



PATIENT PRESENTING CLINICAL SIGNS

Babe Boldt History: vomiting for 24 hours, normal otherwise
Abnormal PE/Chem/CBC/UA Results: Chem6/elytes - mild hyponatremia PCV/TS - 55%/7

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine *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. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

BREED

Bullmastiff

SEX

Female

The left kidney is normal size (7.00 cm in length); normal shape and architecture with 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 hydroureter.

AGE

1 Yr.

The right kidney is normal size (7.93 cm in length); normal shape and architecture with 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 hydroureter. Renal vasculature is normal.

WEIGHT

40 kg.

Adrenal Glands

The left adrenal gland is normal size (0.68 cm at cranial pole) (0.68 cm at caudal pole); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

Andrea Nicastro, DVM,
Diplomate ACVIM
(*Small Animal Internal
Medicine*)

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

Spleen

IMAGING PERFORMED BY

Dr. de Cordon

The spleen is normal in size (2.02 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.

HOSPITAL NAME

Mason Dixon Animal
ER

Liver

REFERRING VET

Dr. Bateman

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. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

INVOICE

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Gastrointestinal

The gastric lumen is mildly fluid distended. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is segmentally fluid distended (mild). In one small intestinal segment, there is a questionable linear structure within the lumen. However, this segment is not dilated or

DATE

3/15/23



PATIENT

Babe Boldt

plicated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The ileocecolic junction and colonic wall are normal. The lumen of the descending colon is moderately distended with diarrheic stool.

SPECIES

Canine

Pancreas

The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

BREED

Bullmastiff

Free Abdomen

There is no obvious evidence of free fluid. A few prominent mesenteric lymph nodes are visualized, the largest measuring 3.86 cm in length.

SEX

Female

Other

The uterine body is visible and is subjectively normal in size (0.78 cm in width). No obvious pathology is observed.

AGE

1 Yr.

The left ovary measures 2.99 x 1.15 cm. No obvious pathology is observed.

WEIGHT

40 kg.

ULTRASONOGRAPHIC FINDINGS

- The gastrointestinal changes are most consistent with gastroenteritis/colitis. There is no obvious evidence of an obstructive pattern. However, a partial obstruction cannot be completely excluded. The linear structure within one segment of small intestinal lumen may represent an imaging artifact, transient foreign material or less likely, obstructive foreign material.
- The abdominal lymphadenopathy could be consistent with immunologic immaturity, reactive lymphadenitis or lymphoid hyperplasia. Infiltrative neoplasia is possible but considered unlikely.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- A fecal evaluation for ova/Giardia is recommended.
- Supportive care for acute gastroenteritis/colitis is recommended including fluid therapy, anti-emetics, gastric protectants and pain medication, as needed. A probiotic may also prove beneficial.
- If the patient's clinical signs do not begin to improve within 12-24 hours, consider a repeat abdominal ultrasound to reassess the bowel. A more comprehensive GI workup may also be warranted.

