



PATIENT

Shiru Kang

SPECIES

Canine

BREED

Mini Goldendoodle

SEX

Neutered Male

AGE

3 Years

WEIGHT

N/A

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Northvale Vet Clinic

REFERRING VET

Dr. Stefanie Simon

INVOICE

38091

DATE

5/27/22

PRESENTING CLINICAL SIGNS

Patient presents for orange-colored diarrhea, Was vomiting, but has since resolved. Fecal (-). Had famotadine and Cerenia.
Abnormal PE/Chem/CBC/UA Results: Bloods pending.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is well distended with anechoic contents. The wall is smooth and regular. No abnormalities are noted with the trigone or proximal urethra, and there is no evidence of sediment, cystoliths, polyps or a mass.

Prostate

The prostate is homogenous and measures 0.80 cm in diameter x 0.73 cm in length, which is within normal limits for a neutered male.

Kidneys

The **left** kidney measures 3.88 cm. The capsule is smooth and its overall architecture, including the definition of the cortico-medullary junction, are preserved. There are no signs of nephroliths or pyelectasia. Blood flow is within normal limits. The surrounding mesentery is not hyperechoic.

The **right** kidney measures 4.08 cm. The capsule is smooth and its overall architecture, including the definition of the cortico-medullary junction, are preserved. There are no signs of nephroliths or pyelectasia. Blood flow is within normal limits. The surrounding mesentery is not hyperechoic.

Aortic bifurcation/trifurcation

No abnormalities observed.

Adrenal Glands

The **left** adrenal gland measures 0.34 cm at the cranial pole, 0.30 cm at the caudal pole. No abnormalities are noted with the gland's echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

The **right** adrenal gland measures 0.39 cm at the cranial pole, 0.34 cm at the caudal pole. No abnormalities are noted with the gland's echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

Both adrenal glands are smaller and thinner than what is usually expected. Although this may be normal for Shiru, a baseline (random) cortisol is suggested to exclude hypoadrenocorticism.

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.

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. Focal lesions are not noted. No abnormalities are observed with the hepatic vessels visualized.



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The gallbladder wall is within normal limits in thickness and echogenicity. There is no evidence of echogenic material within the GB or edema surrounding it. 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.

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Gastrointestinal

A large amount of ingesta is present within the stomach (not fasted). The gastric wall is within normal limits in thickness and the wall layers are well defined. No obvious abnormalities are observed with its peristalsis.

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The small intestinal wall thickness, including the duodenum, is within normal limits and the definition of the wall layers is preserved. A mild decrease in peristalsis is suspected in the duodenum, i.e. a “to and fro” motion is observed. A moderate to large amount of gas is present in the small intestines, however, there are no signs of an obstruction or a foreign body.

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The colonic wall is not thickened and mural detail is considered normal.

Pancreas

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No abnormalities are observed with the architecture, smooth contours, echogenicity or echotexture of the pancreas. There is no evidence of hyperechogenicity of the surrounding mesentery, i.e., signs of active pancreatitis are not present.

Other

WEIGHT

N/A

Lymph nodes

No abnormalities are observed

Abdominal effusion is not visualized.

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ULTRASONOGRAPHIC FINDINGS

- **Adrenal glands:** Hypoadrenocorticism cannot be excluded
- **Gastrointestinal tract:** No obvious abnormalities are observed, i.e. there are no signs of a foreign body or an obstruction. Note, the absence of mucosal abnormalities does not exclude underlying disease, such inflammatory bowel disease or food intolerance.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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The following are suggested

- Continue current supplements/treatments
- A baseline (random) cortisol to exclude hypoadrenocorticism.
- Exclude possibility of dietary indiscretion or recent change in diet.
- Deworm with fenbendazole or Drontal Plus, even if receiving monthly heartworm prevention.
- +/- TLI, serum cobalamin, and folate if signs recur.
- Diet trial (veterinary prescription brand hypoallergenic, hydrolyzed or novel protein) if signs recur

