PATIENT

Sebastian Fraser

SPECIES

Canine

BREED

Wolfhound X

SEX

Intact Male

AGE

11 Months

WEIGHT

100 Pounds

INTERPRETED BY

Brittany Sinclair DVM, DACVECC

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Beatties PH Ancaster

REFERRING VET

Dr. Amrinder

INVOICE

36822

DATE

12/9/25

PRESENTING CLINICAL SIGNS

History: Palpation reveals generalized abdominal tenderness and discomfort. The patient reacts with mild pain responses to palpation across the abdomen. No specific area of pain was isolated. Increased borborygmi were audible. Concern for possible FB One testicle is descended in the scrotum (left). The other testicle is not palpable in the scrotum or inguinal canals (cryptorchid).

Abnormal PE/Chem/CBC/UA Results: rad report: Stomach: There is soft tissue opacity material in the gastric lumen. • Small intestine: There is gas in the descending duodenum. There is gas and fluid in the small intestines without distention seen. • Cecum: There is gas and heterogenous material in the cecum. • Colon: There is gas and poorly formed fecal material in the colon. • Liver: The liver is normal for size. • Spleen: The spleen is large. • Kidneys: The left kidney is normal. The right is not well seen. • Urinary bladder: The bladder is moderately distended. • Serosal detail: Peritoneal detail is good.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and visible pelvic urethra were of normal thickness. The ureters were not visible which is normal. There was normal wall layering with no masses, uroliths or abnormal thickening visualized. Urine was anechoic. No evidence of inflammatory or neoplastic changes were noted.

The kidneys were both normal size and structure, with smooth capsule and normal corticomedullary definition and ratio (cortex 1/3 of medulla). Medullary structure differed distinctly from that of the cortex. No evidence of pelvic dilation was present. The right kidney measured 7.14 cm in length. The left kidney measured 7.97 cm in length.

Adrenal Glands

The left adrenal gland was normal in shape and position but measures small for this breed and size of dog. The left adrenal gland measured 2.27 cm in length and 0.33 cm at the cranial pole and 0.38 cm at the caudal pole.

The right adrenal gland was not distinctly visualized, but the area was normal.

Spleen

The spleen was normal with a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma and smooth capsule, with normal splenic vasculature with no signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarct changes were noted.

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. Gallbladder is moderately distended with normal wall thickness and anechoic contents. Common bile duct is non-distended and tapers normally.

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Gastrointestinal

The stomach contains a moderate amount of hyperechoic nonshadowing material, most consistent with ingesta. There was no visible shadowing material suggestive of foreign body. It measures at a normal thickness with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate and there is no impression of reduced peristaltic activity. No masses or focal lesions were observed.

The small intestines were diffusely prominent with a thickened/ropey appearance but did not measure particularly thickened, though muscularis layer was prominent throughout. There were no specific masses or lesions. There was no distention and no visible foreign material.

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

Pancreas

The base and limbs of the pancreas were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour and parenchyma were normal. No overt evidence of active inflammatory or neoplastic disease was noted.

Lymph Nodes

No clinically significant lymphadenopathy or abnormalities noted.

Other

There was a testicle visible cranial to the urinary bladder that appears to be intraabdominal and was reportedly near the inguinal region.

ULTRASONOGRAPHIC FINDINGS

- Ropey prominent small intestinal loops
- Retained right testicle

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Small intestinal changes together with clinical signs are most consistent with enteritis. A chronic enteropathy is possible, but less likely given the patient's young age. There is no impression of foreign material on abdominal ultrasound. If GI signs are persistent, abdominal explore could be considered for both removal of the retained testicle and GI biopsies at the same time.

