



PATIENT

PRESENTING CLINICAL SIGNS

Max Martinez

History: gastroenteritis, suspect pancreatitis , febrile , lethargy IVDD

SPECIES

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

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.

French Bulldog

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

SEX

Left kidney is normal is size (5.0 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.

Neutered Male

AGE

Right kidney is normal is size (5.6 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.

1 Year

Adrenal Glands

WEIGHT

Left adrenal gland is normal in size (0.45 cm at cranial pole and 0.64 cm at caudal pole), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

32.5 Pounds

Right adrenal gland is normal in size (0.63 cm), 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

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.

REFERRING VET

Gastrointestinal

Dr. Maniar

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.

INVOICE

16349

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.

DATE

6/27/22



PATIENT

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

Max Martinez

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

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

French Bulldog

ULTRASONOGRAPHIC FINDINGS

SEX

- Unremarkable/normal abdomen without a visible cause of this patients fever or gastrointestinal signs

Neutered Male

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

Both gastrointestinal disease and pancreatitis can be present with minimal to no ultrasound changes, therefore, given the gastrointestinal signs, if pancreatitis is a suspicion 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.

1 Year

WEIGHT

Given the fever, in combination with suspected IVDD, other differentials for possible back pain, including discospondylitis could also be considered.

32.5 Pounds

INTERPRETED BY

Recommendations include a CBC chemistry panel and electrolytes, if not recently evaluated.

Beth Johnson, DVM
DACVIM

Urinalysis and, if indicated based on urinalysis results, urine culture are recommended. If protein is present in an otherwise quiet sediment, protein quantification with a urine protein to creatinine ration is recommended.

IMAGING PERFORMED BY

In the meantime, supportive medical management of the gastrointestinal signs and fever with IV fluids, antiemetics, gastroprotectants, pain management (as indicated) +/- antibiotics could be considered. If fever and/or back pain don't resolve, further advanced imaging, such as MRI of the painful area can be considered.

Jenn

HOSPITAL NAME

Rockaway AH

REFERRING VET

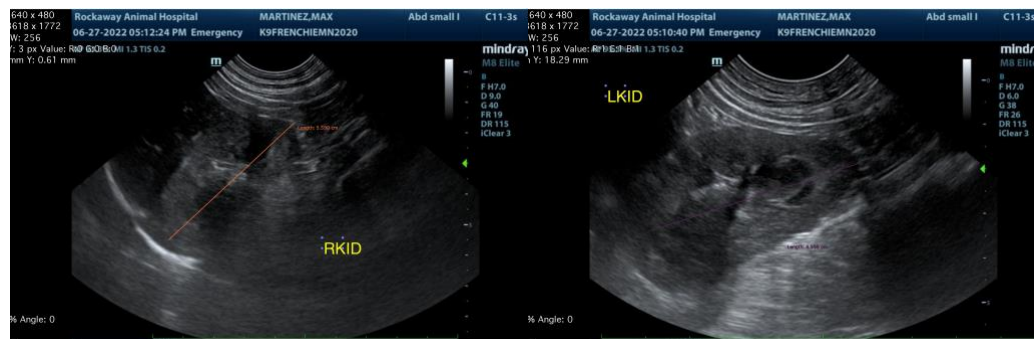
Dr. Maniar

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SPECIES

Canine

BREED

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SEX

Neutered Male

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1 Year

WEIGHT

32.5 Pounds

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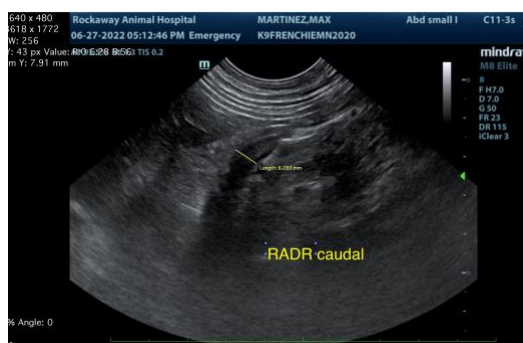
Dr. Maniar

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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

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