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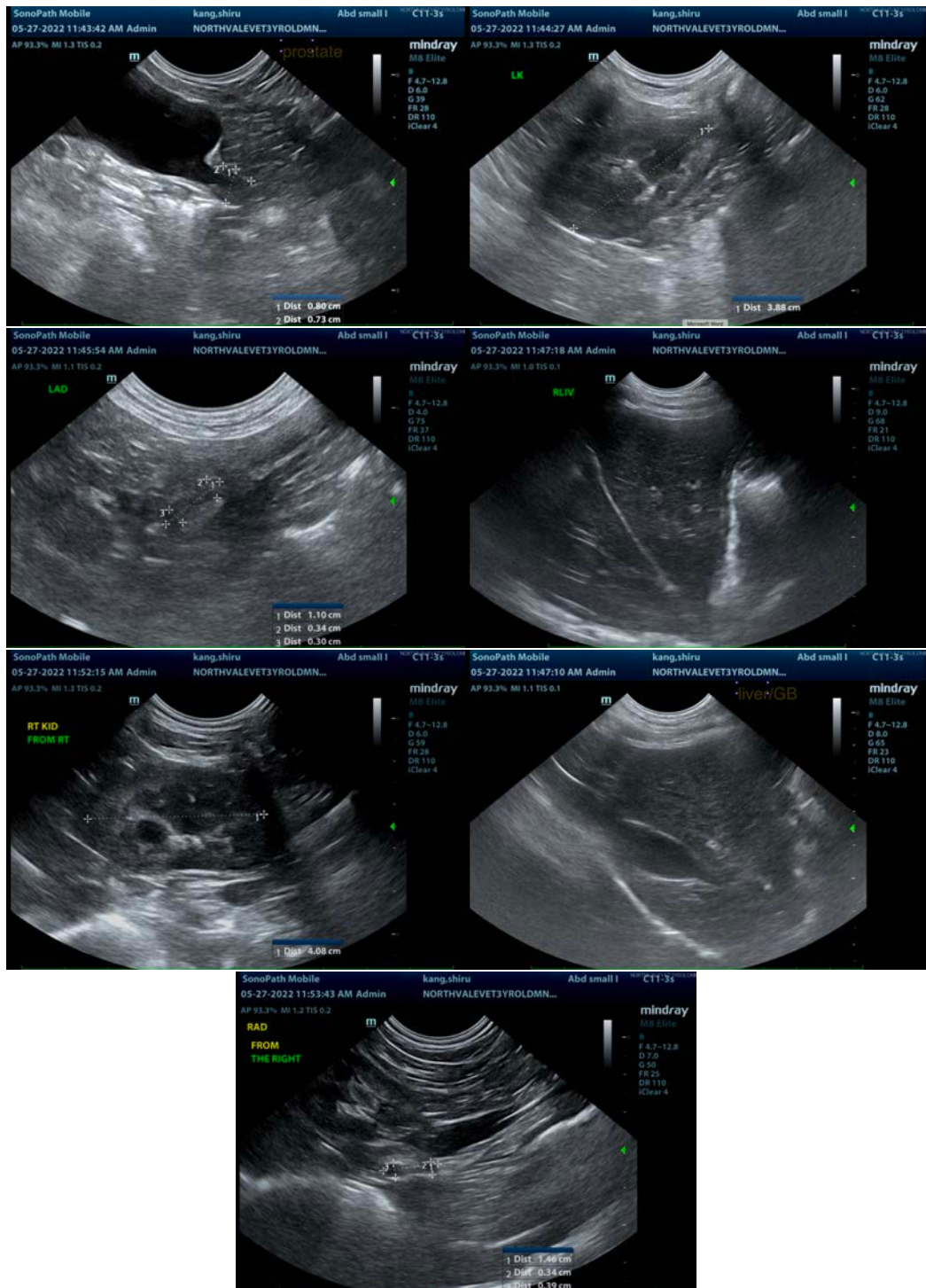
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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

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