

**DATE PRESENTING CLINICAL SIGNS**

3/26/22 History of vomiting was at the ER on 03/13 and treated with supportive care. Vomiting resolved but started back again 2 days ago.

PATIENT O states Zara likes getting into things she is not supposed to. O also states she has had no diarrhea. Pet has been lethargic and laying around. 4-5 episodes of vomiting yesterday.

Zara Singh

SPECIES

Canine

Current Medications: None.
Lab Results: Pending.
Date of Previous IntraPet Ultrasound:
Sedation: Patient sedated with Torbugesic.
Stat Report: Not requested.

BREED

Labrador

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The urinary bladder is adequately filled. The wall is smooth and regular. No abnormalities are present with the trigone or proximal urethra, and there is no evidence of sediment, cystoliths, polyps or a mass.

SEX

Spayed Female

The left kidney is within normal limits in size for the patient's weight (5.95 cm). The capsule is smooth. Its overall architecture, including the definition of the cortico-medullary junction, are preserved. There are no signs of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

AGE

12/26/20

The right kidney is within normal limits in size for the patient's weight (4.98 cm). The capsule is smooth. Its overall architecture, including the definition of the cortico-medullary junction, are preserved. There are no signs of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

WEIGHT

25.31 Pounds

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

Adrenal Glands

The left adrenal gland measures 0.60 cm at the cranial pole, 0.40 cm at the caudal pole, and 2.47 cm in length. No abnormalities are noted in the gland's shape, overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

The right adrenal gland measures 0.56 cm at the cranial pole, 0.62 cm at the caudal pole, and 2.10 cm in length. The caudal pole is slightly rounded, but there is no evidence of a mass. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

IMAGING PERFORMED BY

Andi Parkinson RDMS

Spleen

The spleen is within normal limits in size, architecture, echotexture, and echogenicity. The capsule is smooth. No abnormalities are observed with its vasculature, i.e. congestion and thrombi are not identified.

HOSPITAL NAME

Banfield Towson

Liver

There are no obvious signs of hepatomegaly and its borders are smooth and sharp. The liver's echotexture is homogeneous and it is within normal limits in echogenicity. No abnormalities are observed with the hepatic vessels. The hepatic lymph nodes were unremarkable.

REFERRING VET

Dr. Elsie

The gall bladder wall appears to be within normal limits in thickness and echogenicity. There is no evidence of echogenic material (sludge) within the GB or edema surrounding it. The cystic and common bile ducts are not dilated or tortuous.

INVOICE

36484

Gastrointestinal

The gastric wall and pylorus are normal in thickness. There is no loss of definition of the normal architecture of the layers of the stomach wall. Food is still present within the lumen, which may be due to delayed gastric emptying if Zara was fasted.

The small intestinal wall thickness is within normal limits and there is no evidence of dilation. The definition of the wall layers is preserved. The mesentery surrounding some of the intestines is hyperechoic in the region of the spleen. The colonic wall is not thickened (0.19 cm), but at the high end of the normal reference range. Mural detail is preserved. There are no obvious signs of a mass, foreign body, infiltrative disease or an obstruction.

Pancreas

Within normal limits regarding echogenicity and echotexture. There is no evidence of hyperechogenicity of the mesenteric fat; active pancreatitis is considered unlikely.

Other

A colonic lymph node is observed, measuring 0.61 cm in diameter x 1.3 cm in length. It is within normal limits in terms of echogenicity and echotexture, however, the surrounding mesentery is hyperechoic, which is suggestive of inflammation and mild reactive hyperplasia.

Two lymph nodes are visualized in the region of the stomach. The mesentery surrounding them is hyperechoic. Both lymph nodes are mildly hypoechoic, but not severely enlarged. One of them is 0.46 cm in diameter x 0.78 cm in length. The other is 0.62 cm in diameter x 1.6 cm in length. They are also suggestive of mild reactive hyperplasia.

