



PATIENT PRESENTING CLINICAL SIGNS

Elsa Twelves

Elsa presented to our clinic ~ 2 months ago for vaginal discharge, Urinalysis and culture done and AB given Vaginal discharge started again couple of days ago. Concern for possible uterine stump pyometra

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Malinois

Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall, trigone, ureteral papillae and visible urethra (to a depth of 2cm) appear normal with no evidence of wall thickening, mucosal irregularities, masses or cystic calculi.

SEX

Spayed Female

The left kidney has a normal shape and size (7.74 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

AGE

2 Years

The right kidney has a normal shape and size (7.16 cm). Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

32.2 kg

INTERPRETED BY

Adrenal Glands

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

The left adrenal gland is normal in size measuring 0.76 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

IMAGING PERFORMED BY

The right adrenal gland is normal in size measuring 0.68 cm at the caudal pole. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

Kelly Reschny

Spleen

HOSPITAL NAME

The spleen is subjectively normal in size, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

Parkside AH

REFERRING VET

Liver

Dr. Zak

The liver is subjectively normal in size, and echogenicity with smooth peripheral margins. The parenchyma is homogenous echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

INVOICE

46450

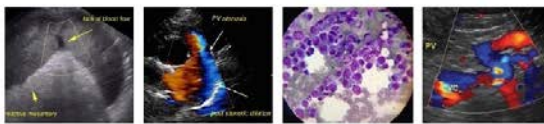
The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are mild and primarily anechoic. The cystic and common bile ducts are normal/not visible.

DATE

4/6/23

Gastrointestinal

The stomach contains moderate shadowing ingesta. It measures at a normal thickness of <0.7cm 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.



PATIENT

Elsa Twelves

Most of the visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with mild to moderate fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. Jejunum wall measures 0.36 cm. Visualized peristalsis appears appropriate. Much of the small intestine appears moderately distended with what I suspect is normal fluid, chyme, and gas.

SPECIES

Canine

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.

BREED

Malinois

Pancreas

SEX

Spayed Female

The area of the pancreas is normal and isoechoic to surrounding mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

Free Abdomen

AGE

2 Years

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

WEIGHT

32.2 kg

ULTRASONOGRAPHIC FINDINGS

- Moderate shadowing and distention of the stomach and small bowel – findings are most consistent with a nonfasted patient. Gas and fluid interfere with evaluation of some of the areas in the cranial abdomen and the region of the urinary bladder. If the patient was adequately fasted, consider such differentials as delayed gastric emptying or partial outflow tract obstruction (none observed).

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Today's scan appears relatively normal. There was a lot of mildly to moderately fluid distended small intestine in the abdomen and some of this interfered with evaluation of the urinary bladder and the caudal abdomen where a stump would be located. There is no evidence of inflammation in this area. For stump pyometra to be possible, this patient would need to be under the influence of estrogen. This typically is due to an ovarian remnant.

IMAGING

PERFORMED BY

Kelly Reschny

You could consider measuring antimullerian hormone, looking for evidence of retained gonadal tissue, which would increase the suspicion significantly. Vaginitis can be a challenging and frustrating condition to treat/manage. You could consider a cystoscopy to evaluate the vaginal vault, looking for the source of the inflammation, looking for any foreign material, evaluating the distal urogenital anatomy for any irregularities, etc. Chronic probiotic therapy can be helpful, as well as many other medical therapies, which are typically determined on a somewhat trial by error basis. Systemic antibiotics seldom result in a "cure".

HOSPITAL NAME

Parkside AH

REFERRING VET

Dr. Zak

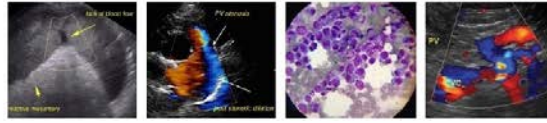
INVOICE

46450

If this appears to be progressing and there is evidence of retained ovarian tissue, consider reevaluation with ultrasound under heavy sedation with a fasted patient.

