



PATIENT

Turbo Kaffar

SPECIES

Canine

BREED

Labrador Retriever

PRESENTING CLINICAL SIGNS

Referred from Knife River Vet- Bld work 5 days ago wnl except elevated cPLI (529), iv fluids, cerenia given About 1 week ago P has gone downhill Refusing to eat, hasn't had more than a bite or two of food in 9 days Has had a few episodes of V+ here and there, 2x last night and 1x today Has been on cerenia, last dose was last night at 8pm Meds- carprofen PRN No meds today Very lethargic "short labored breaths" O thinks P looks more "barrel chested" than usual Seems very weak when walking BCS 4/9 H/L/EET/LN wnl Palption of abdomen-nsf, no overt pain. US of abdomen--painful at SDEP 11. Difficulty finding normal spleen. Mottle spleen, stomach? CBC- nsf Chem-NSF

Abnormal PE/Chem/CBC/UA Results: BW WNL

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Urinary System

MN

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.

AGE

12yr

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Pinpoint to focal areas of medullary mineral were present. The left kidney measured 8.1 cm in length. The right kidney measured 7.9 cm in length.

WEIGHT

74lb

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

No overt pathology associated with the residual prostate.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.61 cm width at the caudal pole and 0.62 cm width at the cranial pole. The right adrenal gland was indistinctly visualized without overt pathology. The right adrenal gland measured 0.84 cm width at the caudal pole.

IMAGING PERFORMED BY

Dr. Shelley Lenz

Spleen

HOSPITAL NAME

State Avenue
Veterinary Clinic

The spleen was not definitively visualized potentially owing to displacement secondary to gastric distention or possible volume contraction.

Liver

REFERRING VET

Dr. Shelley Lenz

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. 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.

INVOICE

11662ag

Gastrointestinal

The stomach exhibited moderate distention containing variably echogenic non-shadowing to focally shadowing ingesta including subjective intermittent linear hyperechoic echoes. No obvious evidence of pyloric outflow obstruction or obstructive mural pathology was present.

DATE

09/19/2022



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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 obstruction or foreign material.

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

Pancreas

BREED

Labrador Retriever

The pancreas was normal in size and contour with isoechoic to heterogeneous parenchyma compared to adjacent omentum. No signs of active inflammation or neoplasia.

Free Abdomen

SEX

No omental masses or significant lymphadenopathy. Intermittent small pocket of scant to minor peritoneal free fluid was present.

MN

ULTRASONOGRAPHIC FINDINGS

AGE

12yr

Primary

- Moderately distended stomach containing variably echogenic to focally shadowing ingesta with non-specific linear hyperechoic echoes
- Mild enterocolitis pattern-no overt small bowel mechanical obstructive pattern
- Heterogeneous pancreas
- Intermittent small pocket of peritoneal free fluid

WEIGHT

74lb

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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DVM, DABVP
(Canine and Feline)

The distended stomach containing variably echogenic to shadowing ingesta may suggested metabolic vs mechanical ileus although an obvious pyloric outflow obstruction was not visualized. Some concern for potential gastric foreign material given the linear echoes although not definitive. Sonographically the appearance of the pancreas was not obviously consistent with significant pancreatitis although primary or concurrent low grade or potential chronic pancreatitis could be present yet appear sonographically normal.

IMAGING PERFORMED BY

Dr. Shelley Lenz

Assuming normal cardiopulmonary status, hospitalization with 24 hour IVF and GI support with either sonographic or radiographic monitoring of the stomach for evidence of gastric emptying would be reasonable. If continued evidence of gastric distention with retained ingesta, exploratory laparotomy for gross inspection of the GI tract, pancreas and GI biopsies considered essential despite exploratory findings may be indicated.

