



PATIENT

Oreo Scroggins

SPECIES

Canine

BREED

American Pit Bull
Terrier

SEX

Intact Female

AGE

12 Years

WEIGHT

70.2 lbs

INTERPRETED BY

Dr Brittany Sinclair,
BVSc(hons),
DACVECC

IMAGING PERFORMED BY

Gabriel Ferrer, DVM

HOSPITAL NAME

Pulse: Pet Ultrasound

REFERRING VET

Dr. Lionel Ricci

INVOICE

73378

DATE

3/4/26

PRESENTING CLINICAL SIGNS

Px presented as a referral for an abdominal ultrasound due to mass effect being observed on radiographs. Owner originally took Px to rDVM around 2 weeks ago due to Hx of weight loss, lethargy, and vomiting. Bloodwork showed leukocytosis and a slight anemia. Hookworms were observed on fecal test and Px was dewormed. On the follow-up visit Px's anemia had resolved, but Px was still vomiting to radiographs were performed, that's when the mass effect was observed on the mid abdomen and the referral was made for an abdominal ultrasound with a possible FNA. FNA was conducted on a significantly enlarged mesenteric lymph node and on the intestinal mass, originally visualized on the radiographs. FNA results are currently pending.

Abnormal PE/Chem/CBC/UA Results: rDVM record, Bloodwork, and Radiographs attached below for your reference

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 prostate is uniformly moderately enlarged and hyperechoic, measuring approximately 6.62 cm x 5.06 cm. No mineralization, evidence of masses or fluid accumulations consistent with cyst or abscess visualized.

The kidneys were both normal size and structure, with smooth capsule and normal corticomedullary definition and ratio. Medullary structure differed distinctly from that of the cortex. No evidence of pelvic dilation was present. Right kidney measured 7.3 cm. Left kidney measured 6.95 cm.

Adrenal Glands

Both adrenal glands were visualized and recognized as having normal shape, size, position and echogenicity for this breed and age. The visible phrenic vasculature was unremarkable. Right measures 2.85 cm in length x 0.60 cm at the caudal pole and 0.51 cm at the cranial pole. Left measures 2.68 cm in length x 0.67 cm at the caudal pole and 0.55 cm at the cranial pole.

Spleen

The spleen was subjectively normal in size with generally smooth parenchyma. There are multiple hypoechoic nodules noted throughout the spleen, one of which has a hyperechoic center. One measures 0.97 cm x 0.46 cm. Another hypoechoic nodule in the head of the spleen measures approximately 0.53 cm x 0.72 cm.

Liver

The liver is subjectively normal in size with normal contours and structure. There is age 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.

Gall bladder 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 small volume of fluid. It measures at a normal thickness of with some variability due to the presence of rugal folds. The distinction of the gastric wall layers is adequate. No masses or focal lesions were observed.

The majority of the visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is generally normal. Bowel loops generally follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. Within the jejunum, there is a very large, complex mass effect measuring approximately 8.0 cm x 6.0 cm with surrounding lymphadenopathy.

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 visible pancreas was observed to be largely isoechoic to surrounding omental fat.

Free Abdomen

Mesenteric lymph nodes are significantly enlarged, with the largest measuring 5.61 cm x 2.77 cm. No free fluid noted.

Both testicles are subjectively normal in size and shape with homogenous parenchyma free of masses and normal median raphe visualized.

ULTRASONOGRAPHIC FINDINGS

- Large jejunal mass with surrounding mesenteric lymphadenopathy.
- Multiple splenic nodules.
- Prostatomegaly – consistent with intact status.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The lesion within the jejunum is most consistent with a jejunal mass. It is somewhat unusual in appearance, as it does not appear to be symmetrically circumferential. It may represent a peri intestinal mass or an abscess within the wall of the intestine, though a discrete fluid pocket as is normally seen with abscesses was not definitively visualized. FNA of the mass and lymph nodes was an appropriate next diagnostic step. Pending cytology results, surgical explore with plan for resection will likely be required to alleviate clinical signs.

