



**PATIENT**

Purple Girl Anglin

**SPECIES**

Canine

**BREED**

Australian Labradoodle

**SEX**

Female

**AGE**

7 Weeks

**WEIGHT**

1.2 kg

**INTERPRETED BY**

Aubrey Hirsch, DVM,  
Practice Limited to  
Internal Medicine

**IMAGING PERFORMED BY**

Dr. Evan Bell

**HOSPITAL NAME**

Cedarview AH

**REFERRING VET**

Dr. Evan Bell

**INVOICE**

24744

**DATE**

8/16/21

**PRESENTING CLINICAL SIGNS**

One of the surviving puppies in a litter with e.coli septicemia (was affected and nearly PTS). Appears to be developmentally delayed compared to healthy pups in litter but is consistently gaining weight and otherwise healthy. No concerns. Owner is looking for confirmation of no chronic issues prior to selling puppy.

Abnormal PE/Chem/CBC/UA Results: TP low - 45 (48-72) Glob low - 20 (23 - 38) HCT low 32 (27-62) but with reticulocytosis (consistent with lifestage)

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Urinary System**

The urinary bladder is moderately distended with anechoic urine. The bladder wall, trigone, ureteral papillae and visible urethra appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

The left kidney has a normal shape and size (2.9 cm in length). Overall echogenicity is normal with subjective mild reduction in corticomedullary definition. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (3.0 cm in length). Overall echogenicity is normal with subjective mild reduction in corticomedullary definition. There is no evidence of perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

**Adrenal Glands**

The left adrenal gland is normal for this age patient to very mildly small, but normal in shape, measuring 0.2 cm at the caudal pole, 0.17 cm at the cranial pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The region of the right adrenal (between right cranial kidney and vena cava) is unremarkable, but the adrenal is not distinctly visualized. No evidence of a mass effect.

**Spleen**

The spleen is subjectively normal in size and shape, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

**Liver**

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

The gallbladder lumen is moderately distended. The wall of the gallbladder is not thickened and has a smooth mucosal surface. Luminal contents are primarily anechoic. The cystic and common bile ducts are normal/not visible.



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**Gastrointestinal**

The stomach is moderately distended with hyperechoic ingesta. It measures at a normal thickness of <0.7cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layering is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

The visible small intestinal segments appear normal in wall thickness and layering. Jejunum wall measures approximately 0.21 cm in thickness. Duodenum wall measures approximately 0.25-0.27 cm in thickness with normal layering.

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

**Pancreas**

The visible pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

**Free Abdomen**

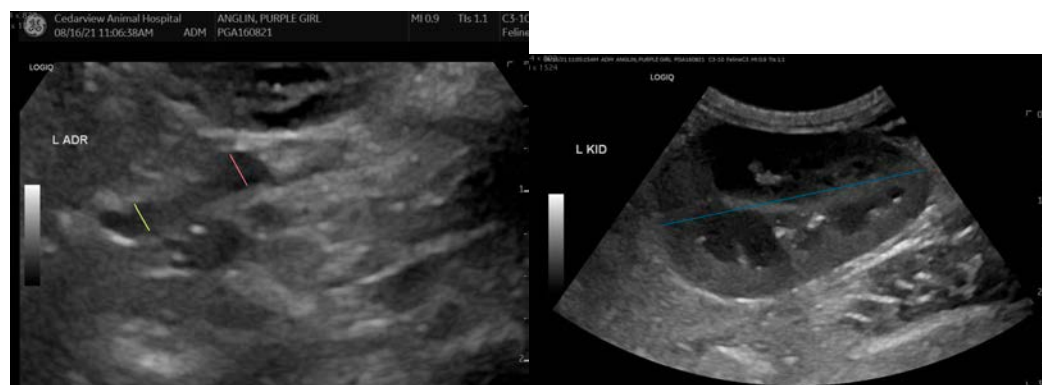
Evaluation of the peritoneal cavity did not reveal any evidence of effusion. There is a mild lymphadenopathy present. The lymph node measures 0.29 cm x 0.73 cm. The omentum is of normal uniform echogenicity.

**ULTRASONOGRAPHIC FINDINGS**

- Post-prandial abdomen
- Very mild lymphadenopathy – most consistent with patient’s young age. However, reactive lymphadenitis is also considered.
- Left adrenal is likely normal for young age – differentials include hypoadrenocorticism.
- Subjective decreased corticomedullary definition in both kidneys – This may be a normal variation given the patient’s young age.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Correlate findings with blood work and urinalysis findings.





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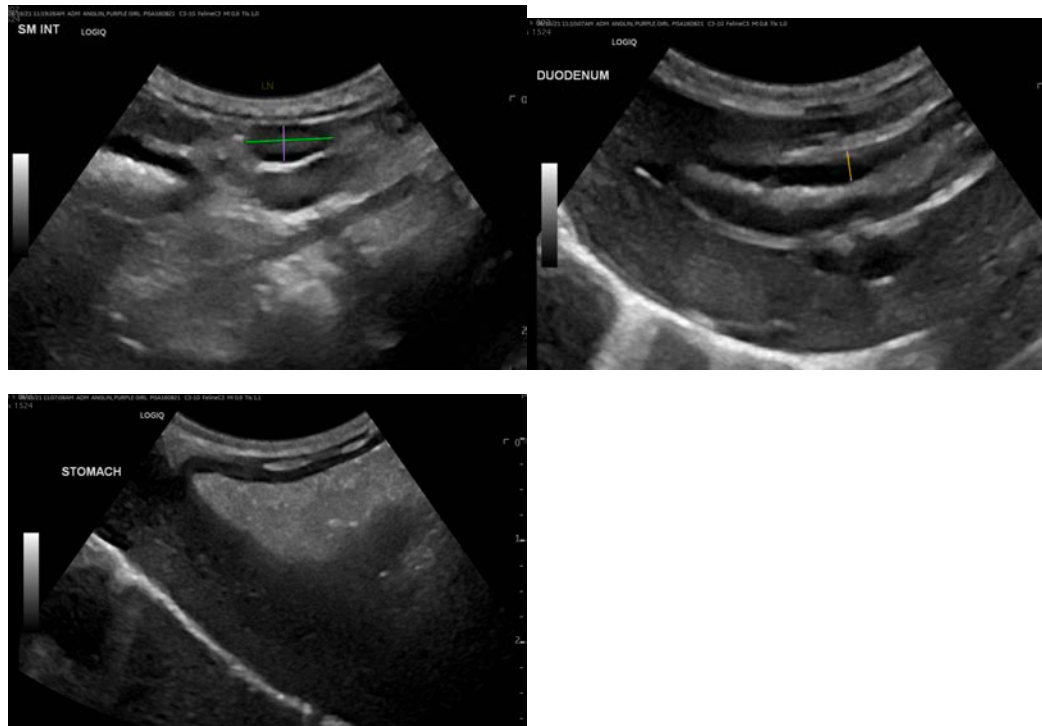
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Aubrey Hirsch, DVM, Practice Limited to Internal Medicine.  
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