The Focal Zone
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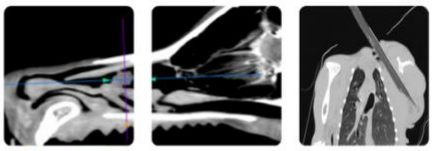

Teleradiology
Educational Teleconsultation Services™

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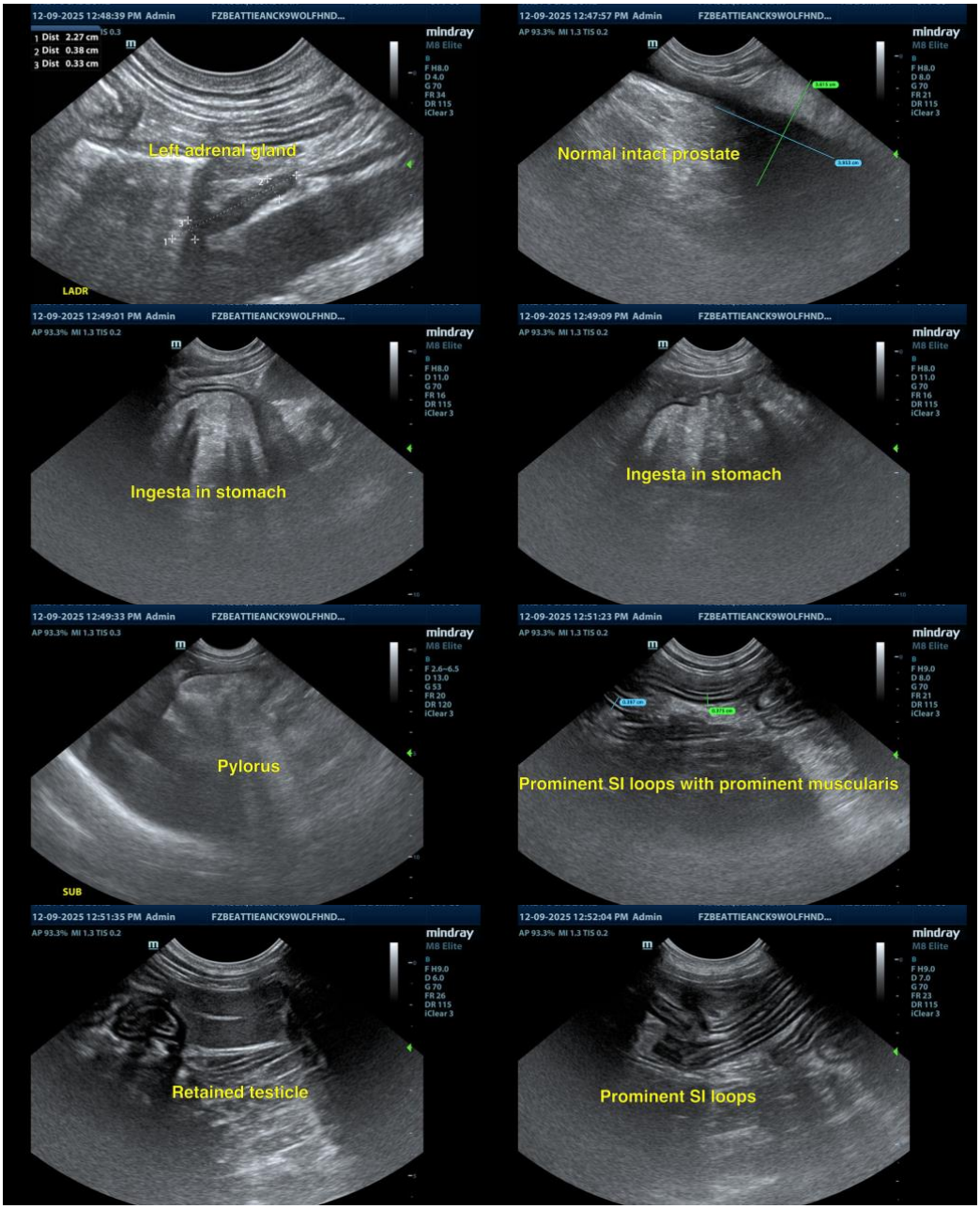
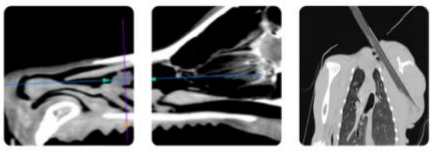


The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Dr Brittany Sinclair, BVSc(hons), DACVECC



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