**PATIENT**

Beau Anderson
268677

SPECIES

Canine

BREED

Golden Retriever

SEX

Intact Male

AGE

1 year, 2 mos

WEIGHT

56 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

Tom McNeill

HOSPITAL NAME

SVS Imaging CT

REFERRING VET

WVRC Dr. Weidmeyer

INVOICE

10835

DATE

4/29/22

PRESENTING CLINICAL SIGNS

History: Acute onset of vomiting and diarrhea. Radiographs concerning for foreign material and two populations of bowel.

Abnormal PE/Chem/CBC/UA Results: Rectal exam revealed a flat piece of bone that was removed.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder, trigone, and pelvic urethra are 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.

The prostate is enlarged (2.36 cm in width) with a normal shape and smooth peripheral contours. The parenchyma is hyperechoic relative to surrounding omental fat and slightly heterogenous in appearance. No distinct focal lesions are observed. The prostatic urethra is not overtly dilated.

The left kidney is normal size (6.17 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 hydronephrosis.

The right kidney is normal size (6.51 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 hydronephrosis.

Adrenal Glands

The left adrenal gland is normal size (0.34 cm cranial)(0.43 cm caudal) (3.90 cm length). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

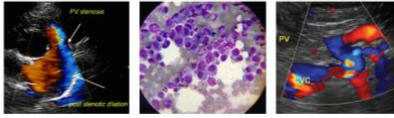
The right adrenal gland is normal size (0.36 cm cranial)(0.42 cm caudal) (2.45 cm length). Normal shape and glandular echogenicity. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (1.79 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.

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

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Gastrointestinal

The gastric lumen is mildly distended with fluid and gas. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract appears patent. The small intestinal lumen is segmentally fluid-distended (mild to moderate) and hypomotile. The small intestinal wall is normal in thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. The descending colonic lumen contains fluid. There is no evidence of an obstructive pattern.

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.

Free Abdomen

There is no evidence of free fluid. A few prominent mesentery lymph nodes are visualized, the largest measuring 2.81 cm in length. In addition, a 2.47 cm medial ileac lymph node is seen.

Other

The left testicle measures 3.61.

The right testicle measures 3.45 x 1.84. The testicles are subjectively normal in size and symmetrical with homogenous parenchyma.

ULTRASONOGRAPHIC FINDINGS**Primary Findings**

- Diffuse gastrointestinal ileus, most consistent with gastroenteritis. There is no evidence of a foreign body/obstruction. However, a partial obstruction cannot be completely excluded.
- The prominent abdominal lymph nodes are most consistent with immunologic immaturity, reactive lymphadenitis or lymphoid hyperplasia. Neoplastic infiltration is considered less likely.

Secondary Findings

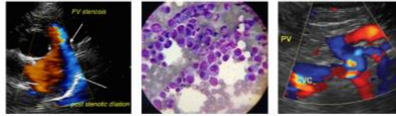
- The prostate changes are most consistent with benign prostatic hyperplasia. Bacterial prostatitis is also a differential but considered unlikely in the absence of lower urinary tract signs.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Fecal evaluation for ova and Giardia
- Prophylactic deworming with Fenbendazole at 50 mg/kg once a day for 5 days is recommended. Repeat above protocol in 3 weeks.
- Supportive care for acute gastroenteritis is recommended. If no improvement is seen within 24-72 hours of medical management, consider a repeat abdominal ultrasound +/- a more advanced GI work-up (i.e., GI panel (Send to Texas A&M)), resting cortisol level, +/- endoscopic or surgical gastrointestinal biopsies.

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svsimagingqc.net 309-737-3070



