



PATIENT

Luna Vojir

SPECIES

Canine

BREED

German Shepherd

SEX

Spayed Female

AGE

7.14.2019

WEIGHT

63 lbs

INTERPRETED BY

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

IMAGING PERFORMED BY

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

HOSPITAL NAME

Flowertown AH

REFERRING VET

Dr. Kline

INVOICE

11229

DATE

7.18.22

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: Several day hx of bleeding from vulva and swollen vulva. at least second ep of this multiple months apart. O is convinced P is spayed. No other clinical signs. O declined labwork prior to ultrasound. Two episodes of bloody vaginal discharge. Bleeding has been quite heavy, History of chronic urinary tract infections. Moderate swelling around the vulva.

Abnormal lab-work values: None

Current Medications: trazadone 100mg prior to appointments

Radiographic Findings: None

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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.

The **left kidney** is normal size (6.33 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. Renal vasculature is normal.

The **right kidney** is normal size (6.82 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. Renal vasculature is normal.

Adrenal Glands

The **left adrenal gland** is normal size (0.46 cm at cranial pole) (0.59 cm at caudal pole) (2.57 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.

The **right adrenal gland** is normal size (0.97 cm at cranial pole) (0.57 cm at caudal pole) (1.93 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.

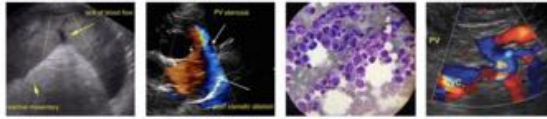
Spleen

The **spleen** is normal in size (1.94 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 **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 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 0.87 cm lymph node is observed in the left mid- to lateral abdomen. In addition, a few jejunal lymph nodes are visualized medial to the spleen, the largest measuring 1.45 cm in length.

Other

A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

The uterine stump is visible/enlarged (1.04 cm in diameter). The wall is normal in thickness. The lumen is distended with echogenic material.

Adjacent to the cranial pole of the right kidney, a 1.86 x 0.86 cm slightly, irregular echogenic structure is visualized (in the region of the right ovary). The structure is hypoechoic relative to surrounding omental fat and homogenous in appearance.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- The uterine stump changes are most concerning for a stump pyometra although estrus secondary to an ovarian remnant is possible.
- The echogenic structure adjacent to the cranial pole of the right kidney is suspicious for an ovarian remnant. However, an enlarged lymph node or nodule within the mesentery cannot be completely excluded.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Consider vaginal cytology to further evaluate for stump pyometra.

If further confirmation of an ovarian remnant is desired, consider measuring progesterone and anti-Mullerian hormone levels. Alternatively, an abdominal exploratory with removal of the uterine stump and a search for an ovarian remnant should be considered. In the meantime, initiation of broad-spectrum antibiotics is warranted.