DATE

4/6/23



PATIENT

Elsa Twelves

SPECIES

Canine

BREED

Malinois

SEX

Spayed Female

AGE

2 Years

WEIGHT

32.2 kg

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

Parkside AH

REFERRING VET

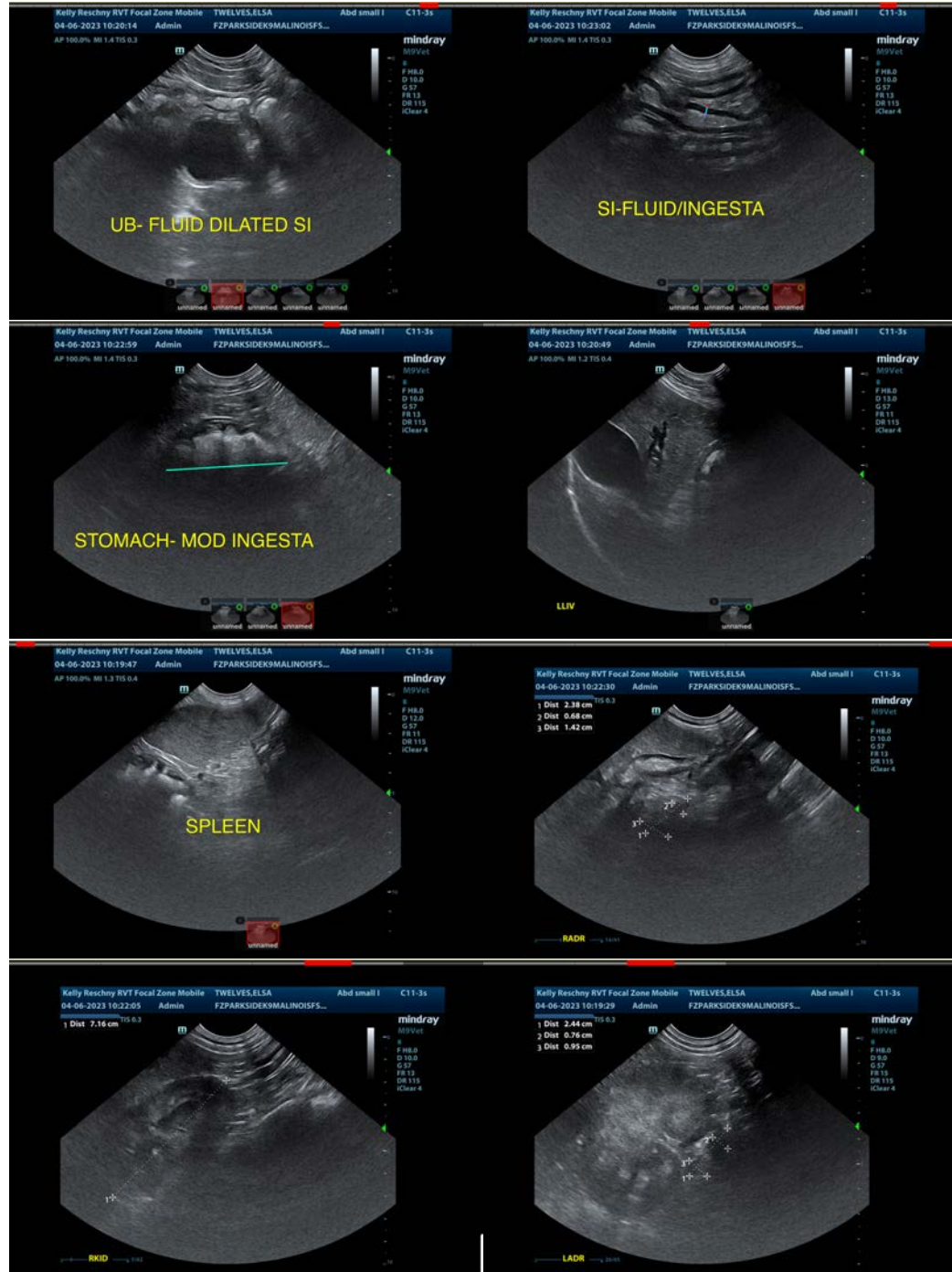
Dr. Zak

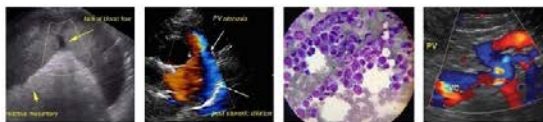
INVOICE

46450

DATE

4/6/23





PATIENT

Elsa Twelves

SPECIES

Canine

BREED

Malinois

SEX

Spayed Female

AGE

2 Years

WEIGHT

32.2 kg



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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

kathleen.sennello@sonopath.com

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

Parkside AH

REFERRING VET

Dr. Zak

INVOICE

46450

DATE

4/6/23