

PATIENT

Quigley Dawkins
48133A

SPECIES

Canine

BREED

Labradoodle

SEX

Female Spayed

AGE

3 Years, 8 Months

WEIGHT

21.5 kg

INTERPRETED BY

Sebastian Jawinski,
German Board Certified
Vet Specialist in
Diagnostic Imaging

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

Madison Veterinary
Specialists

INVOICE

49676

DATE

1-19-22

PRESENTING CLINICAL SIGNS

Chronic intermittent vomiting for the past 6 months. Initial episode responded to antiemetics. Last vomited on Sunday. Upper GI series performed yesterday. Significant amount of barium noted on radiographs. Last meal was at 9pm last night. Stools have been normal.

Abnormal PE/Chem/CBC/UA Results: All prior bloodwork was WNL. Last performed yesterday.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary system

The urinary bladder, trigone and pelvic urethra present normal findings without evidence of uroliths or sediment. Wall layering is intact on all views without focal or diffuse thickening. Ureters are not visualized and considered to be normal. No evidence of an inflammatory or neoplastic process is noted.

Both kidneys are inconspicuous. Left kidney measures 5.89 cm length, right kidney 5.79 cm. Renal pelvises and exits to the ureters are unremarkable.

Adrenal glands

The left adrenal gland measures 2.28 x 0.48 x 0.58 cm, the right adrenal gland 2.51 x 0.45 x 0.65 cm. Both present normal size, shape and echogenic texture.

Spleen

The spleen is inconspicuous in terms of size, surface and echotexture and shows diameters of 1.92 cm. Splenic vasculature presents normal course of vessels and unremarkable perfusion of the splenic veins.

There are no signs of nodular/focal changes noted.

Liver/Gallbladder

Liver images are inconspicuous. Echotexture, size and vasculature appear regular. Evidence of nodular or focal changes is not visible. The gallbladder is mildly filled without signs of relevant sludge, a florid process or cholestasis.

Gastrointestinal

The stomach, the small intestine and colon present -as far as can be assessed- intact wall layers being normal in width and echogenicity. Adjacent mesentery and fat tissue are of normal appearance. There is no overt evidence of an ileus, a florid-inflammatory or even neoplastic process. The mesenteric, epigastric and portal lymph nodes are considered to be normal.

Pancreas

All pancreatic parts displayed show isoechoic echogenicity to the surrounding omental fat. Signs of inflammatory changes or focal lesions are missing.

Free Abdomen

There is no evidence of peritoneal or retroperitoneal effusion noted. The para-aortal and medial iliac lymph nodes are normal. The abdominal fat and great vessels show no pathological findings.

ULTRASONOGRAPHIC FINDINGS

- Normal sonographic findings of the abdomen



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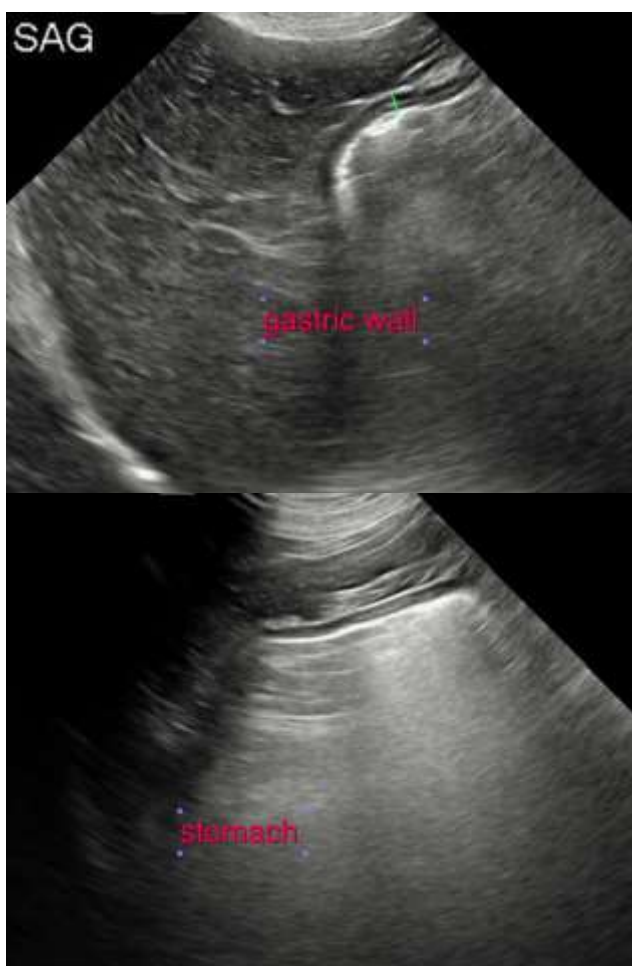
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Especially the stomach and small intestine including pancreas and gallbladder represent normal findings. Normal sonographic appearance does not exclude mild active or chronic inflammation as seen with IBD (eosinophilic/lympho-plasmocytic gastritis) and functional problems such as indigestibility going along with IBD. Obstructive ileus and foreign material are not detected. Relevant inflammation (for example pancreatitis/peritonitis) is not recognized.



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.

Sebastian Jawinski, German Board Certified Vet Specialist in Diagnostic Imaging
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