



PATIENT	PRESENTING CLINICAL SIGNS
Beau Desmond	Vomiting since late last week. US done at E Clinic showed a non-obstructive pattern. Dog has not improved at all over the weekend. Vomiting, nauseous, lethargic.
SPECIES	Abnormal PE/Chem/CBC/UA Results: PE: nauseous, drooling. BCS 3-4/9 RADS: Stomach looks full, was empty on Friday's Rads. BW: low Ca, normal Alb.
Canine	
BREED	
Great Dane Mix	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
SEX	Urinary System
Neutered Male	The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4.0 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 was noted.
AGE	No overt pathology was noted in the area of the residual prostate.
4 years	The area of the aortic trifurcation was free of pathology.
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 7.0 cm in length. The right kidney measured 6.0 cm in length.
70 lbs.	Adrenal Glands
INTERPRETED BY	The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.68 cm width at the caudal pole and 0.72 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.57 cm width at the caudal pole and 0.96 cm width at the cranial pole.
R. McKenzie Daniel, DVM, DABVP (Canine and Feline)	Spleen
IMAGING PERFORMED BY	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.
Dr. Ebersole	Liver/ Gallbladder
HOSPITAL NAME	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 minor, echogenic, nonmineralized biliary sludge, likely owing to fasting. The cystic duct and common bile ducts were normal without evidence of dilation.
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Dr. Kaltsas	
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12178	
DATE	
9/7/21	



PATIENT

Gastrointestinal

Beau Desmond

The stomach exhibited moderate to marked distention containing retained anechoic fluid, probable chyme, and generalized nonspecific linear, hyperechoic ingesta / echoes. The area of the pylorus and antrum appeared to be mildly thickened yet with subjective intact wall layering. The pylorus wall measured 0.75 cm up to 1.0 cm wall width. The degree of pyloric thickening was not overtly obstructive.

SPECIES

Canine

BREED

Great Dane Mix

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. Minor segmental jejunal ileus was present. No evidence of small intestinal mechanical obstruction or foreign material was noted. The jejunum wall width measured 0.33 cm. The duodenum wall width measured 0.40 cm.

SEX

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

Neutered Male

Pancreas

AGE

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

4 years

Free Abdomen

WEIGHT

70 lbs.

Intermittent, mesenteric to peri intestinal 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). An example of the lymph nodes measured 2.8 x 1.1 cm. No effusion was noted.

INTERPRETED BY

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

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Moderate to marked gastric distention containing retained anechoic fluid, chyme, and hyperechoic, linear, nonspecific ingesta / echoes
- Mildly thickened pylorus with intact wall layering - suspect pyloric gastritis
- Sonographically unremarkable small bowel with minor, segmental, nonobstructive jejunal ileus
- Intermittent mild mesenteric lymphadenopathy - subjectively benign, lymphoid hyperplasia or minor reactive lymphadenitis likely
- Mildly heterogeneous pancreas - nonspecific, patient variant with potential for low-grade

IMAGING PERFORMED BY

Dr. Ebersole

HOSPITAL NAME

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the degree of gastric distention and presence of nonspecific linear ingesta / echoes, which may indicate grass or similar appearing foreign material, exploratory laparotomy with expectation toward gastrotomy and gross inspection of the area of the pylorus is recommended. Gastrointestinal biopsies are considered essential in this case despite exploratory findings to assess for underlying gastric or gastrointestinal disease. No overt evidence of gastrointestinal neoplasia, which is considered an unlikely differential diagnosis

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Beau Desmond

SPECIES

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Great Dane Mix

SEX

Neutered Male

AGE

4 years

WEIGHT

70 lbs.

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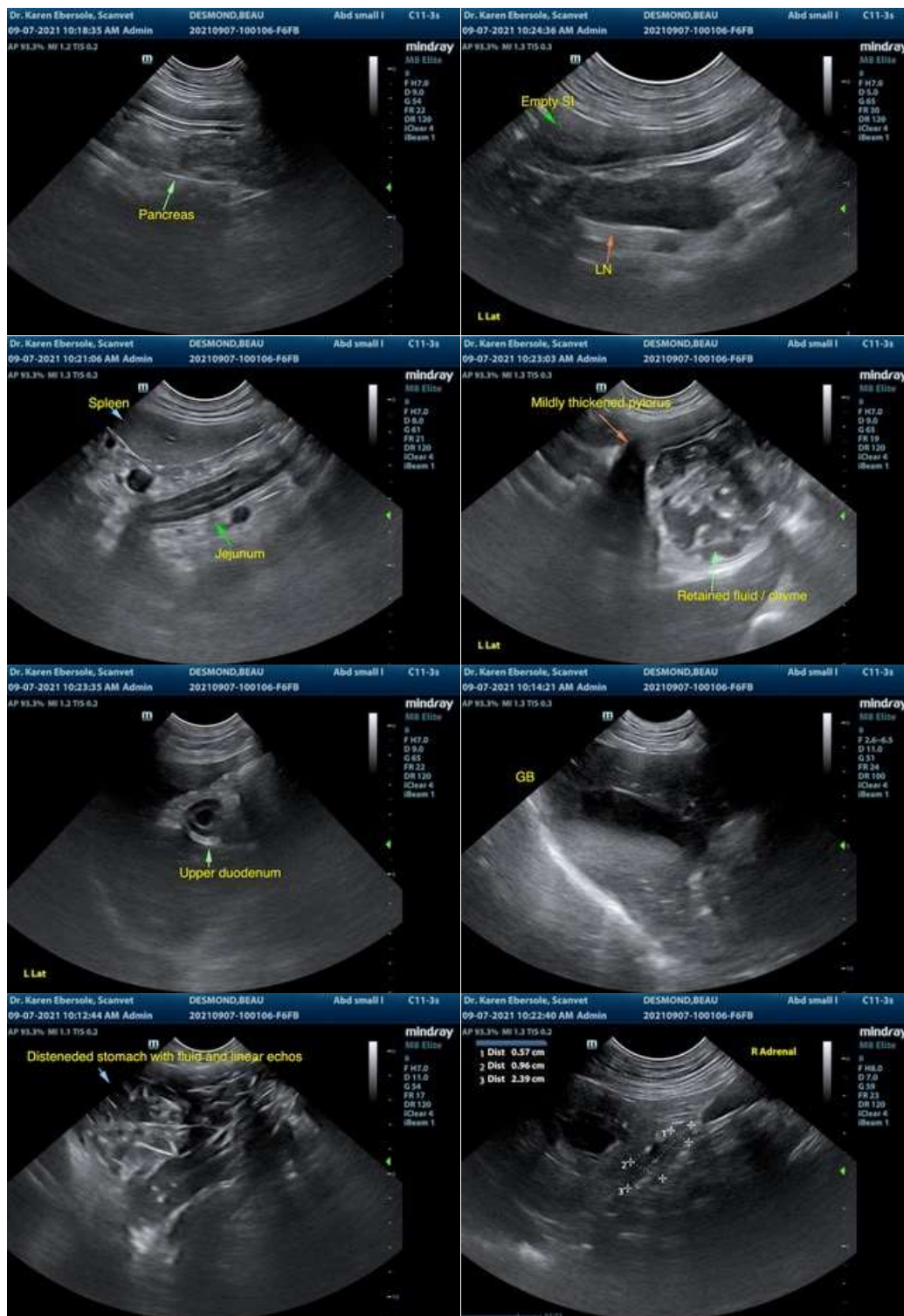
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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