



PATIENT PRESENTING CLINICAL SIGNS

Oakley Reaume

History: Seen at e clinic on over the weekend for vomiting and diarrhea. CBC and chem were unremarkable, fortiflora was sent home and omeprazole. Abdominal radiographs were unremarkable. She has been on/off mild lethargy for the week and still having loose stools but slight improvement with bland diet. Fecal from yesterday was normal. Vomited 4 times this morning so dropped off. Today had projectile diarrhea.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Cortisol, and GI panel are pending. Snap cpl was We are doing SQF, cerenia, and metronidazole today.

BREED

Golden Retriever

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

The **urinary bladder** wall is normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with mostly anechoic urine. No masses, inflammatory changes or calculi are observed. The region of the trigone is normal.

Spayed Female

AGE

The **left kidney** is normal size (6.16 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.

24 mos

The **right kidney** is normal size (6.69 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

66 lbs

Adrenal Glands

The **left adrenal gland** is normal size (0.52 cm at cranial pole) (0.48 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 (1.13 cm at cranial pole) (0.58 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.

IMAGING PERFORMED BY

Charlie Rodriguez

Spleen

The **spleen** is normal in size (2.07 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

Bethany Family PC

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. Tiffany Pow

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

11617

Gastrointestinal

The **gastric lumen** is not distended. The gastric wall is normal in thickness with a normal layering pattern. 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

DATE

9.9.22

normal. The lumen of the descending colon is moderately distended with 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

The **peritoneal cavity** is normal. There is no evidence of inflammation or effusion. Two to three prominent mesenteric **lymph nodes** are visualized, the largest measuring 1.40 cm in length. The nodes are normal in size and echogenicity.

ULTRASONOGRAPHIC FINDINGS

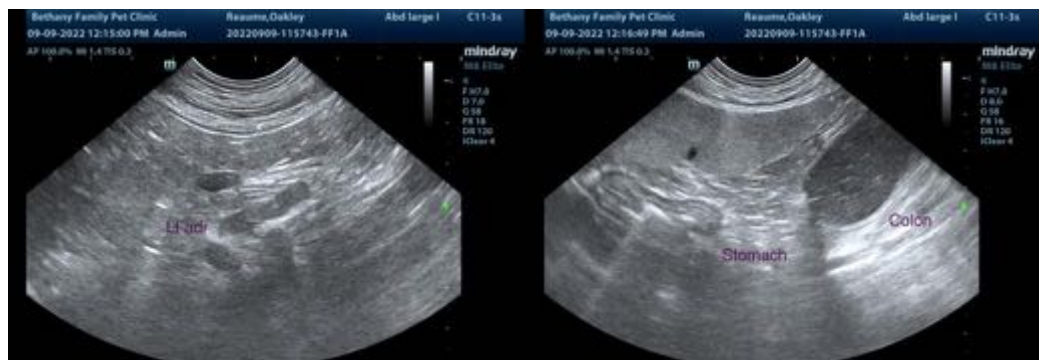
Primary Findings

- Diarrheic stool
- The mesenteric lymphadenopathy is likely reactive.

*An obvious cause for the patient's clinical signs is not identified in this study. There is no obvious evidence of a foreign body/obstruction. Acute gastroenteritis or infectious/parasitic disease are the top two differentials.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Supportive care for acute gastroenteritis should be continued. Despite the negative fecal evaluation, consider prophylactic deworming with Fenbendazole. If the patient does not respond within 48-72 hours of medical management, a more advanced GI work-up may be warranted.





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.

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