



PATIENT

Piper Greenberg

PRESENTING CLINICAL SIGNS

Vomiting, anorexia, and lethargy.
Abnormal PE/Chem/CBC/UA Results: Low K+ and Cl, HCT 57%.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 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.

BREED

French Bulldog

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 3.8 cm. The right kidney measured 4.0 cm.

AGE

2 Years

Adrenal Glands

The adrenal glands were uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 2.0 cm length x 0.48 cm at the caudal pole. The right adrenal gland measured 1.7 cm length x 0.52 cm at the caudal pole.

WEIGHT

14.6 Pounds

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.

INTERPRETED BY

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

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.

IMAGING PERFORMED BY

Kelly Vazquez

Gastrointestinal

HOSPITAL NAME

Bergen County VC

The stomach presented intact yet prominent wall layering with a normal wall layer ratio. The lumen of the stomach was primarily empty with mild retained anechoic fluid and luminal gas. No overt evidence of gastric foreign material. Gastric body wall measured 0.53 cm.

REFERRING VET

Dr. Jill Shiffman

The intestinal walls demonstrated intact wall layering and maintained 1:3 muscularis / mucosa ratio. The mucosa exhibited mild decreased echogenicity with occasional mucosal speckling. A segmental to diffuse ileus pattern consisting of mild fluid accumulation in the intestinal lumen was present without overt evidence of mechanical small intestinal obstruction or overt small intestinal foreign material.

INVOICE

25073

The visualized colon walls were sonographically unremarkable with intact wall layering and without evidence of mural hypertrophy. Generalized colonic distention noted with non-formed to liquid feces extending from the area of the ileocolic junction and cecum into the distal colon and colorectum. A focal non-specific, non-shadowing potential echo was noted within the possible proximal colon, measuring 1.3 cm in diameter. Subtle reactive peri intestinal omental reactivity noted.

DATE

8/31/21



PATIENT

Pancreas

Piper Greenberg

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.

SPECIES

Canine

Free Abdomen

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

BREED

French Bulldog

ULTRASONOGRAPHIC FINDINGS

SEX

Spayed Female

- Gastroenteritis pattern – subjectively acute, no overt small intestinal mechanical obstruction or foreign body.
- Colitis/typhlitis with generalized colonic distention containing non-formed to liquid feces
- Possible yet non-specific non-shadowing echo in potential proximal colon lumen

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

2 Years

No overt evidence of gastric or gastrointestinal obstruction or overt foreign material. The overall presentation of the stomach and small intestine is suggestive of suspected acute inflammation or insult. The potential of a passed foreign body into the colon cannot be definitively excluded, yet given the lack of gastric or intestinal mechanical obstruction, no overt indication for immediate surgical intervention. Hospitalization with IV fluid and gastrointestinal support to correct potential dehydration and electrolyte abnormalities is suggested with continued monitoring. Recheck sonogram may be considered if persistent gastrointestinal signs are noted.

WEIGHT

14.6 Pounds

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(Canine and Feline)

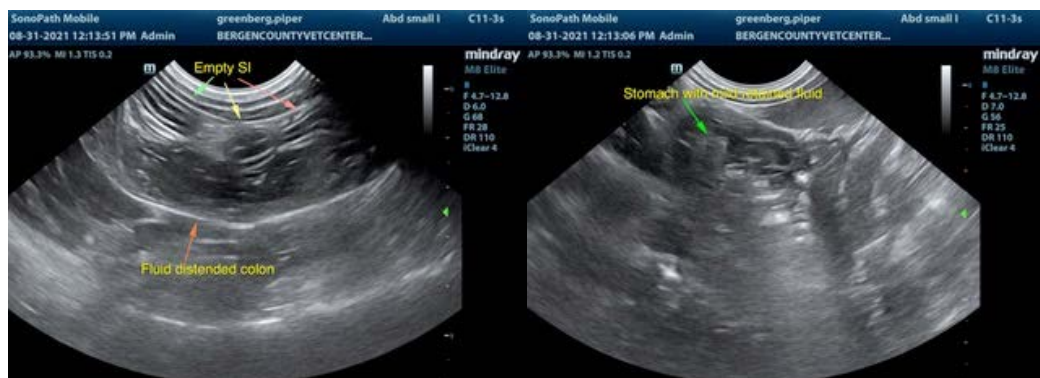


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Kelly Vazquez

HOSPITAL NAME

Bergen County VC



REFERRING VET

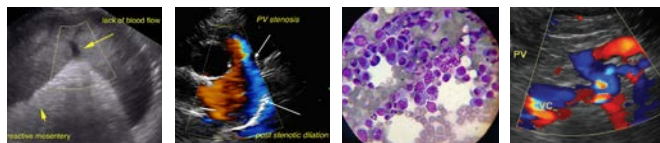
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SPECIES

