

PATIENT

Sweet Pea Brazil

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

14 Years

WEIGHT

16.6 pounds

INTERPRETED BY

Kim Radway, DVM,
DABVP (Canine/
Feline)

IMAGING PERFORMED BY

Dr. Vincent Tavella

HOSPITAL NAME

Williamsburg
Veterinary Clinic

REFERRING VET

Dr. Vincent Tavella

INVOICE

15039

DATE

04/13/26

PRESENTING CLINICAL SIGNS

1 week history of a distended/hard abdomen. No vomiting/diarrhea. Normal appetite and thirst. Eating a lot of dirt and grass. Grade 2/6 systolic heart murmur. Normal VHS in February prior to Dental COHAT under anesthesia - no complications under anesthesia

Abnormal PE/Chem/CBC/UA Results: Chem/CBC from February wnl. Right lateral radiograph taken after ultrasound study today to confirm nature of gastric contents.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone and pelvic urethra presented with normal wall thicknesses with anechoic urine and normal tone. The urine had an anechoic background but contained a small amount of hyperechoic gravity-dependent cells. No uroliths or masses were noted in the lumen of the bladder. No evidence of inflammatory or neoplastic changes were noted. The ureters were not visible and considered normal.

The **kidneys** revealed normal size, corticomedullary definition and ratio with the cortex being 1/3 of medulla. Medullary echogenicity differed distinctly from that of the cortex and no evidence of dilation could be seen. The renal pelvic diverticuli were distinct in character. The capsules were acceptably uniform without dramatic irregularities. The left kidney measured 4.42 cm in length. The right kidney measured 4.95 cm in length.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were acceptable. The left adrenal gland measured 1.4 cm x 0.42 cm and 0.45 cm. The right adrenal gland measured 1.59 cm x 0.64 cm and 0.66 cm.

Spleen

The **spleen** presented with a smooth homogeneous parenchyma hyperechoic to liver and kidney. The capsule was smooth and linear in its contour. The splenic vasculature demonstrated normal volume without signs of congestion, significant contraction, or thrombosis.

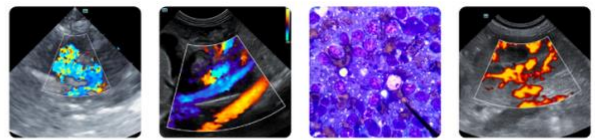
Liver

The **liver** was found to be mildly heterogeneous in the parenchyma, but without evidence of defined or discrete nodules. The overall liver size remained normal and the capsular contour was smooth and linear.

The gallbladder presented with anechoic contents and a thin hyperechoic wall. The cystic and common bile ducts were normal. No periportal lymphadenopathy was evident.

Gastrointestinal

The **gastrointestinal tract** revealed intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. There was a small amount of gas in the lumen of the stomach. No obstructive or overt infiltrative disease was noted. No abnormal lymphatic activity was



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noted, and the abdomen was free of gastrointestinal masses and pathological fluid. The stomach contained a moderate volume of food and ingesta within the lumen. There was no evidence of distal shadowing, foreign bodies, or gastric masses. There was a moderate amount of hyperechoic gas and ingesta throughout the small intestinal tract.

Pancreas

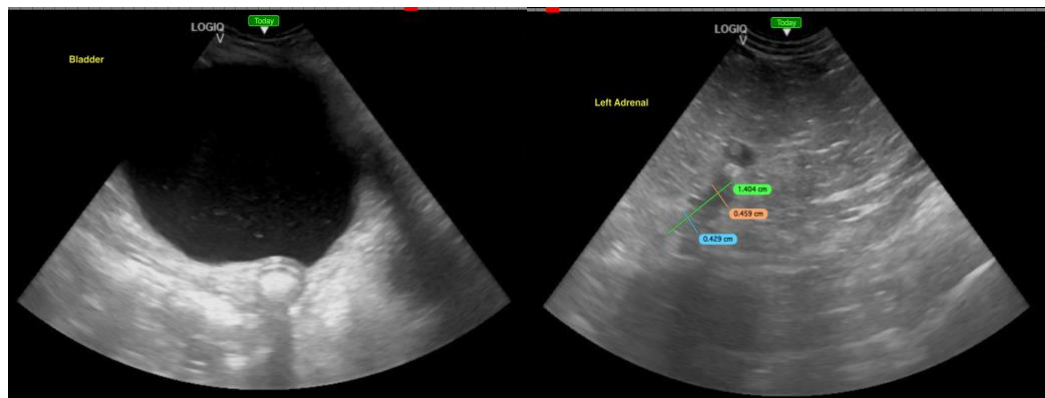
The right and left limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic capsular contour was acceptably normal. No overt evidence of active inflammatory or neoplastic disease was noted.