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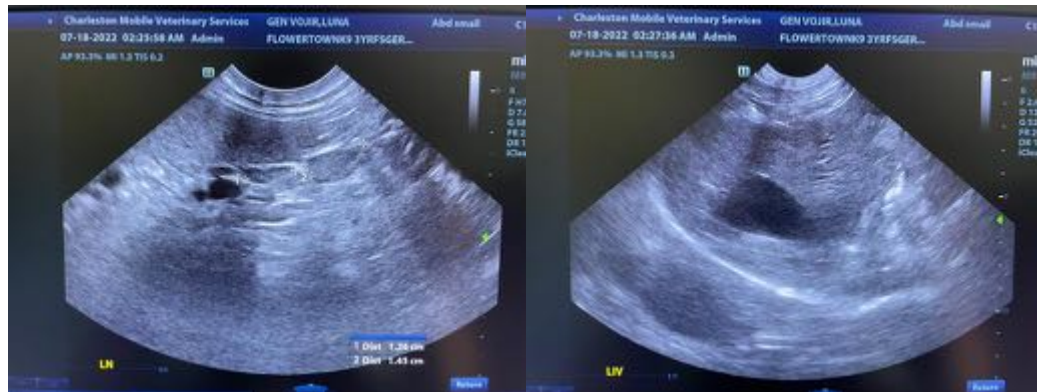
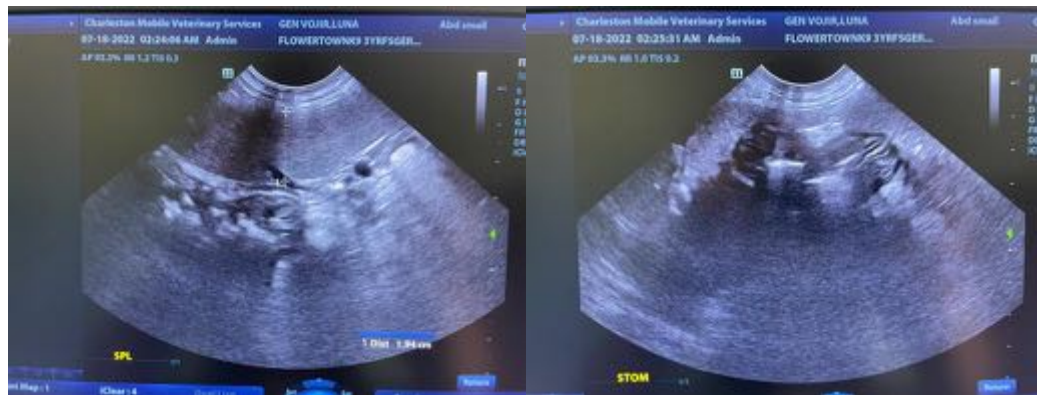
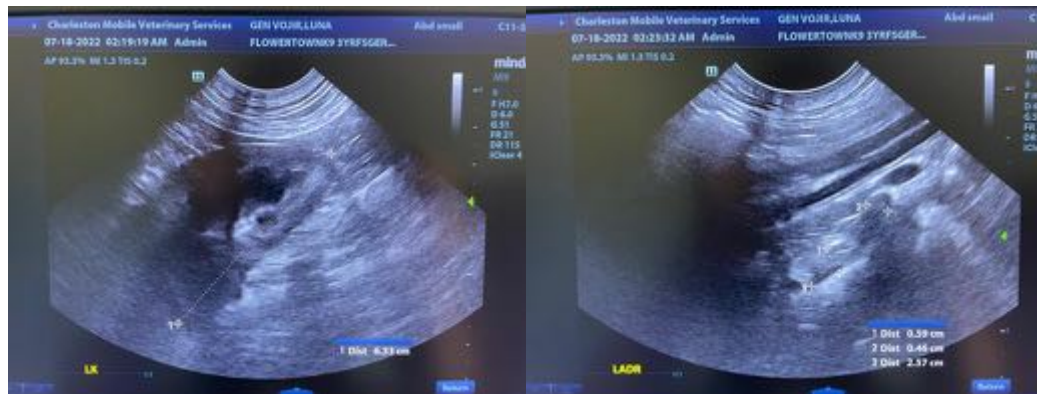
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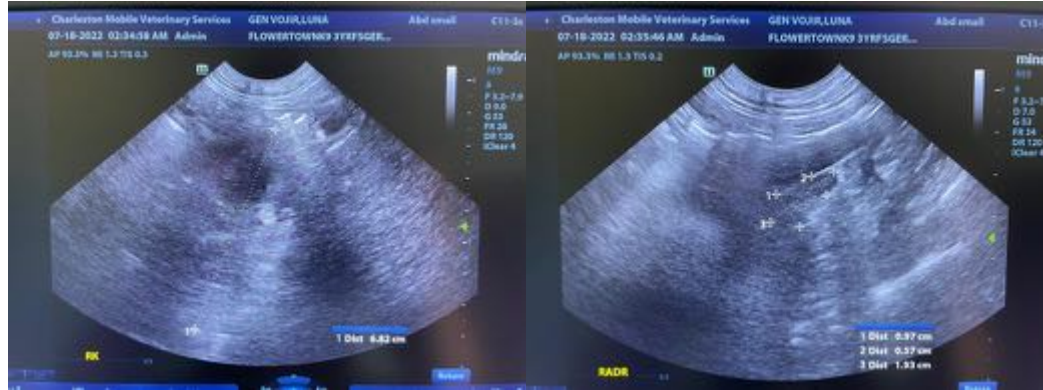
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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