



PATIENT	PRESENTING CLINICAL SIGNS
Hero Calles	Vomited multiple times today and not eating . Energy level normal. History of indiscriminate eating of objects. Attending concerned about linear foreign body
SPECIES	Abnormal PE/Chem/CBC/UA Results: Pending
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
Shih Tzu	Urinary System
SEX	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 2.0 cm exhibited normal thickness and tone. Focal areas of mild dependent luminal mineral were present. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted. Concurrent focal nonobstructive mineral noted within the residual prostate urethral lumen, measuring 0.16 cm in diameter. The residual prostate was normal in size and appearance, measuring 0.57 cm.
M/N	
AGE	The area of the aortic trifurcation was free of pathology.
2	
WEIGHT	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 3.9 cm in length. The right kidney measured 3.5 cm in length.
7 kg	
INTERPRETED BY	Adrenal Glands
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.32 cm width at the caudal pole and 0.3 cm width at the cranial pole.
IMAGING PERFORMED BY	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.
Dr. Belan	
HOSPITAL NAME	Spleen
Resolution Vet Ultrasound LTD	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.
REFERRING VET	Liver/ Gallbladder
Dr. Satnam	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.
INVOICE	Gastrointestinal
17402	The stomach presented mild wall thickening secondary to echogenic mucosa hypertrophy. Intact wall layering was maintained and distinct. The gastric body wall measured 0.30 cm width. Mild gastric
DATE	
9/21/22	



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Hero Calles

SPECIES

Canine

BREED

Shih Tzu

SEX

M/N

AGE

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WEIGHT

7 kg

distension with mild retained gastric fluid was present. No overt evidence of mechanical pyloric outflow obstruction or gastric foreign material was noted.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs mechanical/metabolic intestinal ileus or foreign material. The duodenum wall measured 0.52 cm. The jejunum wall measured 0.33 cm.

Normal visible colon wall layers were present with apparent formed feces in lumen. Possible focal small shadowing echo was noted within the descending colon lumen, although not definitive. No evidence of pathology at the level of the ileocolic junction.

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 were evident.

Free Abdomen

Intermittent, mildly prominent mesenteric lymph nodes were present. The lymph nodes were essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5).

INTERPRETED BY

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

IMAGING PERFORMED BY

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ULTRASONOGRAPHIC FINDINGS

- Mild focal dependent urinary bladder and focal nonobstructive residual prostatic urethral mineral
- Gastritis pattern with mild gastric hypomotility
- Sonographically unremarkable small bowel

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No evidence of obstructive gastrointestinal foreign material. Potential for past foreign material currently in the descending colon may. Be possible, although not definitive. Given the lack of obstructive gastrointestinal criteria, no indication for immediate surgical intervention. Medical therapy for gastritis/gastroenteritis should prove beneficial. If recurrent gastrointestinal signs are present, a GI panel to include PLI/TLI/Cobalamin/Folate to assess for occult or nonstructural intestinal or pancreatic inflammation +/- resting cortisol level to rule out occult Addisons disease may be considered.