The clinical significance of the splenic nodules is uncertain. FNA could be attempted to further define. If surgery is pursued, splenectomy could be considered. Alternatively, serial monitoring with ultrasound could also be considered.



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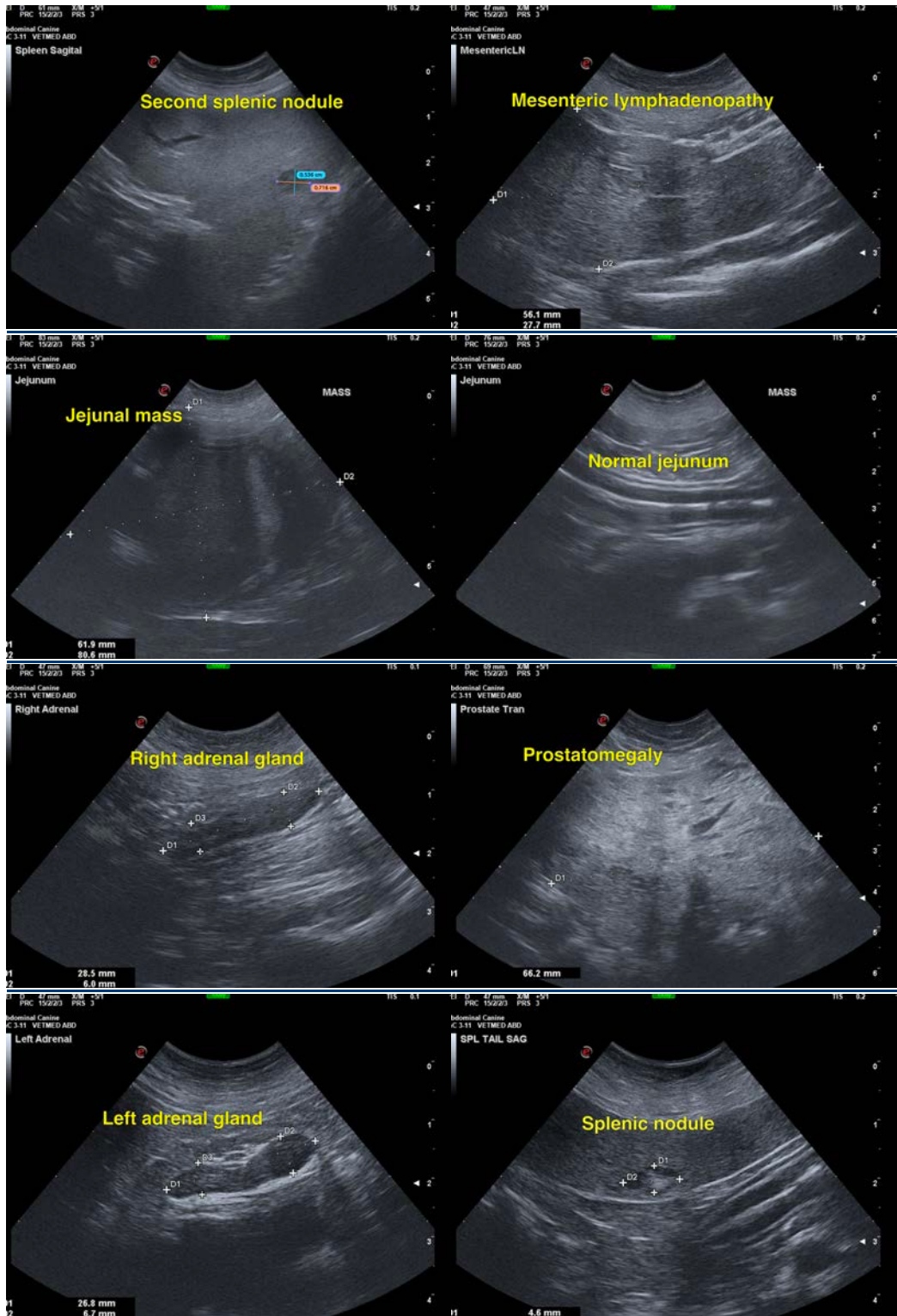
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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