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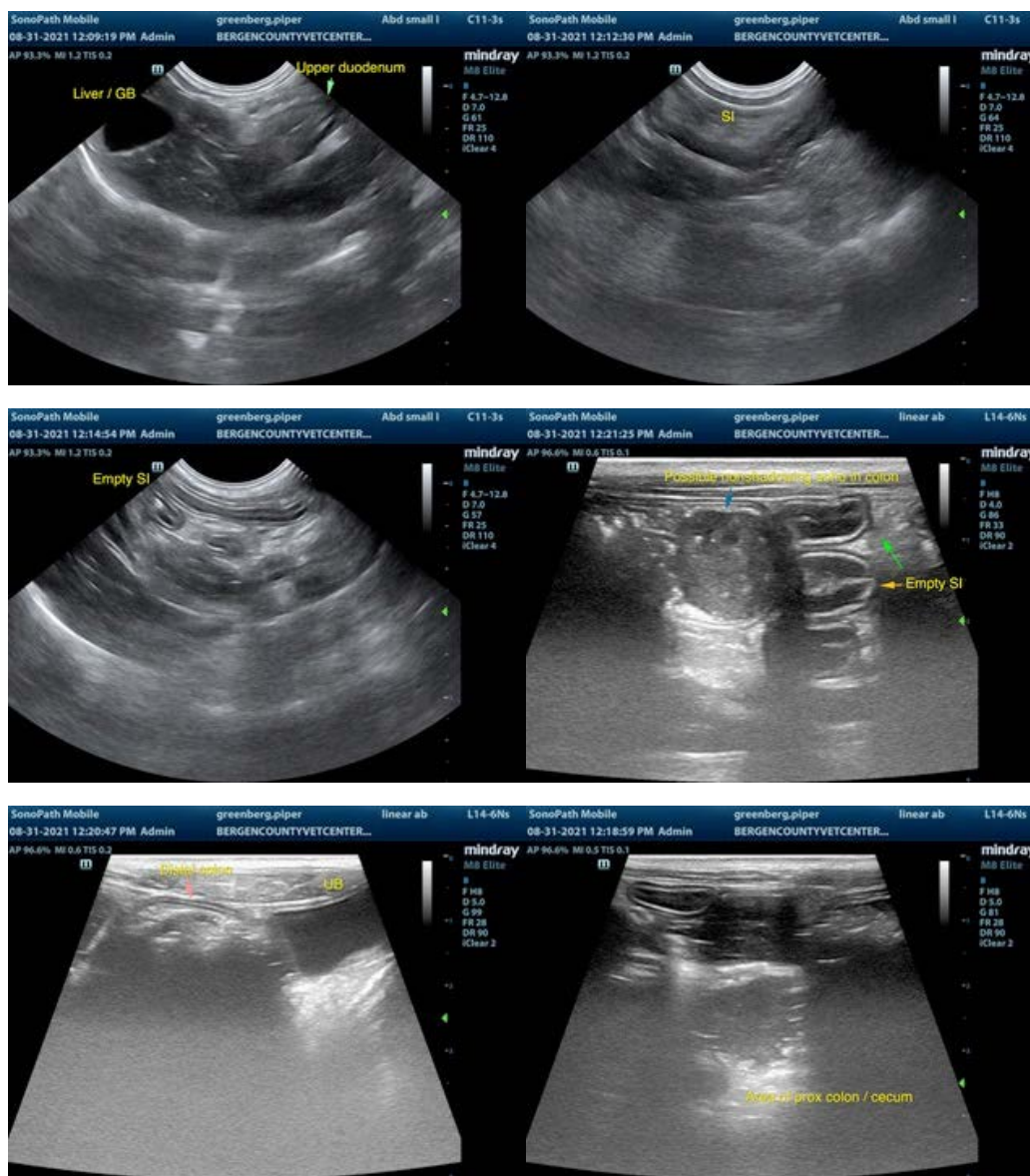
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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