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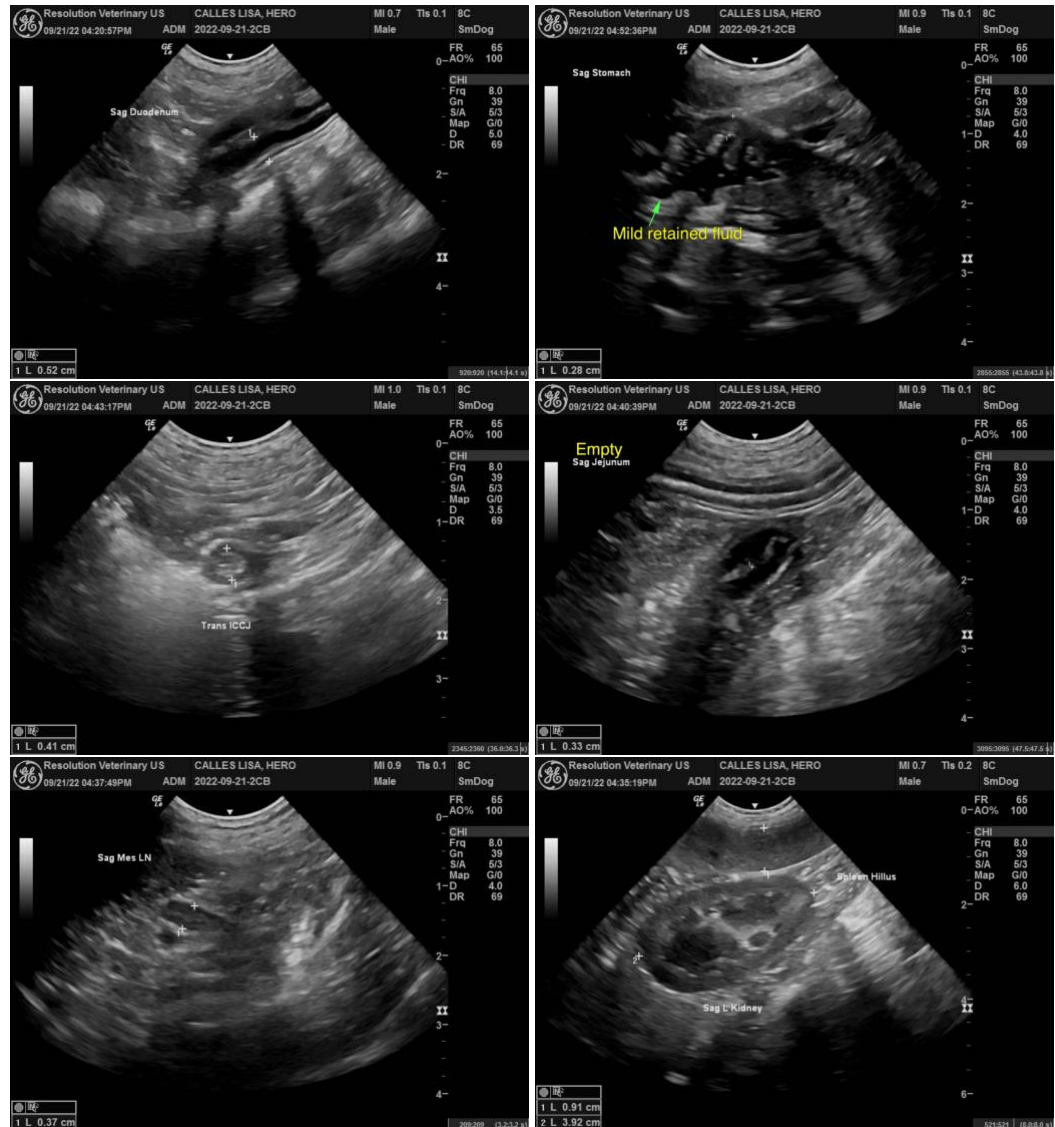
Dr. Satnam

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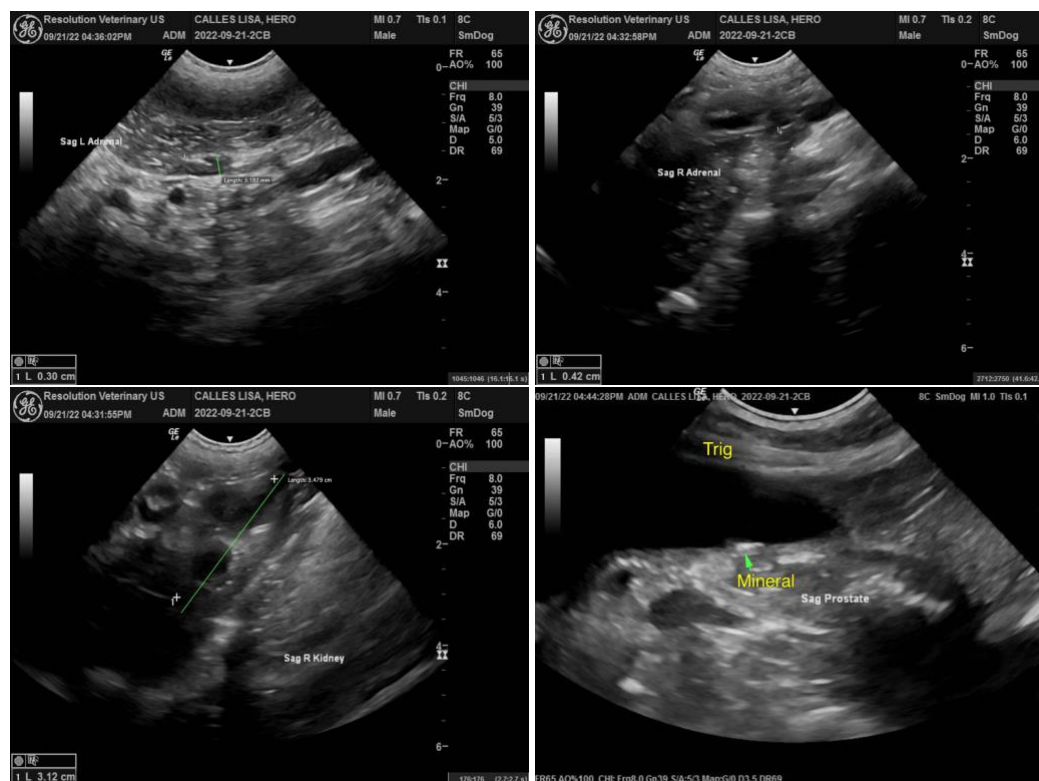
Dr. Satnam

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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)
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