



**PATIENT**

**PRESENTING CLINICAL SIGNS**

Vino Blough

History: diarrhea for 6 days lethargic decreased appetite and thirst

**SPECIES**

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Canine

**Urinary System**

Urinary bladder is adequately distended with anechoic contents. No masses, inflammatory changes, echogenic sediment or cystoliths are observed. The urinary bladder, trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

**BREED**

Poodle Mix

Prostate is normal in size, echotexture and echogenicity for a neutered male.

**SEX**

Left kidney is normal is size (4.91 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

Male

**AGE**

Right kidney is normal is size (4.75 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

16 Weeks

**Adrenal Glands**

**WEIGHT**

Left adrenal gland is normal in size (0.39 cm at cranial pole and 0.3 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

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Right adrenal gland is normal in size (1.89 cm long x 0.89 cm at cranial pole and 0.34 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

**INTERPRETED BY**

**Spleen**

Beth Johnson, DVM  
DACVIM

Spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

**IMAGING PERFORMED BY**

**Liver**

Jenn

Liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

**HOSPITAL NAME**

Rockaway AH

**REFERRING VET**

Gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

Dr. Maniar

**Gastrointestinal**

**INVOICE**

The visible stomach wall is normal in thickness and layering. The lumen of the stomach is mildly fluid distended with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

20881

**DATE**

The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

1/31/23



**PATIENT**

The visible colon is normal in wall thickness and layering. Contents are consistent with normal formed feces and gas.

Vino Blough

**Pancreas**

**SPECIES**

The observed pancreas appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

Canine

**BREED**

**Free Abdomen**

Poodle Mix

There is no evidence of peritoneal effusion. There is no apparent lymphadenopathy.

**SEX**

- This is a relatively unremarkable/normal abdomen

Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**AGE**

If not recently evaluated, a fecal exam is recommended, as is a fecal enteropathogen PCR panel to Texas A&M GI Laboratory could be considered for further evaluation of possible infectious disease.

16 Weeks

Pending response of those diagnostics and response to supportive care, additional diagnostic consideration could be given to a gastrointestinal malabsorption panel (including cobalamin, folate, TLI and PLI) to Texas A&M GI Laboratory, for further evaluation of GI and pancreatic function.

**WEIGHT**

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In the meantime, supportive/symptomatic medical management of gastroenteritis/diarrhea, is recommended with empirical deworming, a 5-day course of Panacur, a probiotic such as Visbiome or Provable, and transition in diet, based on trial and error response of the patient, beginning with a hydrolyzed protein diet, and potentially transitioning to a bland, easy-to-digest or low-fat diet.

**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

Rockway AH

**REFERRING VET**

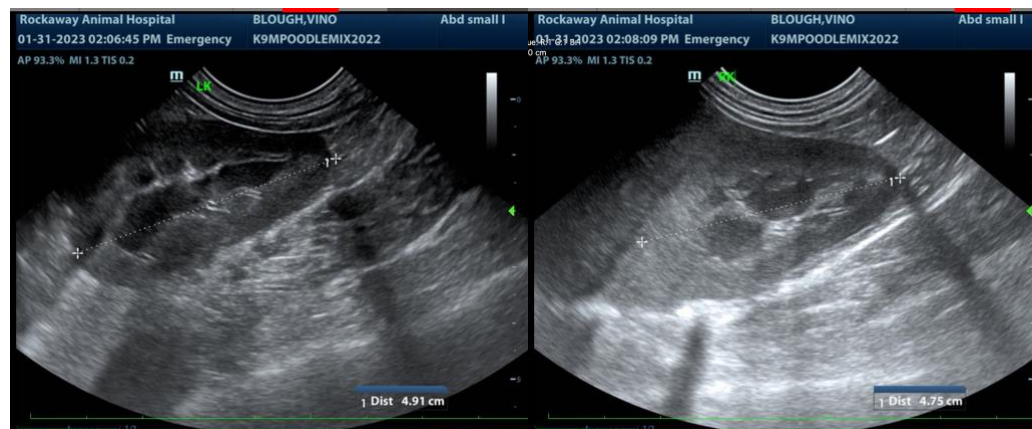
Dr. Maniar

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**PATIENT**

Vino Blough

**SPECIES**

Canine

**BREED**

Poodle Mix

**SEX**

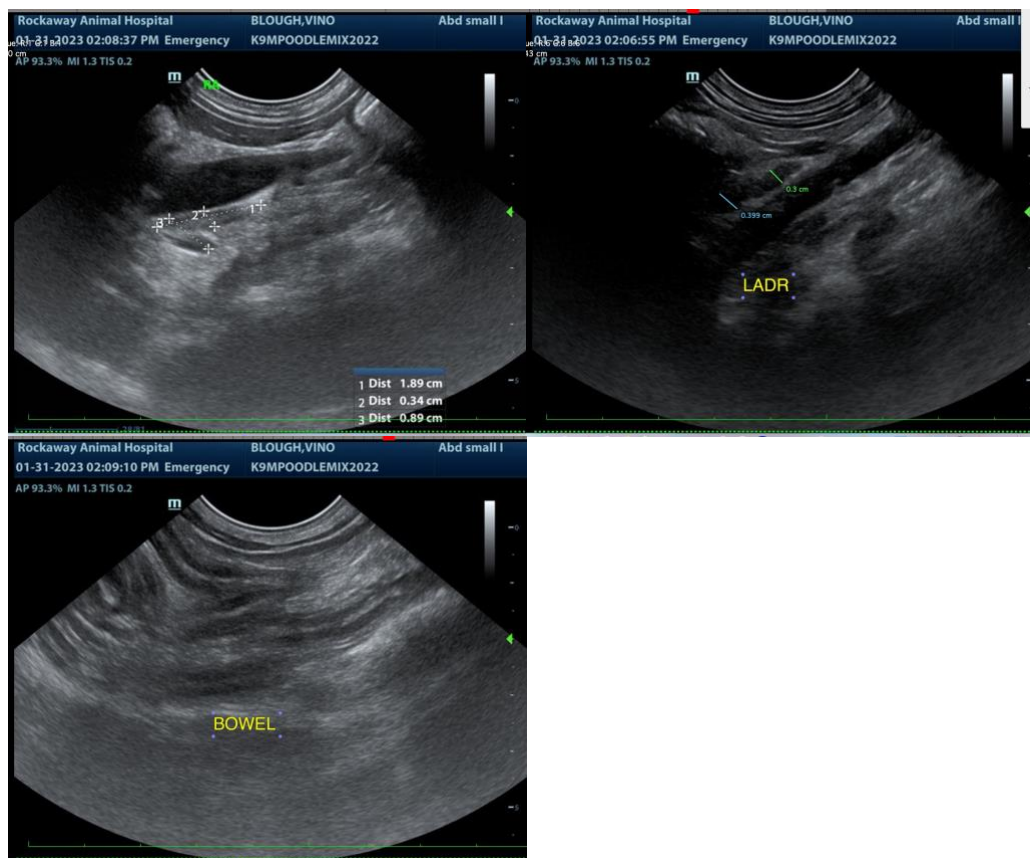
Male

**AGE**

16 Weeks

**WEIGHT**

15



**INTERPRETED BY**

Beth Johnson, DVM  
DACVIM

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

**IMAGING PERFORMED BY**

Jenn

**Beth Johnson, DVM DACVIM**

**HOSPITAL NAME**

Rockaway AH

Beth.Johnson@SonoPath.com

**REFERRING VET**

Dr. Maniar

**INVOICE**

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**DATE**

1/31/23

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.