



**PATIENT**

Penny Kirby

**PRESENTING CLINICAL SIGNS**

History: Intermittent vomiting, hematochezia.  
Abnormal PE/Chem/CBC/UA Results: WNL

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

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. Aortic trifurcation was normal.

**BREED**

Cocker Spaniel

**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 4.7 cm in length. The right kidney measured 4.4 cm in length.

**AGE**

1.5 Years

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.9 cm in length x 0.69 cm width at the caudal pole.

**WEIGHT**

28 Pounds

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.0 cm in length x 0.69 cm width at the caudal pole.

**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 intact wall layering with a normal wall layer ratio. The lumen of the stomach was primarily empty with mild luminal gas. No overt evidence of retained ingesta, fluid or foreign material.

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The small intestine presented intact wall layering and maintained 1:3 muscularis/mucosa ratio. The small intestine exhibited primarily empty lumen with segmental areas of subjective mildly prominent luminal gas pattern. No evidence of mechanical obstructive pattern, overt foreign material or intestinal corrugation/plication noted to the level of the colon.

**DATE**

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The colon was nondistended, containing areas of semi-formed to potential non-formed feces, consistent with diarrhea. Strongly shadowing gas artifact was noted with the descending colon to the level of the colorectum present. Potential for areas of shadowing fecal matter within the descending colon possible.

**SPECIES**

Canine

**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.

**BREED**

Cocker Spaniel

**Free Abdomen**

**SEX**

Spayed Female

Regional areas of reactive periintestinal to pericolic reactive mesentery were present. No evidence of overt or lymphadenopathy. No evidence of peritoneal free fluid noted.

**AGE**

1.5 Years

**ULTRASONOGRAPHIC FINDINGS**

- Gastroenterocolitis pattern, exhibiting segmental, mildly prominent small intestinal gas pattern
- Regional periintestinal to pericolic reactive mesentery

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

28 Pounds

No overt evidence of gastrointestinal obstructive pattern, foreign material or small intestinal corrugation/plication. The possibility of a past foreign body within the colon cannot be definitively excluded. However, given this presentation, no overt indication for immediate surgical intervention. The regional areas of reactive periintestinal to pericolic omentum are likely secondary to underlying Enterocolic inflammatory process.

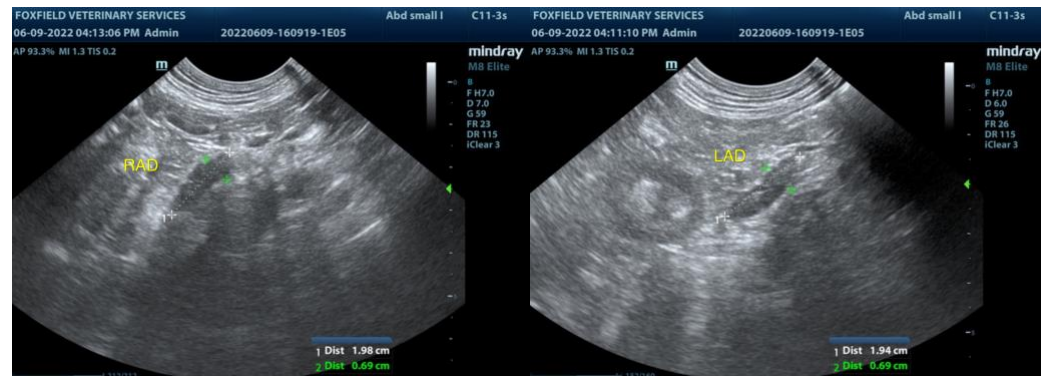
**INTERPRETED BY**

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

Medical therapy for acute hemorrhagic diarrhea syndrome with as needed gastrointestinal support, IV fluids with radiographic monitoring of the gastrointestinal tract is recommended. Monitoring of fecal output for evidence of foreign material suggested.