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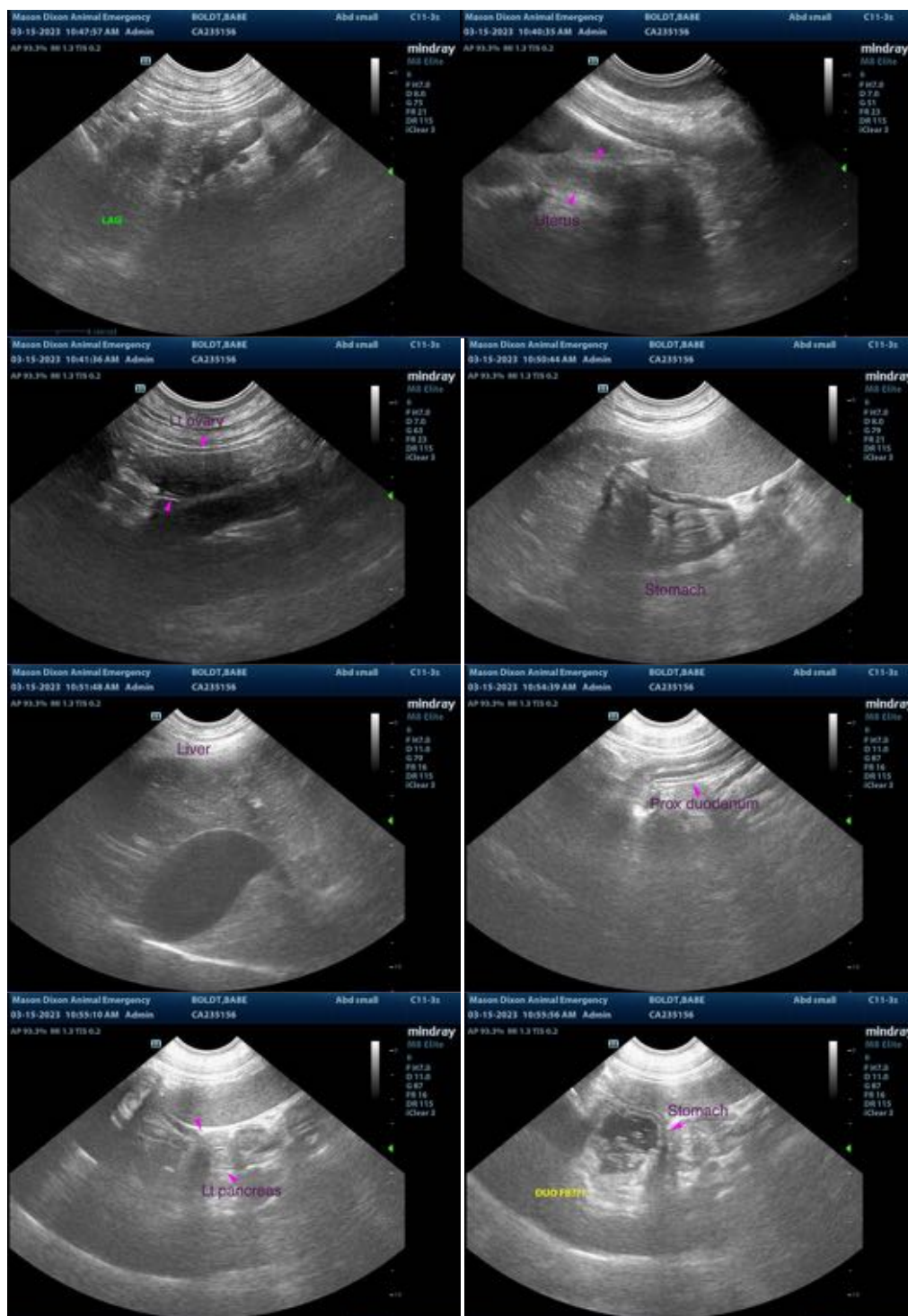
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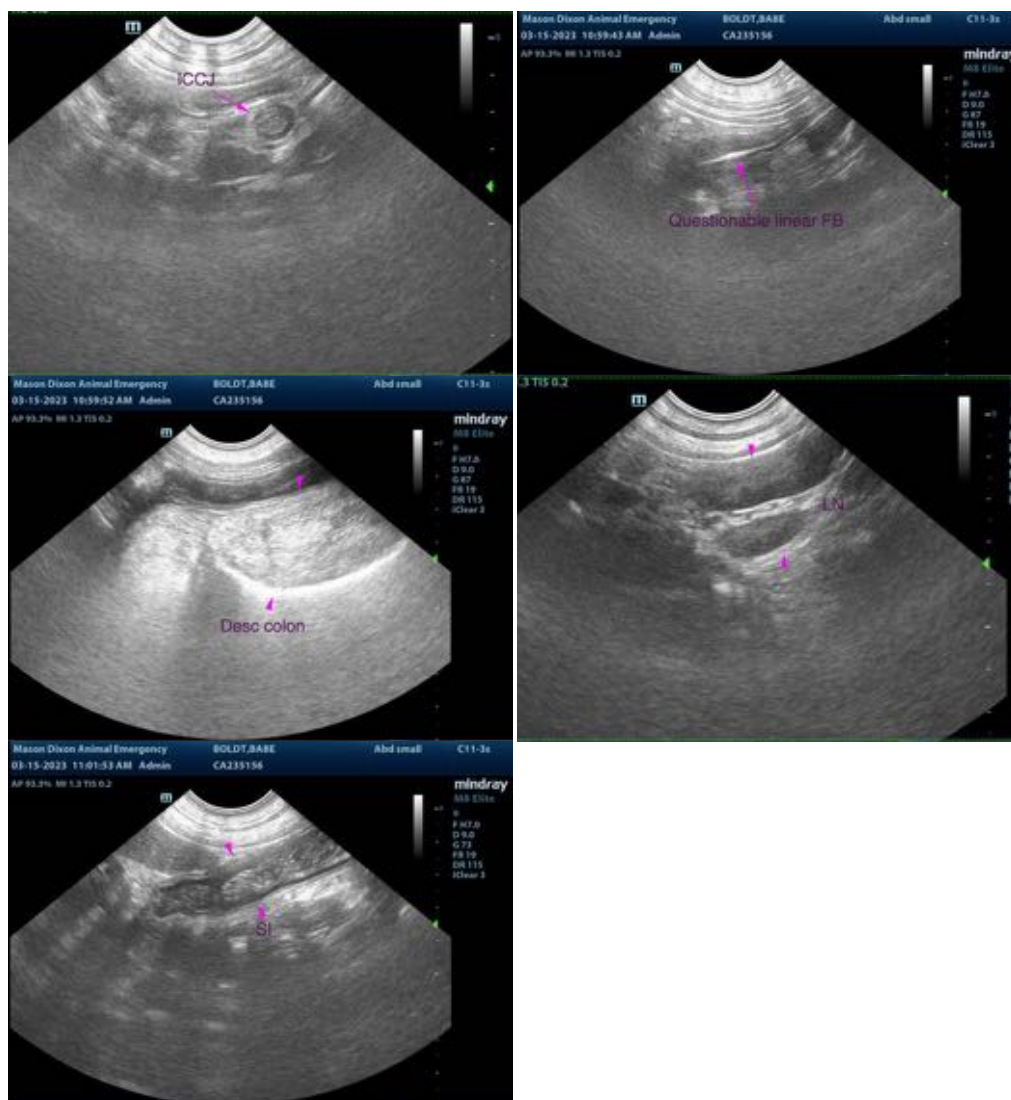
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com