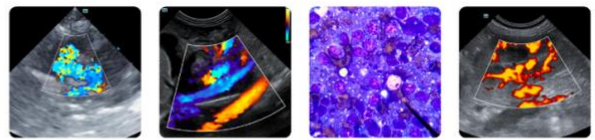
ULTRASONOGRAPHIC FINDINGS

- Hyperechoic food and ingesta within the stomach and intestinal tract.
- Small amount of hyperechoic cells suspended within the urine.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

It is recommended to perform a cystocentesis urine sample as a screening test to rule out the presence of any underlying urine tract infection. If there's presence of abnormal cells, then a urine culture should be considered. The gastric contents were consistent with food and ingesta with no evidence of a foreign body pattern or gastric mass. There was no evidence that the abdominal distension noted on exam is secondary to free abdominal effusion or abdominal masses. This patient should symptomatically be fed an intestinal low-fat diet with careful monitoring for the continuation of a good appetite over the next five to seven days. A recheck fasted abdominal x-ray or recheck abdominal ultrasound could also be considered after this patient has been fasted for 12 to 16 hours. Daily probiotics can also be considered since there's a history of this patient eating dirt and grass.





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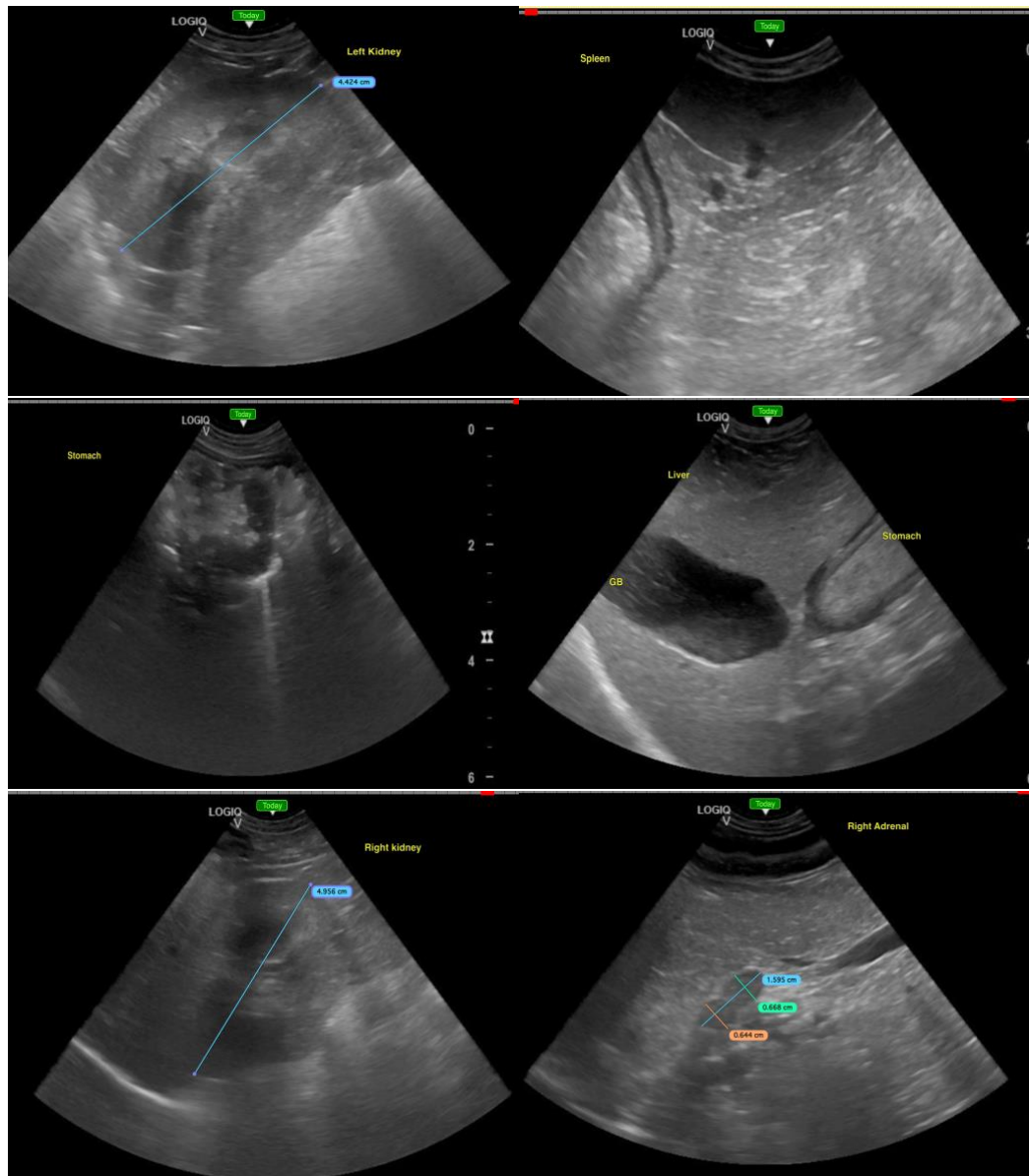
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Kim Radway, DVM, DABVP (Canine/ Feline)

info@SonoPath.com