

**DATE PRESENTING CLINICAL SIGNS**

3.1.23 Aspiration pneumonia. Ate part of couch cushion. vomiting. Concern for gastric foreign body. Grade 1-2/6 systolic murmur as young pup, resolved, ausculted this morning after fluids yesterday.

PATIENT

Bentley Bennett

Current Medications: Unasyn, Fluids, Cerenia
 Date of Previous IntraPet Ultrasound: No previous.
 Sedation: Not required to complete full diagnostic ultrasound.
 Stat Report: Not requested.

SPECIES

Canine

Imaging Performed By: Rachel Brillhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED**

Boxer

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. The region of the trigone and visible portion of the proximal urethra are normal.

SEX

Intact Male

The prostate is mildly enlarged (2.09 cm in width) with normal curvilinear peripheral contours. Parenchyma is homogenous. No focal lesions are observed. The prostatic urethra is not overtly dilated.

AGE

5/16/2022

The left kidney is normal in size (6.82 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

68.2 lbs

The right kidney is normal in size (5.85 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

INTERPRETED BY

Andrea Nicastro, DMV,
 Diplomate DACVIM
 (Small Animal
 Internal Medicine)

Adrenal Glands

The left adrenal gland is normal in size (0.46 cm at cranial pole) (0.61 cm at caudal pole) (2.69 cm in length) with a normal shape and homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

HOSPITAL NAME

Paradise AH

The right adrenal gland is in normal size (0.73 cm at cranial pole) (0.70 cm at caudal pole) (2.57 cm in length) with a normal shape and homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

REFERRING VET

Dr. Riehl

Spleen

The spleen is normal in size (1.91 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

INVOICE

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Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative, or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.

The gall bladder lumen is moderately distended. The wall is thin and smooth. A small amount of suspended echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

Pancreas

The left limb is prominent in size with minimal deviation from the normal peripheral contours. The parenchyma is mildly hypoechoic relative to surrounding omental fat and slightly heterogenous in appearance. No focal lesions are observed. The pancreatic duct is not overtly dilated. Surrounding mesentery is mildly hyperechoic.

Free Abdomen

The mesentery in the cranial abdomen is mildly hyperechoic. There is no obvious evidence free fluid. Several prominent mesenteric lymph nodes are visualized (the largest measuring 3.25 cm in length). The nodes are normal in shape and echogenicity.

Other

The testicles are subjectively normal in size (left: 3.79 x 2.21 cm) (right: 3.77 x 2.42 cm) and symmetrical with homogenous parenchyma.

Several ringdown lesions are observed within the thorax.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- The pancreatic changes are suggestive of mild pancreatitis.
- Cranial peritonitis is present (possibly secondary to pancreatitis or low-grade GI inflammation).
- The ringdown lesions in the thorax are consistent with pulmonary parenchymal disease.

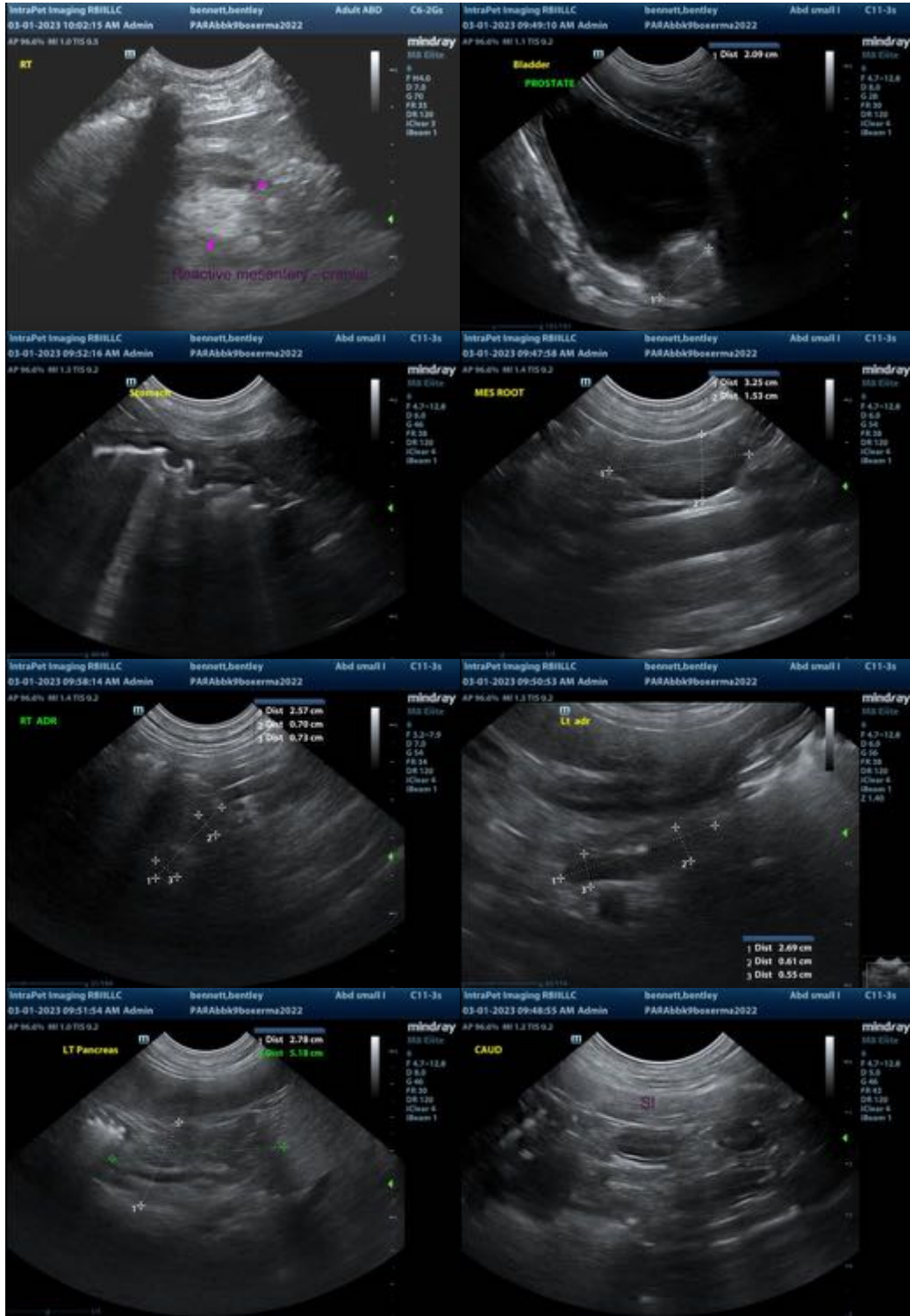
Secondary Findings

- The abdominal lymphadenopathy could be consistent with immunologic immaturity, reactive lymphadenitis or lymphoid hyperplasia. Infiltrative neoplasia is possible but considered unlikely.
- The prostate changes are as expected for a young intact male.

*There is no obvious evidence of a foreign body/obstruction.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Supportive care for aspiration pneumonia and gastroenteritis/mild pancreatitis is recommended.





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.

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