



PATIENT PRESENTING CLINICAL SIGNS

Nova Lillis
History: vomiting
Abnormal PE/Chem/CBC/UA Results: suspicious gas distension on rads

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine
Urinary System

BREED
Great Dane
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
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 7.0 cm in length. The right kidney measured 8.0 cm in length.

AGE
7 Months
Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.60 cm width at the caudal pole and 0.46 cm width at the cranial pole.

WEIGHT
50 Pounds
The right adrenal gland was not definitively visualized.

Spleen

INTERPRETED BY
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

Linda Grau
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.

HOSPITAL NAME
Fredon AH

Gastrointestinal

REFERRING VET
The stomach revealed moderate distention with retained primarily anechoic fluid. Strongly shadowing pyloric echo was noted, measuring approximately 3.0 cm in diameter.

Dr. Linda Grau
The small intestine presented intact wall layering with subjective maintained 1:3 muscularis/mucosa ratio. Segmental moderate intestinal fluid dilation was noted with strongly shadowing segmental intestinal echo. Concurrent segments of empty small intestinal were also present without evidence of mechanical/metabolic ileus.

INVOICE
17122
Normal visible colon wall layers were present with apparent formed feces in lumen.

DATE
Pancreas

9/1/22



PATIENT

Nova Lillis

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

Intermittent, mildly prominent to enlarged mesenteric lymph nodes was present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). Potential for very scant periintestinal free fluid is possible, although not definitive. Mild periintestinal reactive mesentery was noted.

BREED

Great Dane

ULTRASONOGRAPHIC FINDINGS

SEX

Female

- Moderate gastric distention with retained fluid, strongly shadowing pyloric echo
- Segmental moderate small intestinal obstructive pattern with segmental strongly shadowing intestinal luminal echo, concurrent segments of empty normal appearing small intestine
- Associated benign/reactive mesenteric lymph nodes

AGE

7 Months

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The study is consistent with pyloric foreign body, which may potentially be anchored, along with concurrent partially to full obstructive intestinal foreign body with secondary segmental small intestinal obstructive pattern. Exploratory laparotomy with expectation toward gastrotomy, as well as enterotomy to potential enterotomies is recommended. Suspect cloth fabric stuffing or similar. Minor potential for emerging peritonitis is considered unlikely yet cannot be definitively excluded. Sonographically, the gastrointestinal tract exhibited overtly unremarkable and intact wall layering, however, gross inspection of the gastrointestinal tract at the time of surgery is recommended.

WEIGHT

50 Pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Linda Grau

HOSPITAL NAME

Fredon AH

REFERRING VET

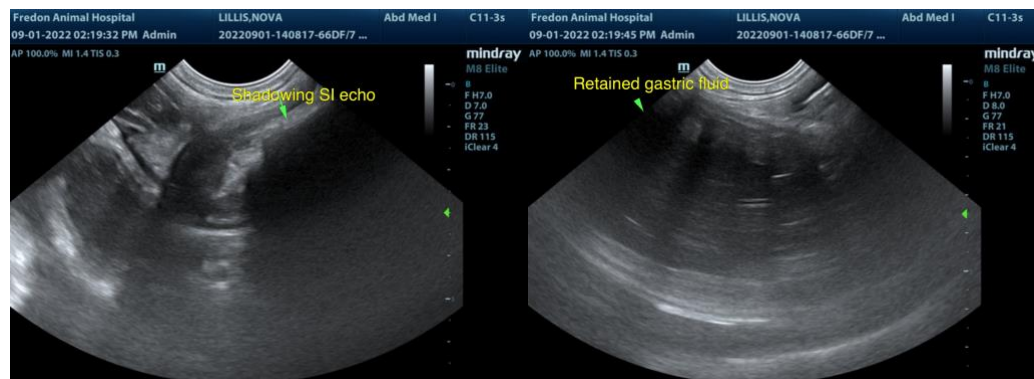
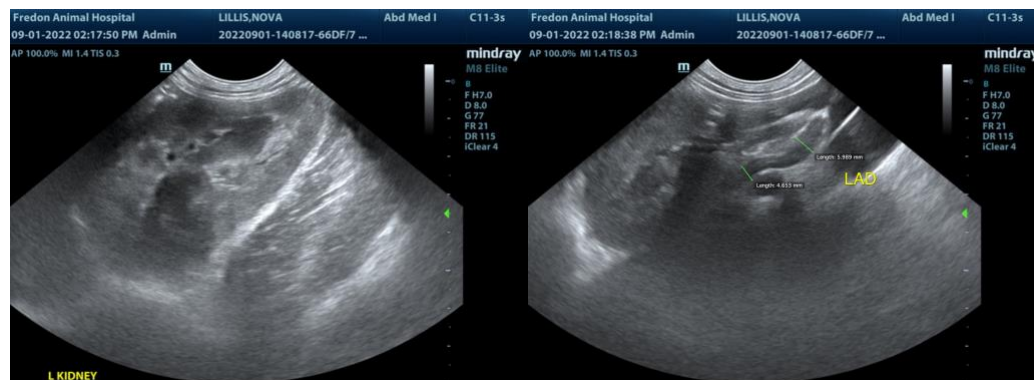
Dr. Linda Grau

