



PATIENT

Shaggy Farias Torres

SPECIES

Canine

BREED

Mix Terrier

SEX

Neutered male

AGE

3 years

WEIGHT

31.8 lbs

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

IMAGING PERFORMED BY

Dr. G Ferrer

HOSPITAL NAME

Paseos VC

REFERRING VET

Dr. Biello

INVOICE

30271

DATE

5/9/22

PRESENTING CLINICAL SIGNS

Presented as a referral for an abdominal ultrasound. Pt presented to rDVM for evaluation of decrease appetite and losing body weight for the past month. Pt is much less active and WBC in BW has remained elevated despite antimicrobial therapy with metronidazole and ceftriaxone. No diarrhea, but pt has been having sporadic vomiting several hrs after eating. Barium study was done yesterday and showed some abnormalities in the small intestine (some constriction, dilatation with stricture with residual striking of barium in a segment of the proximal small intestine). Almost all the barium reached the colon.

Abnormal PE/Chem/CBC/UA Results: PE: Pain on right side cranial abdomen. T:101.9F CBC: WBC: 29.89 (6-17) Neu 22 (3-12) Lym: 6 (1-5) CHEM: TP: 9.8 (5.4-8.2) Globulin: 7.2 (2.3-5.3)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is inadequately filled, thereby affecting the ability to accurately measure wall thickness. The wall is smooth and regular. No abnormalities are noted with the trigone. A longitudinal view of the proximal urethra is not available. A trivial amount of sediment is noted. There is no evidence of cystoliths, polyps or a mass. One of the ureteral papillae is visualized and is unremarkable.

Prostate

The prostate is homogenous, however, it appears mildly enlarged for a neutered male; 1.59 cm in diameter x 1.73 cm in length.

Kidneys

The **left** kidney measures 6.75 cm. The capsule is smooth and its overall architecture, including the definition of the cortico-medullary junction, are preserved. Very mild mineralizations of the diverticulae and pelvis are present, without evidence of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

The **right** kidney measures at least 5.60 cm. The capsule is smooth and its overall architecture, including the definition of the cortico-medullary junction, are preserved. Very mild mineralizations of the diverticulae and pelvis are present, without evidence of nephroliths or pyelectasia. The surrounding mesentery is not hyperechoic.

Aortic bifurcation/trifurcation

No abnormalities observed.

Adrenal Glands

The **left** adrenal gland measures 0.26 cm at the cranial pole, 0.37 cm at the caudal pole. No abnormalities are noted with the gland's overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.



PATIENT	The right adrenal gland measures 0.48 cm at the cranial pole, 0.47 cm at the caudal pole. No abnormalities are noted with the gland's overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.
Shaggy Farias Torres	
SPECIES	Spleen
Canine	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.
BREED	
Mix Terrier	
SEX	Liver
Neutered male	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. Perivascular cuffing of multiple blood vessels is observed. This may occur secondary to inflammation, fat, mineralization and fibrosis. There is no evidence of a portosystemic shunt.
AGE	
3 years	The gallbladder wall is within normal limits in echogenicity and thickness, measuring 1.03 mm. A small amount of echogenic material is present within the GB. The sludge is free-floating and mildly inspissated. The portions of the cystic and/or common bile ducts observed are not dilated or tortuous, i.e. there are no signs of an obstruction.
WEIGHT	
31.8 lbs	
INTERPRETED BY	Gastrointestinal
Lisa Carioto, DVM, DVSc, Diplomate ACVIM	A large amount of ingesta and fluid or present within the lumen of the stomach. The gastric wall is within normal limits in thickness and the wall layers are well defined. Ingesta is noted within the pylorus in addition to an abnormal gas pattern. Subjectively, the submucosa and muscularis are more prominent than usual. The mesentery surrounding the medial aspect of the stomach is moderately to moderately to severely hyperechoic.
IMAGING PERFORMED BY	
Dr. G Ferrer	A mass effect is noted in the region of the duodenum. It measures 5.4 cm in diameter x 5.8 cm in length. The mass effect appears to contain ingesta, fluid and gas. The lumen of the duodenum is filled with gas, however, the gas pattern within the lumen appears abnormal.
HOSPITAL NAME	The mass effect appears to be enveloping the duodenum, rather than arising from the duodenum. However, additional views would be required to confirm this suspicion. Subjectively, the mucosa of the duodenum is thickened.
Paseos VC	
REFERRING VET	Ingesta is present within the jejunum. Abnormally dilated loops of bowel are observed, with decreased peristalsis.
Dr. Biello	The colonic wall is not thickened and mural detail is considered normal.
INVOICE	Pancreas
30271	The pancreatic changes are not suggestive of pancreatitis.
DATE	
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PATIENT	<i>Other</i>
Shaggy Farias Torres	<i>Lymph nodes</i>
SPECIES	The left medial iliac lymph node is very mildly enlarged at 0.54 cm. It is “plump”, however, no abnormalities are observed with regard to echogenicity or echotexture.
Canine	The right medial iliac lymph node is very mildly enlarged at 0.62 cm. It is “plump”, however, no abnormalities are observed with regard to echogenicity or echotexture.
BREED	One of the mesenteric lymph nodes is mildly enlarged measuring 0.62 cm in diameter. It is “plump”, however, no abnormalities are observed with regard to echogenicity or echotexture.
Mix Terrier	A splenic lymph node is observed; it measures 0.45 cm in diameter x 0.51 cm in length. The surrounding mesentery is severely hyperechoic.
SEX	Enlarged lymph nodes are possibly present lateral to the stomach.
Neutered male	A jejunal lymph node is also enlarged, measuring 1.4 cm in diameter. It is surrounded by loops of jejunum that are filled with fluid and gas.
AGE	
3 years	<i>Abdominal effusion</i>
WEIGHT	A scant amount of anechoic fluid is visualized at the tail of the spleen and ventral to the spleen.
31.8 lbs	A small amount of free fluid is also observed in the region of the left limb of the pancreas.
INTERPRETED BY	ULTRASONOGRAPHIC FINDINGS
Lisa Carioto, DVM, DVSc, Diplomate ACVIM	<ul style="list-style-type: none"> • A mass effect involving the stomach is present and appears to be enveloping the duodenum. Decreased peristalsis is present, in addition to lymphadenomegaly and a scant amount of free fluid in the abdomen. Differential diagnoses for the lymphadenomegaly include reactive hyperplasia or infiltrative disease secondary to neoplasia or possibly granulomatous disease. An evaluation of Shaggy’s travel history is suggested, as well as the origin of his adoption. • A small amount of sludge in the gallbladder is present. This finding is most likely clinically insignificant, however, some dogs may show clinical signs of gastroesophageal reflux disease (GERD), therefore, obtaining a history regarding signs of GERD from the client is suggested. Treatment with an anti-acid, proton pump inhibitor or ursodeoxycholic acid may be required depending on the patient’s history. • The cranial pole of the left adrenal gland is considered lower than the normal reference range. The clinical significance of this finding is unknown. • The free floating sediment within the lumen of the urinary bladder is most likely composed of mucus, crystalline material and exfoliated cells. The debris is likely clinically insignificant given the lack of inflammatory changes to the bladder wall, however, findings should be correlated with clinical signs and a urinalysis. • Subjectively, the prostate appears mildly enlarged for a neutered dog.
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