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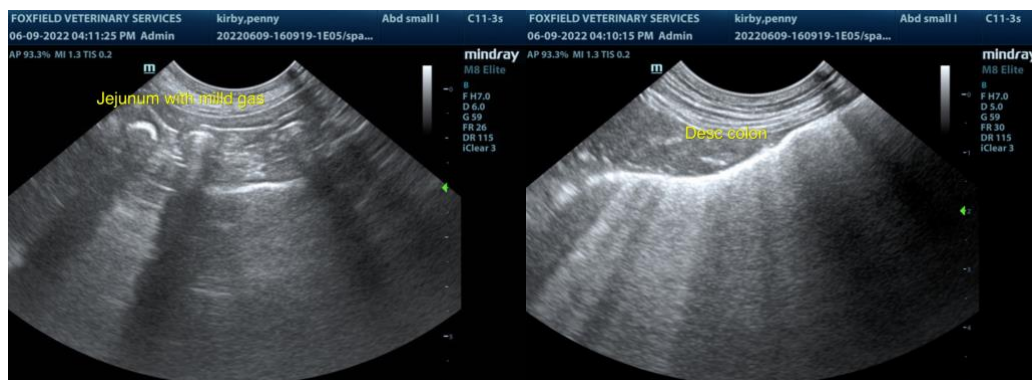
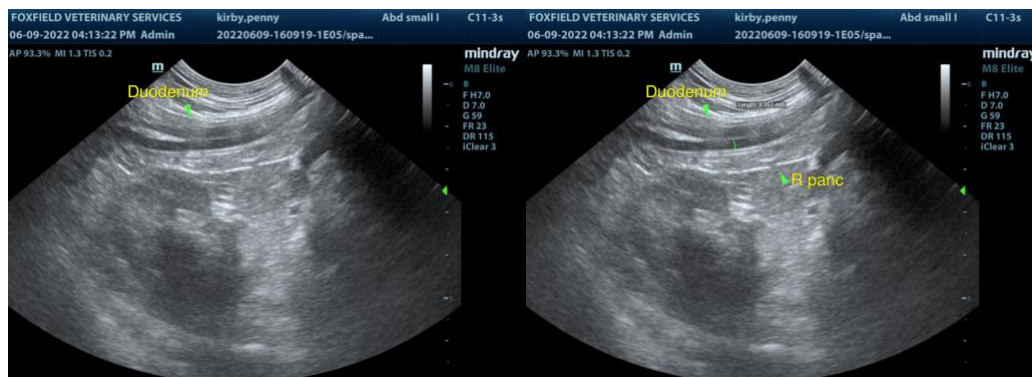
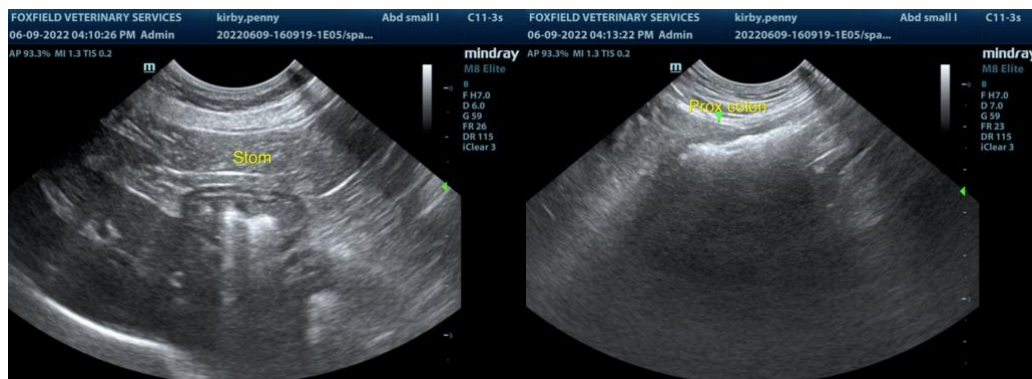
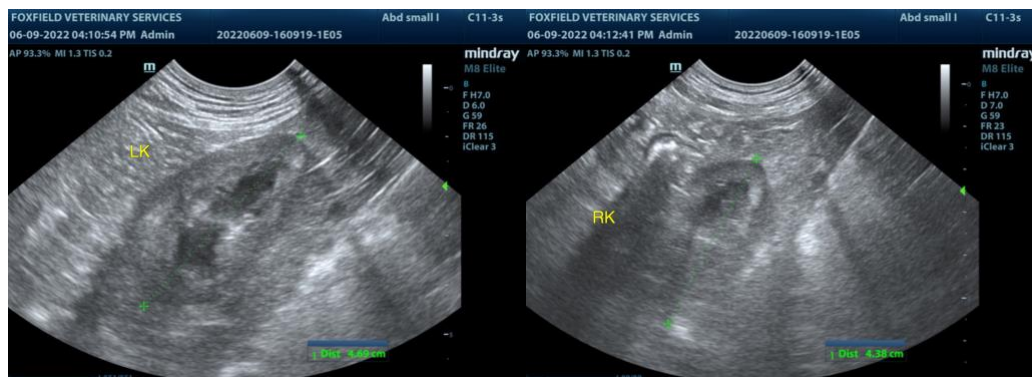
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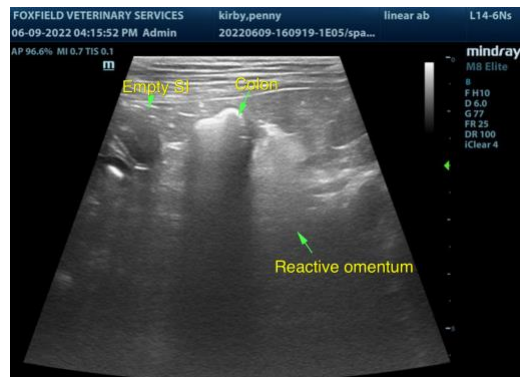
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

**R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)**  
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