



**PATIENT**

Enzo Medina

**PRESENTING CLINICAL SIGNS**

History: Gets into everything. Lethargic. Urinating in sleep.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Creat: 0.3, Glob:2.3, Albumin:2.5, TP: 4.8, Tbili: <0.1, RBC: 4.92, HCT: 30.9

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

Lab

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 1.0 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no uroliths or sediment. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted. Aortic trifurcation was normal.

**SEX**

Male

The prostate was sonographically unremarkable, measuring 0.8 cm diameter.

**AGE**

10 Weeks

Normal size and margination was present in the kidneys. A normal 1:3 cortex / medulla ratio and normal corticomedullary definition were maintained. The echogenicity of the cortex was similar to or slightly less than normal liver parenchyma while the medulla echogenicity was hypoechoic to the cortex with no evidence of pelvic dilation. The left kidney measured 6.1 cm in length. The right kidney measured 5.5 cm in length.

**WEIGHT**

15.2 Pounds

**Adrenal Glands**

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 1.8 cm length x 0.58 cm width at the caudal pole.

**INTERPRETED BY**

R. McKenzie Daniel,  
DVM, DABVP  
(Canine and Feline)

The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 2.0 cm length x 0.42 cm width at the caudal pole.

**IMAGING PERFORMED BY**

A.Rodriguez

**Spleen**

The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

**HOSPITAL NAME**

Foxfield VS

**Liver**

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was uniform and hypoechoic to the spleen with a mild coarse echotexture. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder was non-distended in size with thin walls and primarily anechoic luminal content. The cystic and common bile ducts were normal.

**REFERRING VET**

A.Rodriguez

**Gastrointestinal**

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The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained moderate echogenic, ingesta exhibiting areas of distal acoustic shadowing extending into the area of the pylorus. No evidence of mechanical pyloric outflow obstruction. The gastric body wall measured 0.35 cm.

**DATE**

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The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine contained echogenic, non-shadowing ingesta consistent with normal food without signs of ileus, obstruction or foreign material. Duodenum wall measured 0.35 cm.

**SPECIES**

Canine

Normal visible colon wall layers with subjective semi-formed feces were present.

**Pancreas**

**BREED**

Lab

The parenchyma of the left limb, body and right limb of the pancreas presented isoechoic to the adjacent omental fat. A normal curvilinear capsule contour of the pancreas was present. The visible pancreatic duct was normal. No signs of active inflammation or neoplastic disease was evident.

**Free Abdomen**

**SEX**

Male

Focal, mildly prominent to enlarged intermittent mesenteric node was present. The lymph node was essentially isoechoic to adjacent omentum without evidence of peripheral inflammation and maintaining a normal width: length ratio (<0.5). Small pockets of scant peritoneal free fluid were present, this is likely associated with age and considered incidental. The omentum was of uniform echogenicity.

**AGE**

10 Weeks

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

15.2 Pounds

- Moderate echogenic to shadowing gastric ingesta
- Segmental small bowel digesta/chyme, no overt evidence of mechanical obstruction
- Intermittent minor mesenteric lymphadenopathy- reactive hyperplasia or immunological immaturity likely

**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Aside from the presence of gastric and segmental small intestinal ingesta and chyme, no overt evidence of significant visceral pathology. Specifically, the gastric ingesta may correlate with recent meal ingestion, however, some degree of gastric or gastrointestinal hypomotility may be present if documented NPO. The possibility of intermixed hair, fabric cloth or similar material in the stomach cannot be excluded.