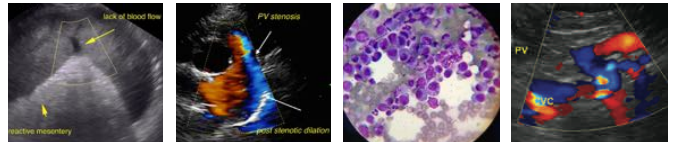
Results of the fine needle aspirate of the mass effect are pending.

Fine needle aspirates of the lymph nodes may be performed if the cytology of the mass effect is non-diagnostic.

Exploratory laparotomy of the afternoon will likely be required however a CT and angiogram may be necessary prior to the surgery.

The free floating sediment within the lumen of the urinary bladder is most likely composed of mucus, crystalline material and exfoliated cells. The debris is likely clinically insignificant given the lack of inflammatory changes to the bladder wall, however, findings should be correlated with clinical signs and a urinalysis.





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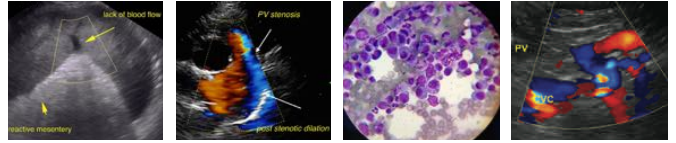
