



PATIENT

Keyla Seijo

PRESENTING CLINICAL SIGNS

History: vomiting/regurgitation. OLn cerenia, sucralfate, omeprazole

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: wnl

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Pit Bull

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.

SEX

Spayed Female

Left kidney is normal is size (5.86 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.

AGE

4.5 Years

Right kidney is normal is size (6.1 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.

Adrenal Glands

WEIGHT

45.3 Pounds

Left adrenal gland is normal in size (2.55 cm long x 0.46 cm at cranial pole and 0.49 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Right adrenal gland is normal in size (2.1 cm long x 1.3 cm at cranial pole and 0.5 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Spleen

IMAGING PERFORMED BY

Diane McFadden

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.

Liver

HOSPITAL NAME

Newton VH

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.

REFERRING VET

N/A

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.

Gastrointestinal

INVOICE

17850

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

DATE

10/21/22



PATIENT

Keyla Seijo

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.

SPECIES

Canine

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

BREED

Pit Bull

Pancreas

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.

SEX

Spayed Female

Free Abdomen

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

AGE

4.5 Years

ULTRASONOGRAPHIC FINDINGS

- An unremarkable/normal abdomen with no visible reason for this patients reported vomiting and regurgitation

WEIGHT

45.3 Pounds

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Three view thoracic radiographs are recommended for further evaluation of the esophagus given the reported regurgitation.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

A gastrointestinal malabsorption panel (including cobalamin, folate, TLI and PLI) to Texas A&M GI Laboratory is recommended for further evaluation of GI and pancreatic function.

A baseline cortisol is recommended. If baseline cortisol is less than 2, a full ACTH stimulation test is recommended to rule out hypoadrenocorticism.

IMAGING PERFORMED BY

Diane McFadden

In the meantime, medical management for possible gastroesophageal reflux disorder or GERD with twice per day antacid therapy, potentially a bedtime snack, empirical deworming with a 5-day course of Panacur, etc. is recommended and a transition in diet to either a bland easy to digest diet or potentially a hydrolyzed protein diet based on trial and error response could also be considered while awaiting diagnostic results.

HOSPITAL NAME

Newton VH

Ultimately, pending results, if clinical signs persist, upper GI esophagoscopy, gastroscopy/endoscopy with biopsies may be warranted.

