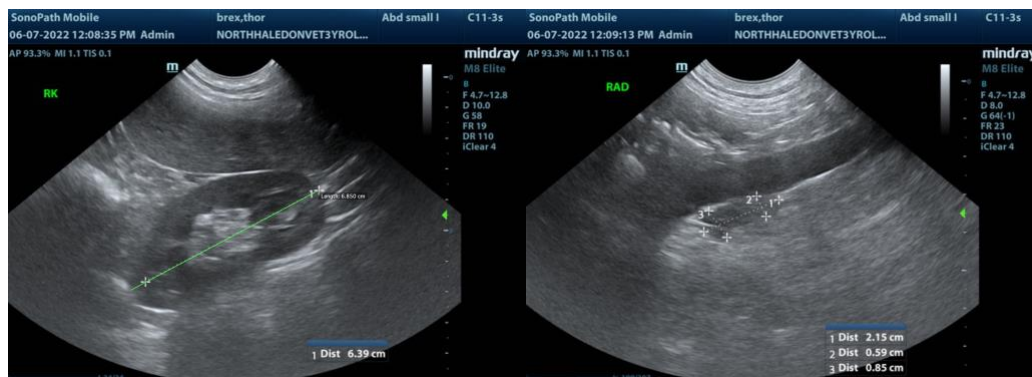
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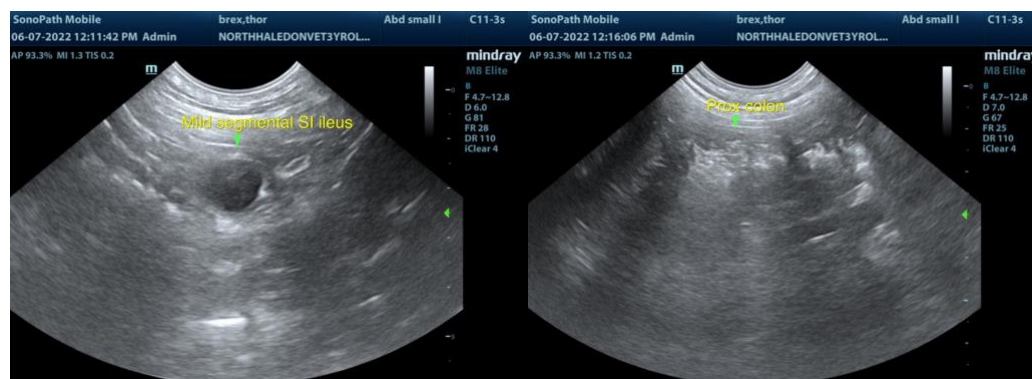
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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