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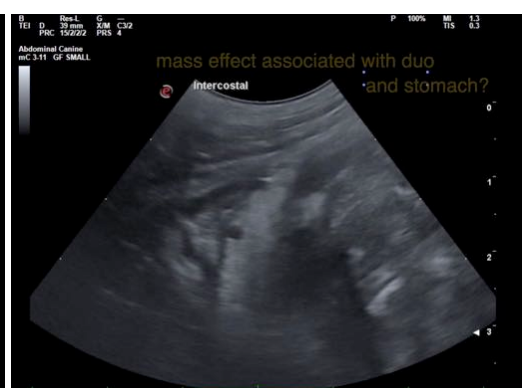
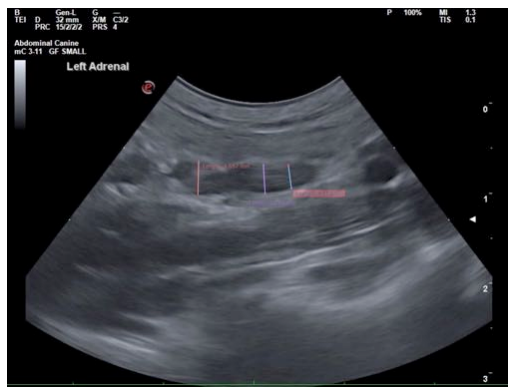
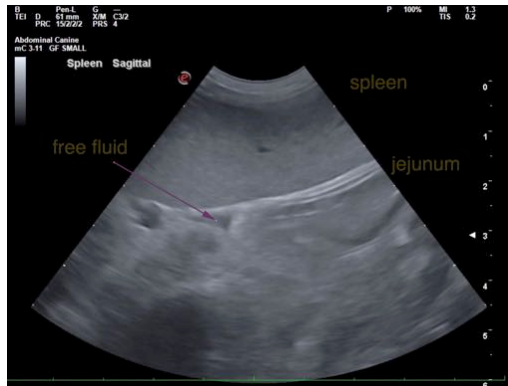
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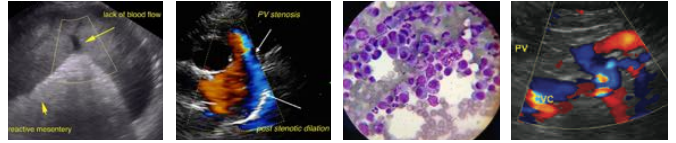
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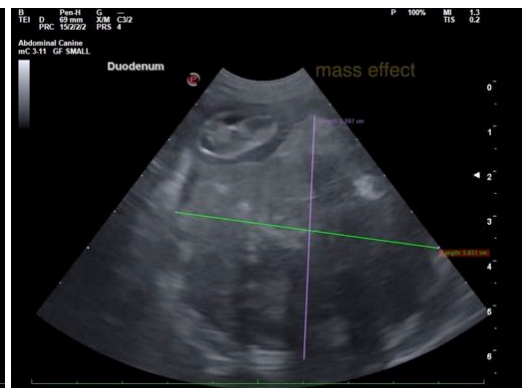
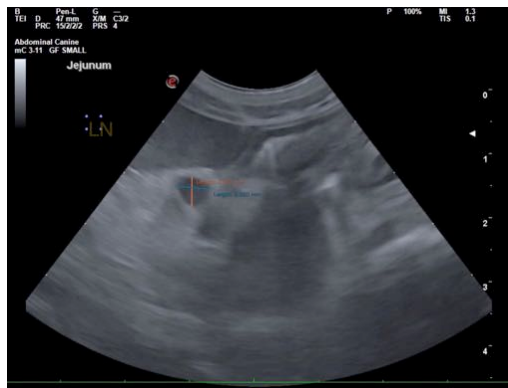
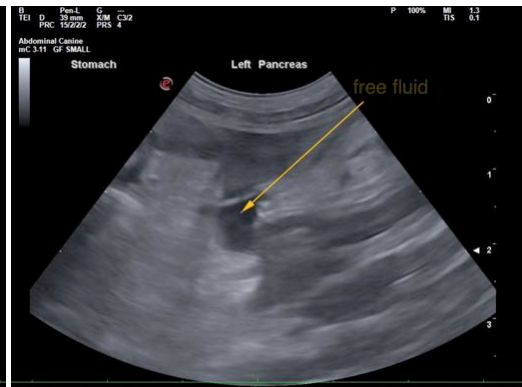
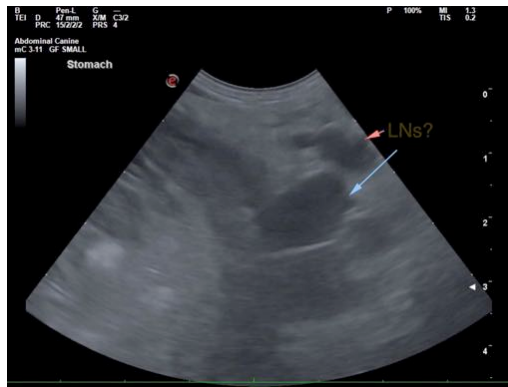
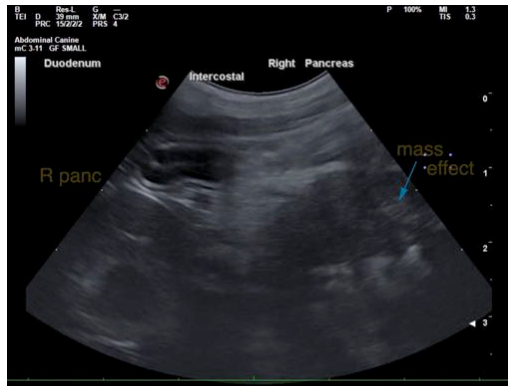
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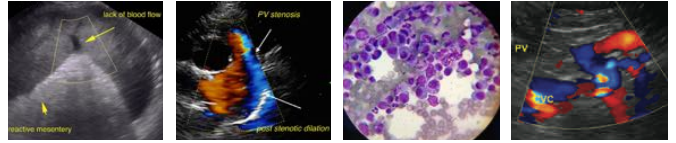
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Lisa Carioto, DVM, DVSc, Diplomate ACVIM

Lisa.Carioto@sonopath.com