REFERRING VET

N/A

INVOICE

17850

DATE

10/21/22



PATIENT

Keyla Seijo

SPECIES

Canine

BREED

Pit Bull

SEX

Spayed Female

AGE

4.5 Years

WEIGHT

45.3 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Diane McFadden

HOSPITAL NAME

Newton VH

REFERRING VET

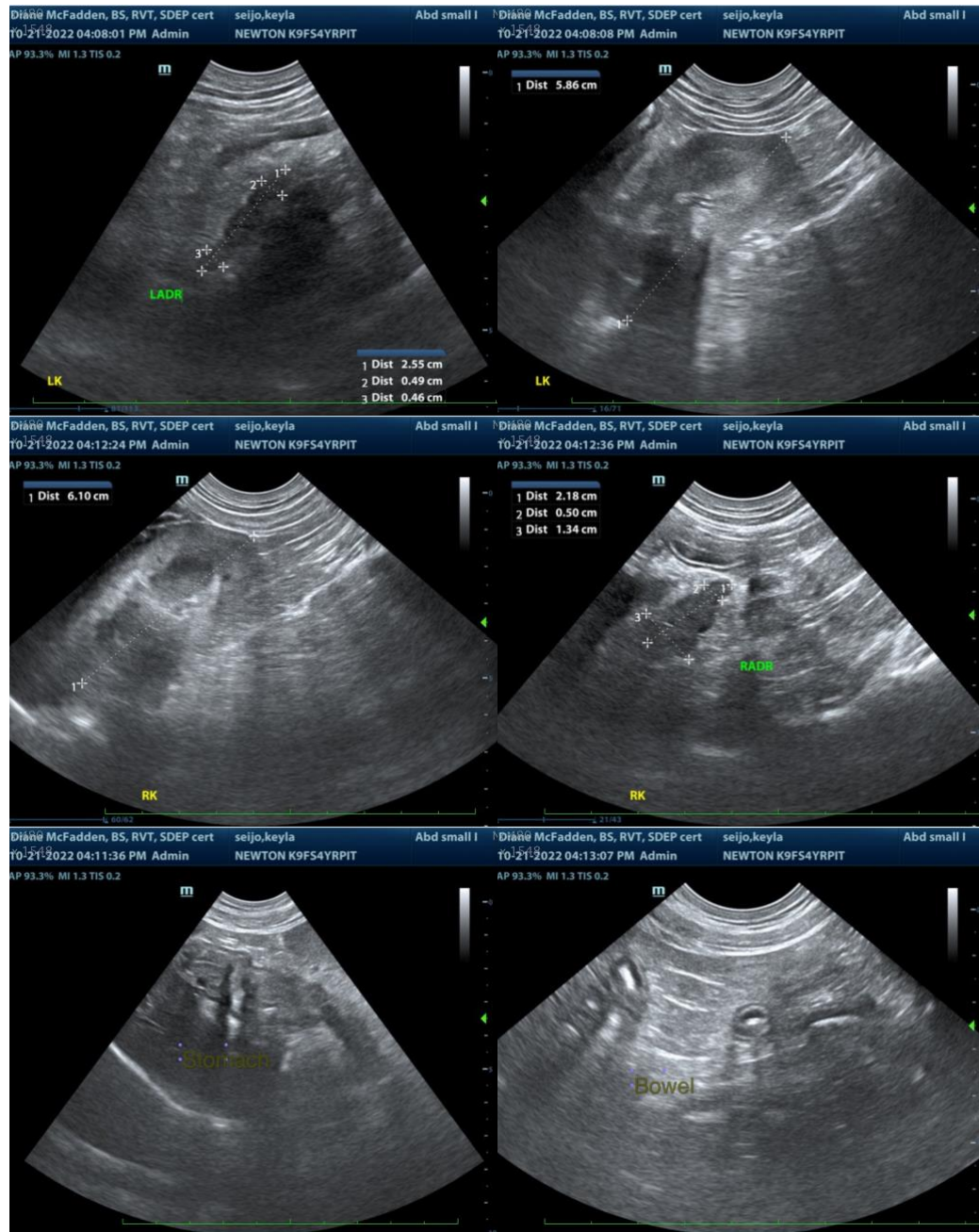
N/A

INVOICE

17850

DATE

10/21/22





PATIENT

Keyla Seijo

SPECIES

Canine

BREED

Pit Bull

SEX

Spayed Female

AGE

4.5 Years

WEIGHT

45.3 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Diane McFadden

HOSPITAL NAME

Newton VH

REFERRING VET

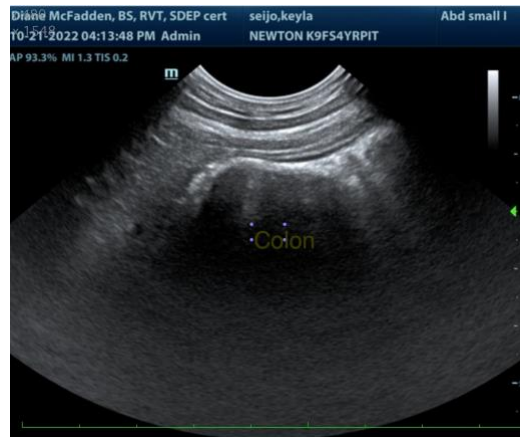
N/A

INVOICE

17850

DATE

10/21/22



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.

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.

Beth Johnson, DVM DACVIM

Beth.Johnson@SonoPath.com