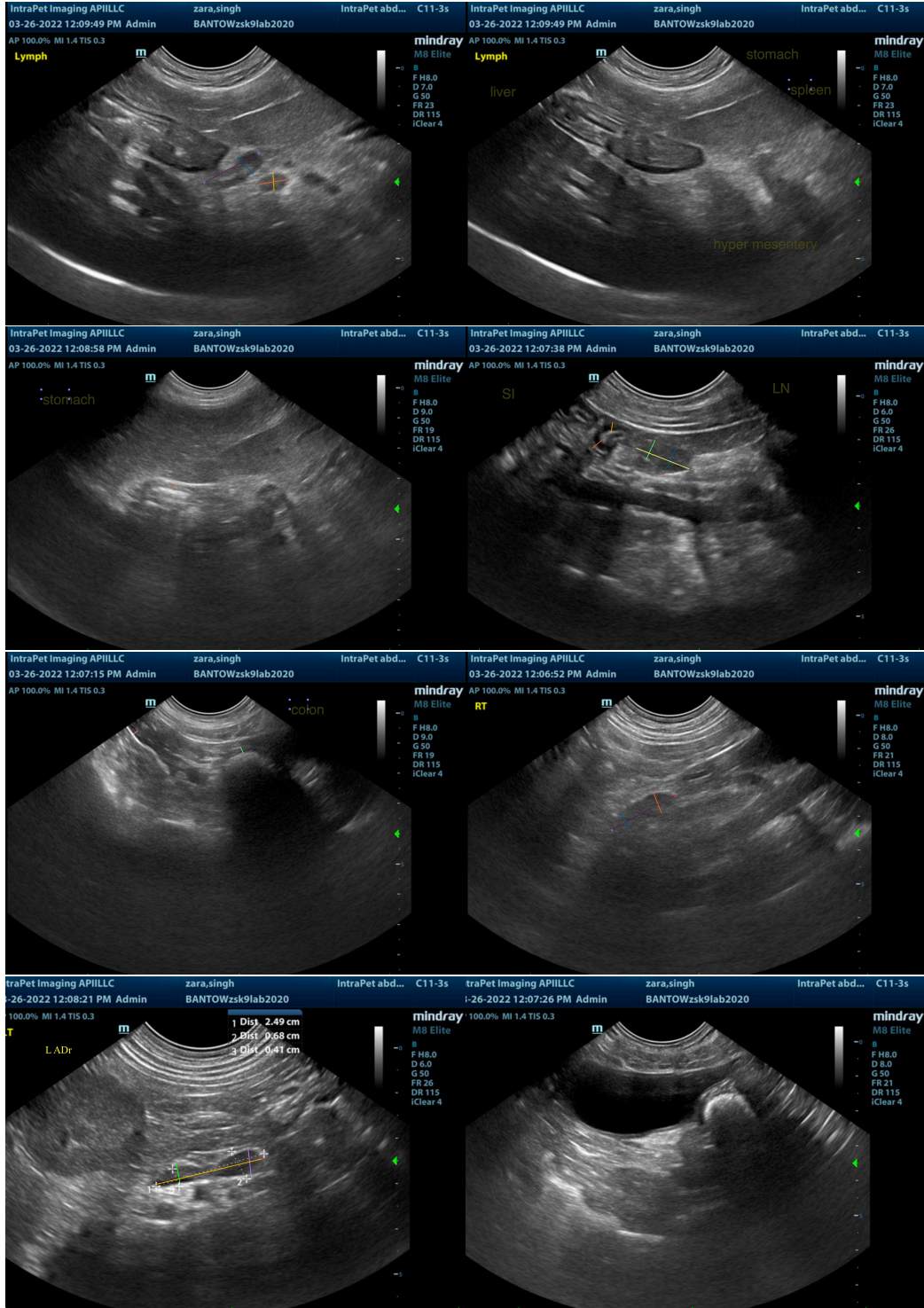
Abdominal effusion is not visualized.

ULTRASONOGRAPHIC FINDINGS

- There is no obvious sign of a foreign body or obstruction. However, there are signs of recent inflammation, given the prominent colonic lymph node and surrounding hyperechoic mesentery, as well as the prominent lymph nodes and hyperechoic mesentery in the region of the stomach. These signs may be suggestive of a foreign body that has passed.
- Delayed gastric emptying may be present depending on when Zara last ate, which may be due to a gastritis secondary to ingestion of a foreign body.
- Signs of gastritis may also be secondary to vomiting.
- If Zara tends to suffer from PICA, underlying inflammatory bowel disease may be an issue.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

A hypoallergenic diet, whether it be a novel protein or hydrolyzed diet, is suggested to help determine whether Zara is suffering from underlying inflammatory bowel disease. The diet should, ideally be, easily digestible diet.



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.

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