


PATIENT PRESENTING CLINICAL SIGNS

Fiji Jarvis History: pain abd, distended abd meds: tramadol, metronidazole
 Abnormal PE/Chem/CBC/UA Results: rads: multiple opacities in area of liver

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System
BREED

Toy Poodle

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

Kidneys are overall normal in size and shape with smooth peripheral margination. A normal 1:3 cortex to medulla ratio is maintained. The medulla and cortices are uniform in texture with some mild increased cortical echogenicity and mild loss of corticomedullary distinction, expected in this age patient. There is no evidence of pyelectasia, mineral or infarcts observed. The left kidney measures 2.8 cm. The right kidney measures 3.08 cm. A hyperechoic band parallel to the corticomedullary border is present bilaterally.

AGE

10 Years

Adrenal Glands
WEIGHT

2.74 kg

Left adrenal gland is normal in size (1.06 cm long x 0.28 cm at cranial pole and 0.31 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Right adrenal gland is normal in size (1.07 cm long x 0.74 cm at cranial pole and 0.37 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

INTERPRETED BY

Beth Johnson, DVM
 DACVIM

Spleen

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

Kelly Reschny

Liver
HOSPITAL NAME

Collegeway AH

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

Dr. Hanna

Gallbladder is moderately distended with anechoic bile as well as moderate suspended and gravity dependent echogenic debris. The wall is smooth without visible thickening. There is no evidence of cystic or CBD dilation. There is no evidence of effusion or inflammation. The echogenic luminal debris appears clumped and adhered to the wall in places that make polyps or even a mass unable to be ruled out, although considered less likely.

INVOICE

21724

Gastrointestinal
DATE

3/20/23

The visible stomach wall is normal in thickness and layering. The stomach is mildly distended and contains an echogenic interface with distal progressively shadowing material consistent with hairball density (or similar fluid absorbing material) noted.



PATIENT

Fiji Jarvis

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 mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is 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.

Pancreas

BREED

Toy Poodle

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.

ULTRASONOGRAPHIC FINDINGS

AGE

10 Years

- Age-related kidney changes with medullary rim sign bilaterally- This finding is of unknown clinical significance and can be a normal variant, often idiopathic. Medullary rim sign can be present with renal disease including FIP, lymphoma, hypercalcemic nephropathy, Leptospirosis, tubular disease, other and should be interpreted in combination with other more specific indications of kidney disease such as isosthenuria, proteinuria, azotemia, etc. This is a common incidental finding in patients with diabetes mellitus.

WEIGHT

2.74 kg

- Moderate gallbladder debris - Cholecystic debris is of unknown clinical significance. It can be seen with biliary stasis from fasting or illness. Cholecystic debris is not necessarily related to hepatobiliary disease. Echogenic bile is most commonly an incidental finding in dogs and should be interpreted in combination with clinical signs such as nausea, inappetence, cranial abdominal discomfort and/or laboratory changes such as increased ALP and/or increased Tbili. Polyps, and/or even mass cannot be definitively ruled out but are considered less likely. Power doppler could help differentiate tissue vs debris.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

- Gastric Hairball - similar density soft foreign material cannot be ruled out. Given the apparent postprandial state of this study, normal ingesta and gas, mimicking gastric foreign material, is also possible.

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Collegeway AH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Hanna

There is no ultrasonographically visible evidence of opacities in the area of the liver, however, given the very full stomach and gallbladder debris, potentially overlying gastrointestinal opacities or gallbladder opacities, maybe even nonshadowing cystoliths, could be what was seen.

INVOICE

21724

If not recently evaluated, recommendations include a general metabolic health screen, including CBC/chemistry panel, electrolytes and urinalysis and, if indicated based on urinalysis results, urine culture is recommended. If protein is present in an otherwise quiet sediment, protein quantification with a urine protein to creatinine ration is recommended.

