



**PATIENT PRESENTING CLINICAL SIGNS**

**PATIENT** Maya Vicente  
**History:** The patient presented for an abdominal ultrasound to evaluate vomiting. The patient has been vomiting since she was a puppy. She has a good appetite and no diarrhea has been seen.  
**Abnormal PE/Chem/CBC/UA Results:** CBC and Chem by RDVM are relatively normal

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**SPECIES** Canine  
**Urinary System**

**BREED** Poodle  
 The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. A small amount of suspended echogenic debris is observed within the lumen. No cystic calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

**SEX** Female, spayed  
 The left kidney is normal size (3.76 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** 3 Yrs.  
 The right kidney is normal size (3.93 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.

**WEIGHT** 9.2 lbs.  
**Adrenal Glands**  
 The left adrenal gland is normal size (0.29 cm at cranial pole) (0.41 cm at caudal pole) (1.49 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.

**INTERPRETED BY** Andrea Nicastro, DVM, Diplomate ACVIM (Small Animal Internal Medicine)  
 The right adrenal gland is normal size (0.52 cm at cranial pole) (0.35 cm at caudal pole) (1.60 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**  
 The spleen is normal in size (0.93 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.

**IMAGING PERFORMED BY** Dr. Ferrer

**HOSPITAL NAME** *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 moderate amount of aggregated, echogenic, gravity-dependent sludge is observed within the lumen. The cystic and common bile ducts are normal/not seen.

**REFERRING VET** Dr. Ortiz  
**Gastrointestinal**

**INVOICE** 14870  
 The gastric lumen is moderately distended with ingesta. The gastric wall is normal in thickness with a normal layering pattern. Near the pyloric antrum, the lumen narrows to approximately 0.34 cm in diameter. The narrowed portion contains some ingesta. The wall in this region are normal in thickness with retention of the normal layering pattern. The pyloric outflow tract is patent. The small intestinal

**DATE** 5/1/23



## PATIENT

Maya Vicente

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 ileocecolic junction and colonic wall are normal. The colonic lumen contains shadowing fecal material.

## 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

Poodle

### *Free Abdomen*

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

## SEX

Female, spayed

## ULTRASONOGRAPHIC FINDINGS

## AGE

3 Yrs.

If the patient was fasted for this study, the presence of ingesta within the gastric lumen could suggest delayed gastric emptying. The significance of the narrowed of the gastric lumen near the pyloric antrum is unclear. This may be a normal variant for this patient or may be secondary to underlying pathology (i.e., fibrosis/stricture, congenital malformation, hypertrophy, neoplasia (unlikely), other).

## WEIGHT

9.2 lbs.

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Given the patient's clinical history, consider the following:

## INTERPRETED BY

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

1. A fecal evaluation for ova/Giardia
2. Three-view thoracic radiographs to assess for occult esophageal disease
3. Malabsorption panel including serum cobalamin, folate, TLI, PLI and a resting cortisol level (send to Texas A&M).
4. 2-4-week limited antigen or hydrolyzed protein diet trial
5. Initiation of a probiotic with a high colony count (i.e., Provable or Visbiome)
6. Depending on the results of the above diagnostics/therapeutics, an upper GI endoscopy with biopsies may be warranted, particularly to evaluate the narrowed pyloric antral region.

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Dr. Ferrer

## HOSPITAL NAME

Paseos VC

## REFERRING VET

Dr. Ortiz

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**PATIENT**

Maya Vicente

**SPECIES**

Canine

**BREED**

Poodle

**SEX**

Female, spayed

**AGE**

3 Yrs.

**WEIGHT**

9.2 lbs.

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