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PATIENT

Nova Lillis

SPECIES

Canine

BREED

Great Dane

SEX

Female

AGE

7 Months

WEIGHT

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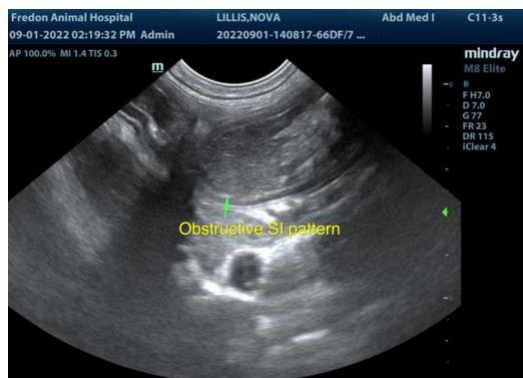
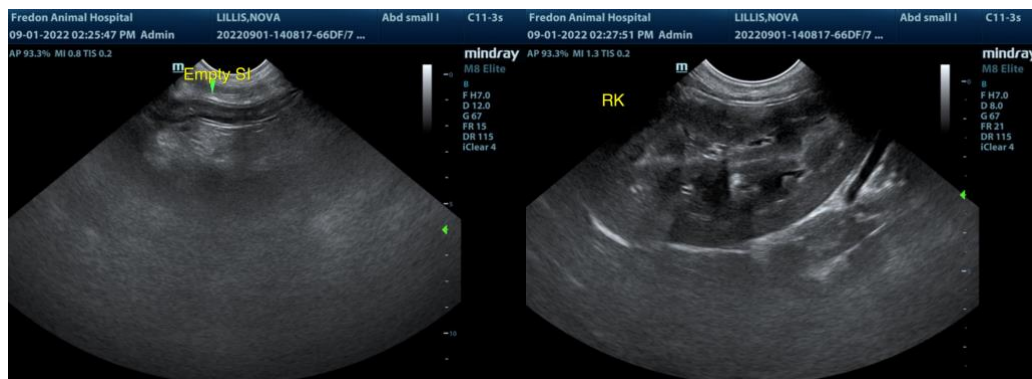
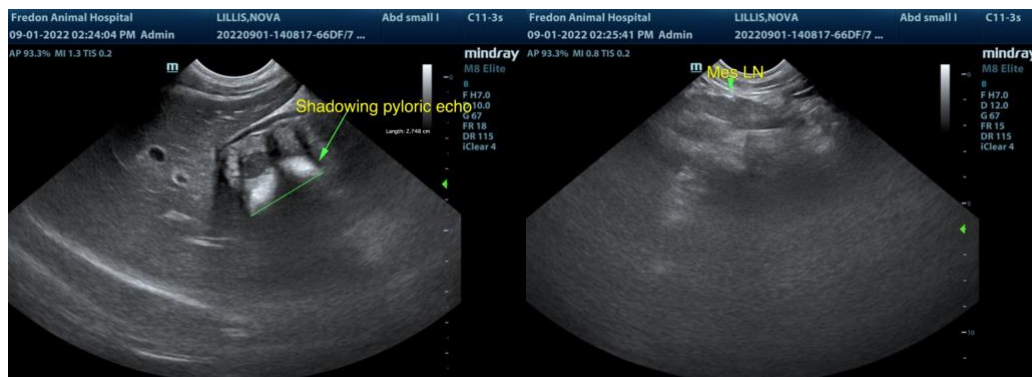
Dr. Linda Grau

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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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