DATE

3/20/23

Given this patients reported pain, and lack of definitive evidence for a source of intraabdominal pain, further evaluation for possible cervical, spinal and/or orthopedic pain is recommended.



PATIENT

Fiji Jarvis

Finally, especially if gastrointestinal signs, such as decreased appetite or vomiting, are present, recheck fasted imaging of the stomach and GI tract is recommended to help more definitively differentiate normal gastric ingesta and gas vs foreign material.

SPECIES

Canine

BREED

Toy Poodle

SEX

Spayed Female

AGE

10 Years

WEIGHT

2.74 kg

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Collegeway AH

REFERRING VET

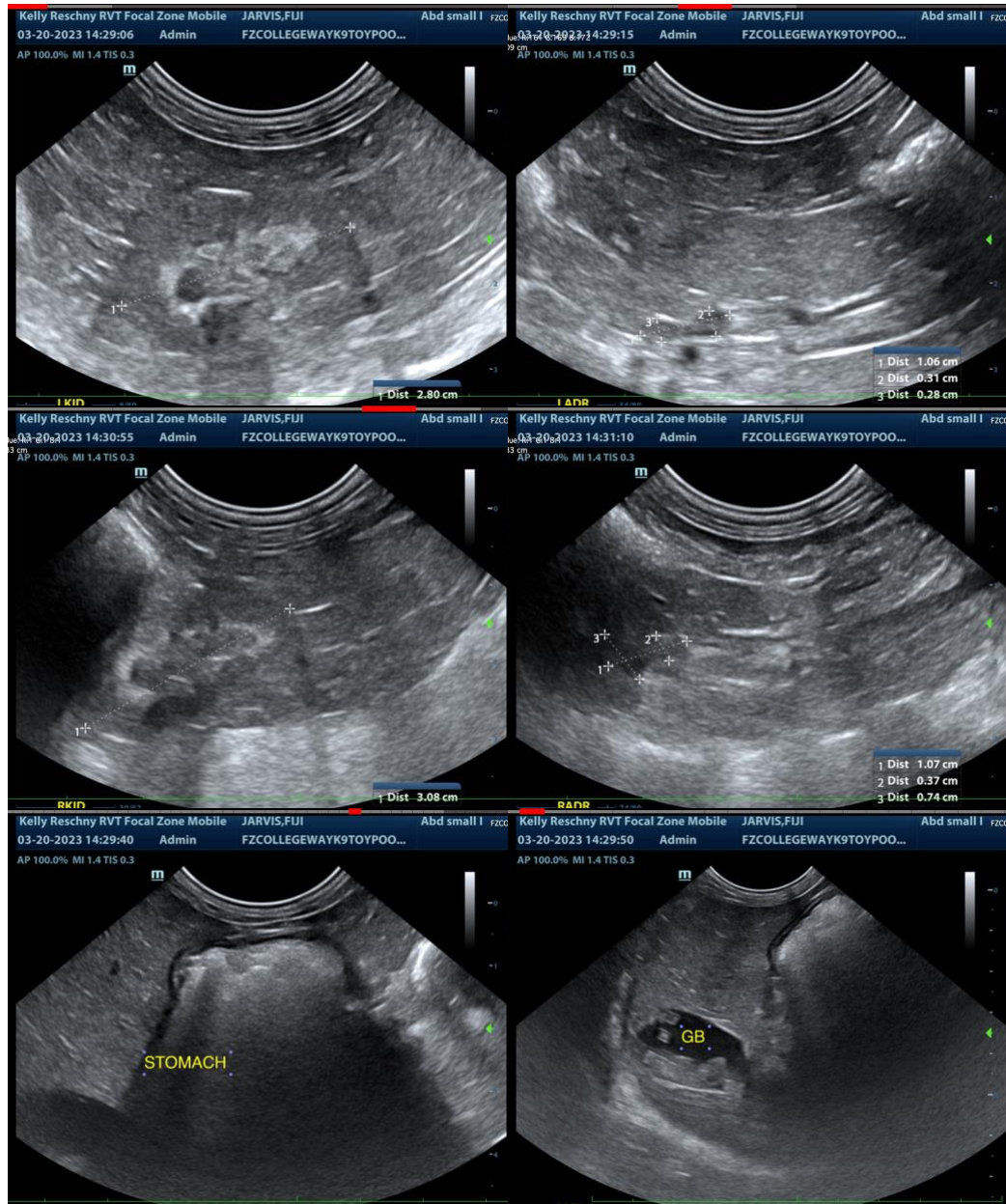
Dr. Hanna

INVOICE

21724

DATE

3/20/23





PATIENT

Fiji Jarvis

SPECIES

Canine

BREED

Toy Poodle

SEX

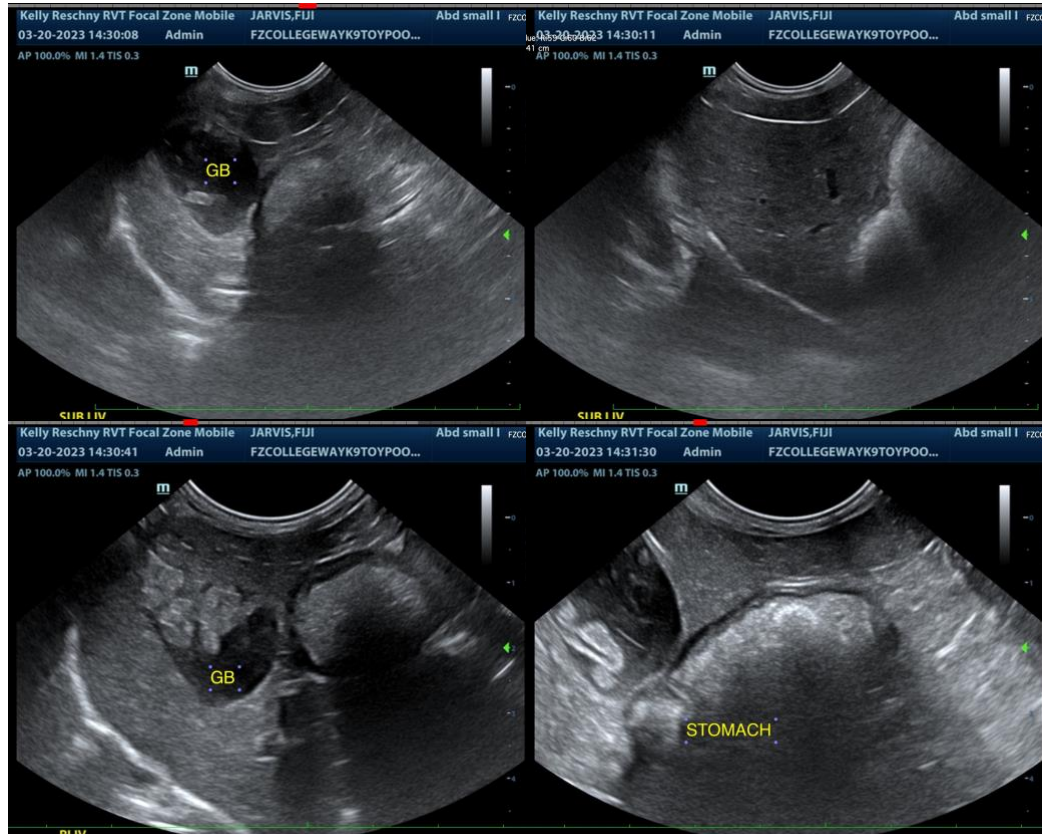
Spayed Female

AGE

10 Years

WEIGHT

2.74 kg



INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Collegeway AH

REFERRING VET

Dr. Hanna

INVOICE

21724

DATE

3/20/23

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