



PATIENT	PRESENTING CLINICAL SIGNS
Benji Fitzpatrick	Acute V+; gastric FB on x-ray (cupcake wrapper) ~9-10 days ago. Current Meds: KBR, Pheno. Abnormal PE/Chem/CBC/UA Results: Pending
SPECIES	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Canine	Urinary System
BREED	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 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.
Shih Tzu	
SEX	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. Suspect discreet caudolateral right kidney cortical infarct was present. The left kidney measured 3.7 cm in length. The right kidney measured 3.7 cm in length.
MN	
AGE	The area of the aortic trifurcation was free of pathology.
5yr	The area of the residual prostate appeared normal and free of pathology measuring 0.63 cm in diameter.
WEIGHT	Adrenal Glands
15.2lb	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.42 cm width at the caudal pole and 1.2 cm length. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.42 cm width at the caudal pole and 1.2 cm length.
INTERPRETED BY	Spleen
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	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	Liver/Gallbladder
Shari Reffi CVT	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. Normal vascular volume. 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.
HOSPITAL NAME	Gastrointestinal
Newton Vet	The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild retained anechoic fluid extending to the pyloric outflow with no signs of ileus, obstruction or foreign material.
REFERRING VET	
Dr. Harris	
INVOICE	
14600ag	
DATE	
08/14/2023	



PATIENT

Benji Fitzpatrick The small intestine was normal to the level of the ileum and proximal colon.
Intact colon wall layering and mild proximal colon dilation with non-formed to shadowing feces was present. Formed fecal matter present in the descending colon.

SPECIES

Pancreas

Canine 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

Free Abdomen

Shih Tzu No omental masses, overt lymphadenopathy or peritoneal effusion was present.

SEX

ULTRASONOGRAPHIC FINDINGS

MN

- Mild hypomotile stomach, possible hypomotile gastritis.
- Sonographically unremarkable generalized empty small bowel.
- Subjective mild dilated proximal colon with non-formed to shadowing fecal matter, formed feces present in descending colon.

AGE

5yr

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

15.2lb

Overt evidence of GI obstructive pattern was not present. Given the history of dietary indiscretion this patient has potentially passed foreign body possibly within the proximal colon, although not definitive. Potential for emerging typhlitis could be possible.

INTERPRETED BY

No overt indication for immediate surgical intervention. Monitoring of fecal output is advised.

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

Hospitalization with 48-72 hour IVF protocol and as needed GI support with assessment of clinical response would be reasonable. Recheck sonogram is recommended if persistent/progressive GI signs despite supportive care.

IMAGING PERFORMED BY

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PATIENT

Benji Fitzpatrick

SPECIES

Canine

BREED

Shih Tzu

SEX

MN

AGE

5yr

WEIGHT

15.2lb

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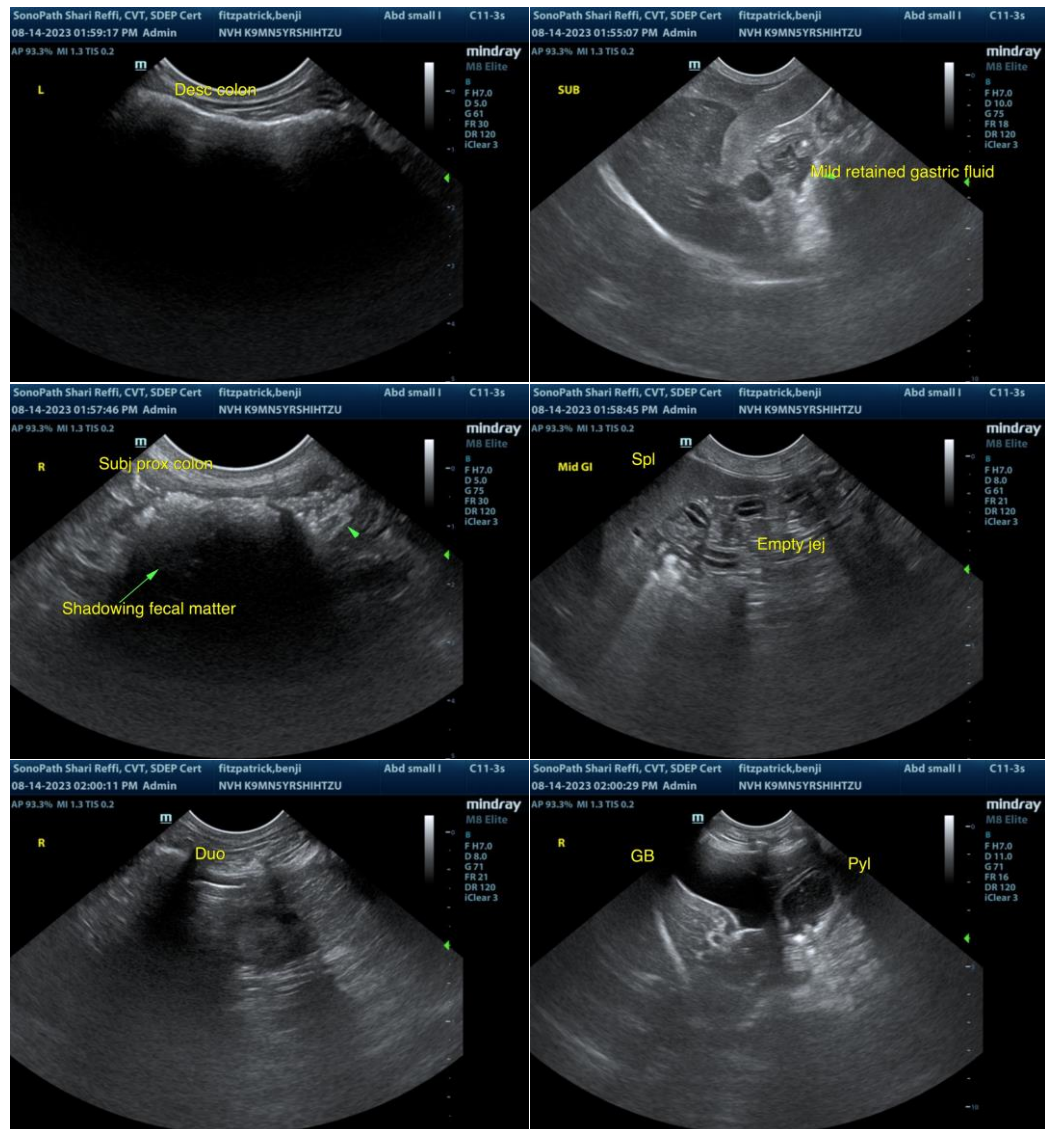
Dr. Harris