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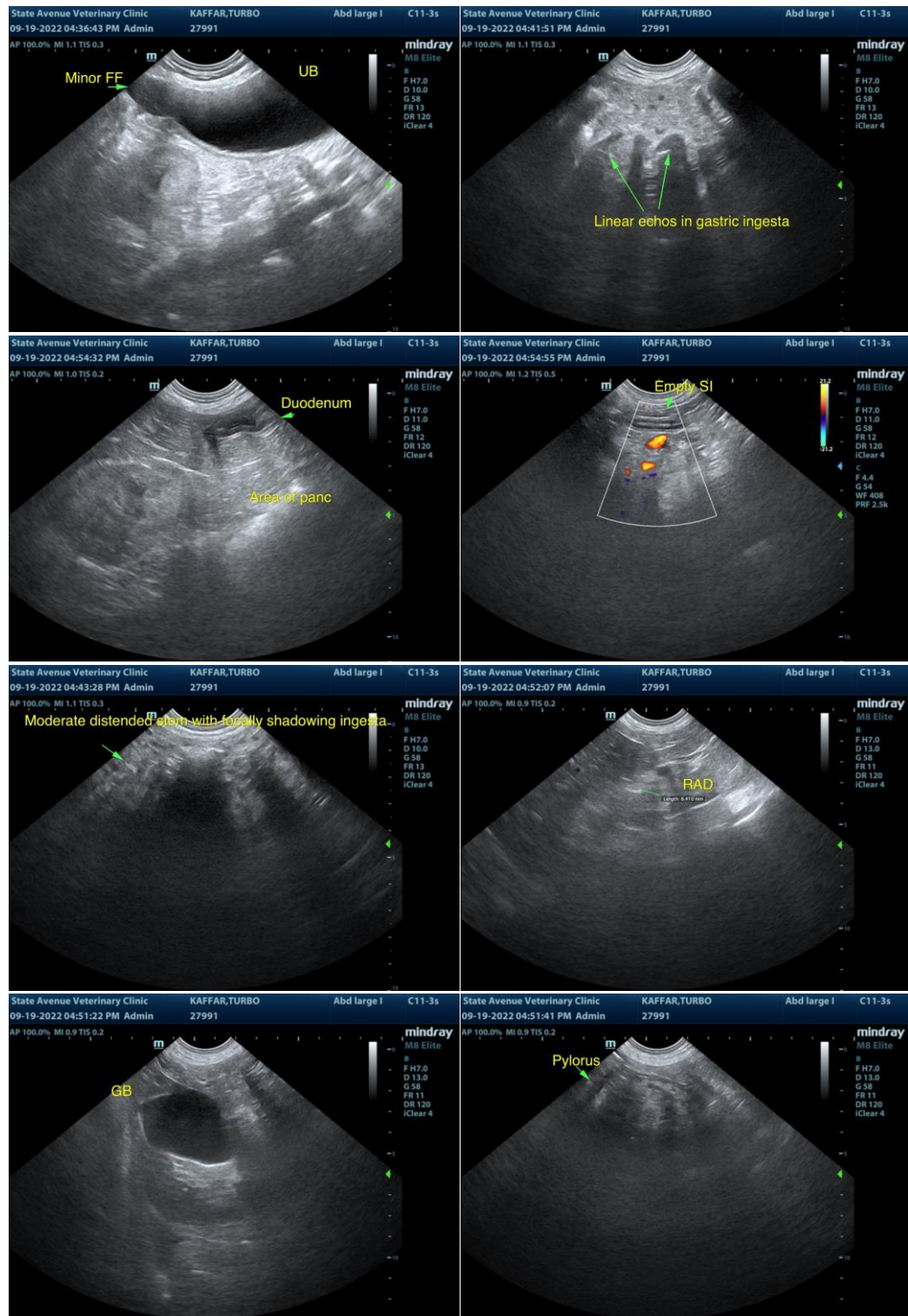
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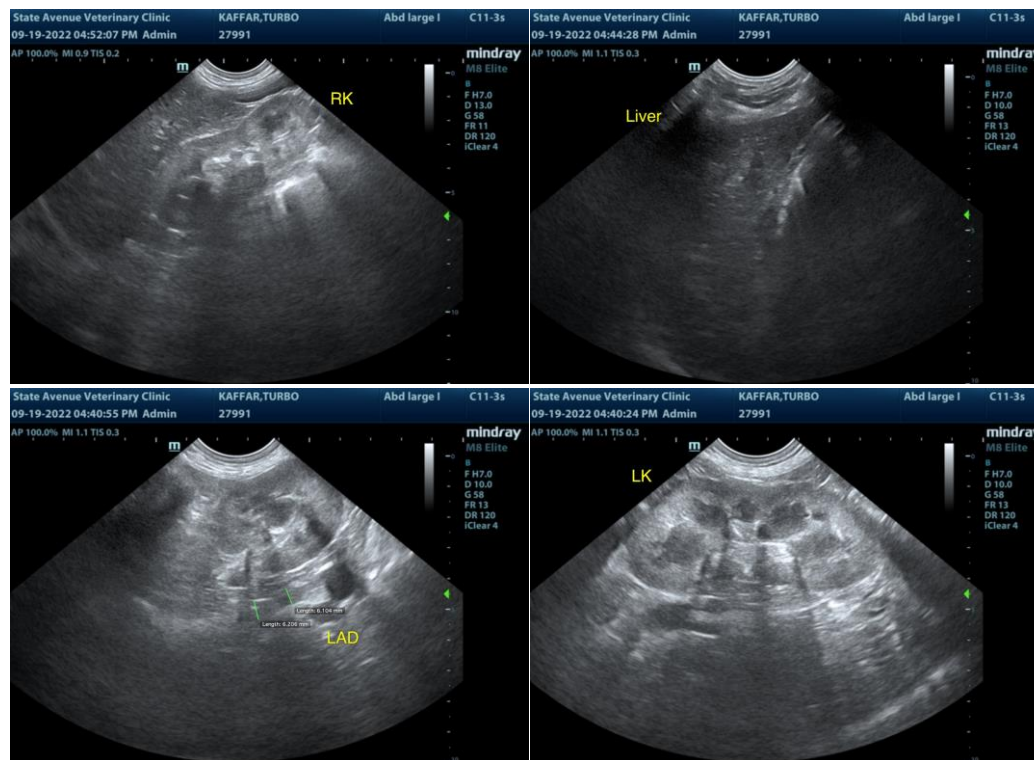
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)

info@SonoPath.com