**PATIENT PRESENTING CLINICAL SIGNS**

Hank DePorre History: Acute vomiting  
Abnormal PE/Chem/CBC/UA Results: Labs WNL. Loss of detail on abdominal radiographs

**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 is moderately distended. Luminal contents are anechoic. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 2 cm, are normal.

**BREED**

Fr Bulldog The prostate is normal in size (1.10 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

**SEX**

Neutered Male The left kidney is normal in size (4.55 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 hydroureter.

**AGE**

4 years The right kidney is normal in size (4.11 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 hydroureter.

**WEIGHT**

20.7 lbs

**Adrenal Glands**

The left adrenal gland is normal in size (0.33 cm at cranial pole) (0.53 cm at caudal pole) 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.

**INTERPRETED BY**

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

The right adrenal gland is in normal size (0.48 cm at cranial pole) (0.46 cm at caudal pole) 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.

**IMAGING PERFORMED BY**

Amy Mayhew LVT

**Spleen**

The spleen is normal in size (1.50 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**

SVS Imaging Michigan

**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.

**REFERRING VET**

Dr. Fox

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

**INVOICE**

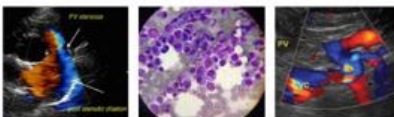
12923

**Gastrointestinal**

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is mildly to moderately fluid-distended. Some kibble is also observed within the lumen. 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 is normal to borderline thickened (up to 0.39

**DATE**

5.1.23

**PATIENT**

Hank DePorre

cm). There is evidence of mucosal striations in a few segments. Discreet masses are not identified. The colonic wall is normal. There is no obvious evidence of an obstructive pattern.

**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**

Fr Bulldog

**Free Abdomen**

The mesentery in the cranial abdomen is hyperechoic. Trace free fluid is observed. One to two medial iliac lymph nodes are visualized (the largest measuring 1.73 cm in length). The nodes are normal in shape and echogenicity.

**ULTRASONOGRAPHIC FINDINGS****SEX**

Neutered Male

**Findings**

- Cranial peritonitis, the etiology of which is unclear. It may be secondary to mild pancreatitis, gastroenteritis, other.
- The small intestinal mucosal striations in some small intestinal segments may represent mild lymphangiectasia.

**AGE**

4 years

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS****WEIGHT**

20.7 lbs

- Consider a cPLI to further evaluate for pancreatitis. A full GI panel including serum cobalamin and folate, TLI and PLI, can also be considered to also evaluate for concurrent maldigestion/malabsorption.
- A fecal evaluation for ova and Giardia is also recommended (if not already performed).
- In the meantime, symptomatic care for acute gastroenteritis/mild pancreatitis is recommended. If the patient's clinical signs do not improve with medical management, a more comprehensive GI work-up may be warranted.