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PATIENT

Benji Fitzpatrick

SPECIES

Canine

BREED

Shih Tzu

SEX

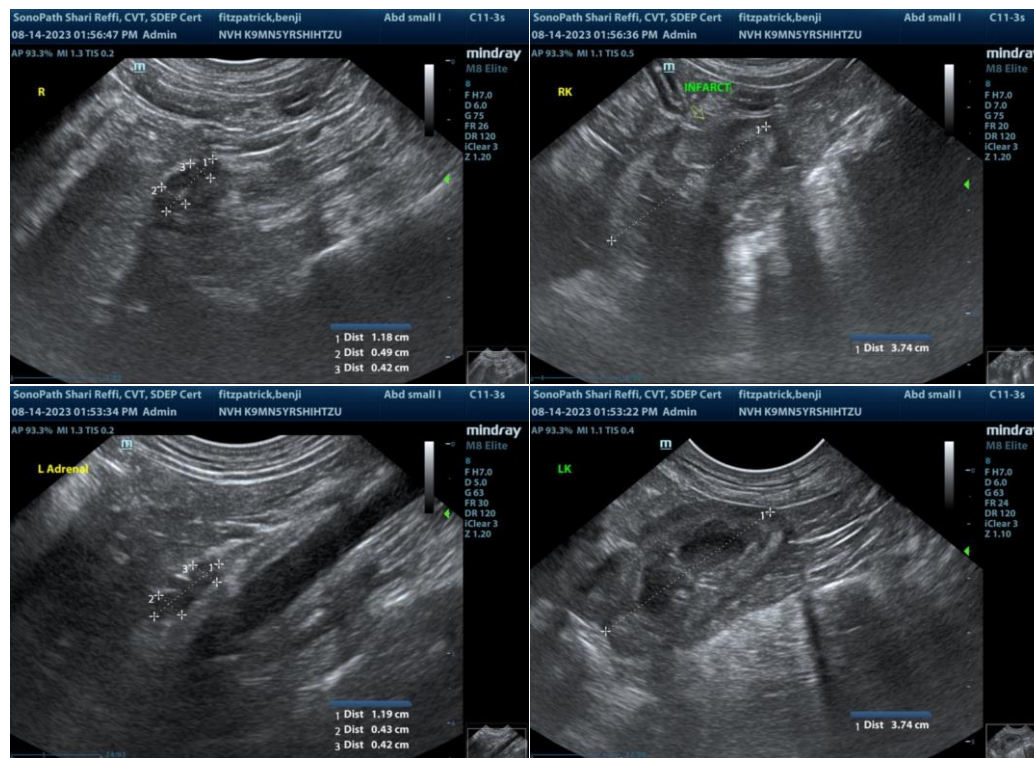
MN

AGE

5yr

WEIGHT

15.2lb



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.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Shari Reffi CVT

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

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