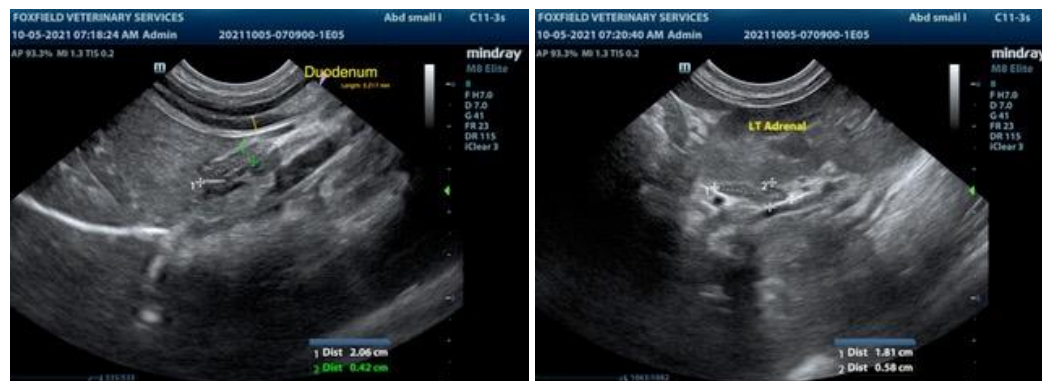
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Ideally, hospitalization with supportive care and monitoring of normal gastric emptying over the next 12-24 hours is suggested. No overt evidence of lower urinary tract pathology.

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**SPECIES**

Canine

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**SEX**

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**AGE**

10 Weeks

**WEIGHT**

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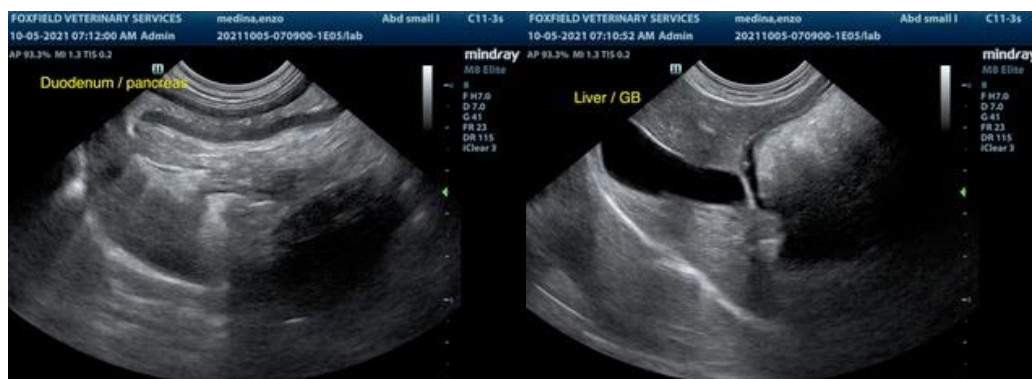
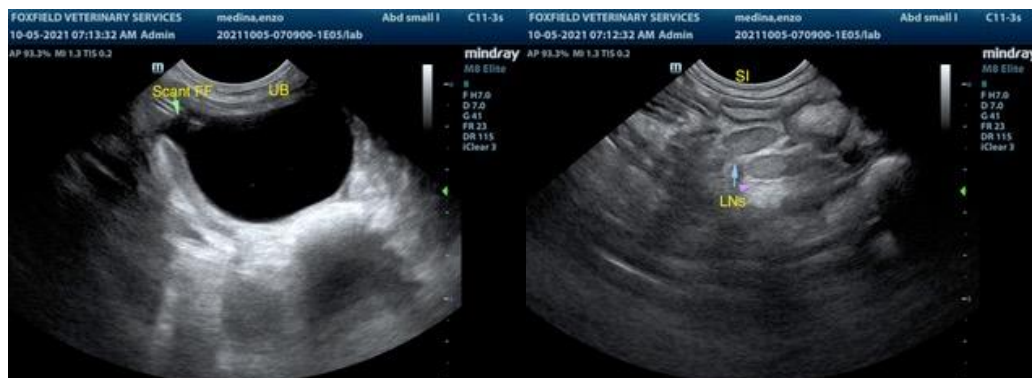
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.



**PATIENT**

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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.

**SPECIES**

Canine

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**info@SonoPath.com**

**BREED**

Lab

**SEX**

Male

**AGE**

10 Weeks

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