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Amy Mayhew LVT

**HOSPITAL NAME**

SVS Imaging Michigan

**REFERRING VET**

Dr. Fox

**INVOICE**

12923

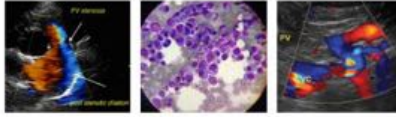
**DATE**

5.1.23



IMAGING PERFORMED BY

svsimagingqc.net 309-737-3070



Clinical Sonography & Telecytology

EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

**PATIENT**

Hank DePorre

**SPECIES**

Canine

**BREED**

Fr Bulldog

**SEX**

Neutered Male

**AGE**

4 years

**WEIGHT**

20.7 lbs

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Amy Mayhew LVT

**HOSPITAL NAME**

SVS Imaging Michigan

**REFERRING VET**

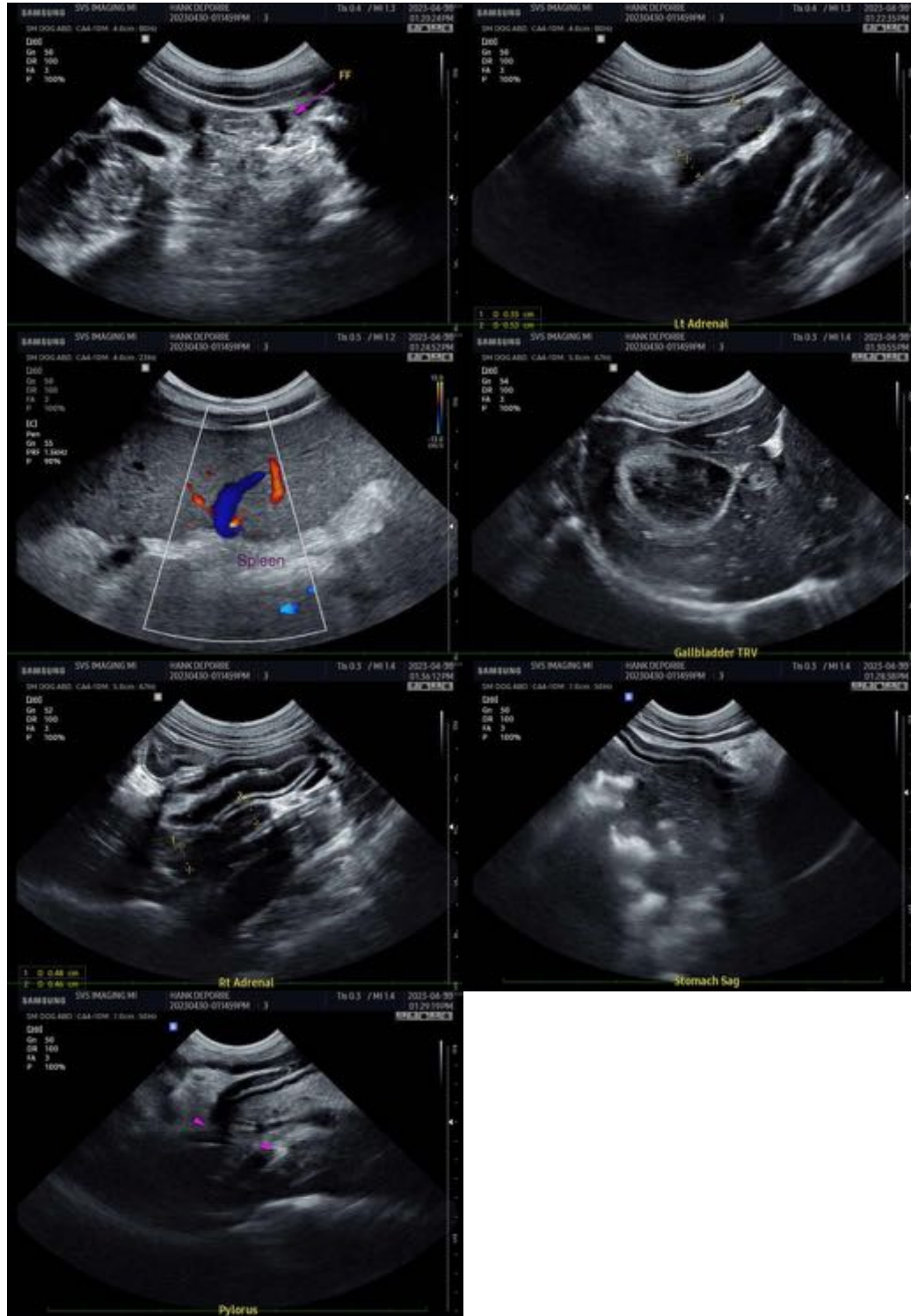
Dr. Fox

**INVOICE**

12923

**DATE**

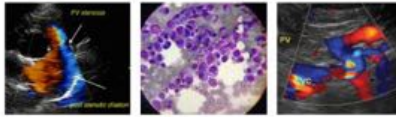
5.1.23



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

IMAGING PERFORMED BY

svsimagingqc.net 309-737-3070



Clinical Sonography & Telecytology

EDUCATIONAL TELECONSULTATION SERVICES™

1-800-838-4268 info@sonopath.com SonoPath.com

**PATIENT** the image/video clips provided.

Hank DePorre 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.

**SPECIES** **Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)**  
[info@SonoPath.com](mailto:info@SonoPath.com)

Canine

**BREED**

Fr Bulldog

**SEX**

Neutered Male

**AGE**

4 years

**WEIGHT**

20.7 lbs

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Amy Mayhew LVT

**HOSPITAL NAME**

SVS Imaging Michigan

**REFERRING VET**

Dr. Fox

**INVOICE**

12923

**DATE**

5.1.23