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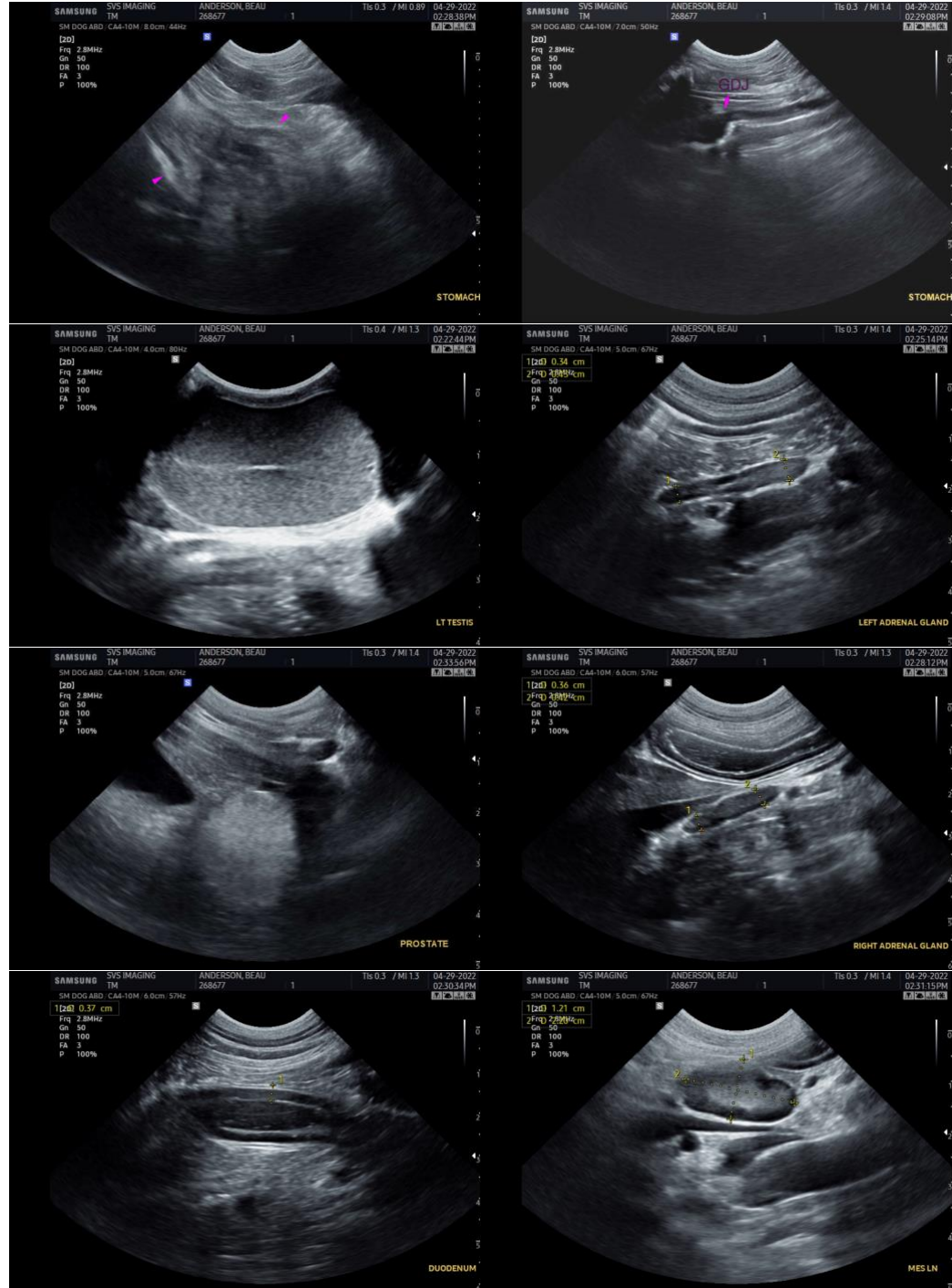
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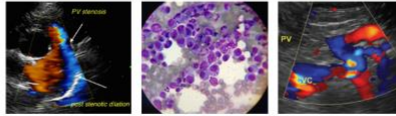
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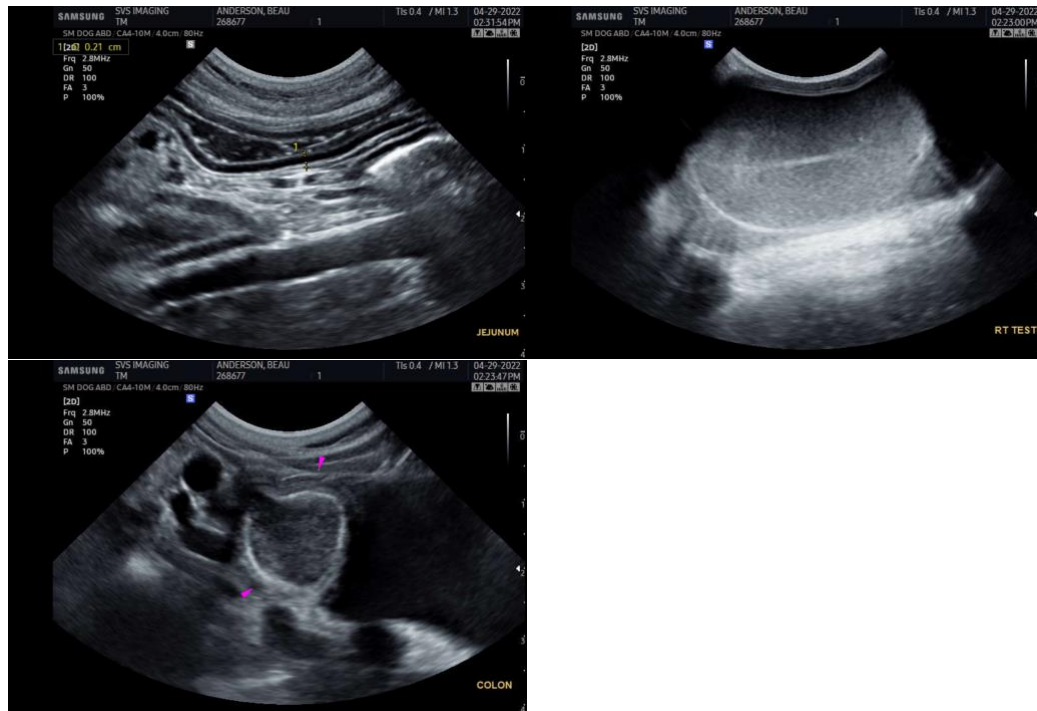
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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