



PATIENT PRESENTING CLINICAL SIGNS

Luna Rodriguez History: Pollakiuria for 3 days, small amount urine, inappropriate accident in the house, Luna was at BP, ER last night Rx: Gabapentin/clavamox. Luna is in heat at the moment.

SPECIES Abnormal PE/Chem/CBC/UA Results: Enlarged vulva (heat), vulvar DC. CBC/CHEM/UA: not performed.

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

Bully The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra exhibited normal thickness and tone with no evidence of over distension. Anechoic urine was present in the lumen with no uroliths or sediment. The proximal urethra was not definitively visualized yet was without overt evidence of pathology or overt urine retention. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes were noted.

SEX

Female

AGE

2 years

Normal size and margination were 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 5.0 cm in length. The right kidney measured 5.0 cm in length.

WEIGHT

39 pounds

The area of the aortic trifurcation was free of pathology.

INTERPRETED BY

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

The visualized uterus was sonographically normal and appropriate in presentation for estrus. The uterine body measured 1.1 cm in diameter. No evidence of uterine luminal fluid was noted. The left and right ovaries were sonographically normal. The left ovary measured 1.5 cm in diameter. The right ovary measured 1.0 cm in diameter.

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.56 cm width. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.46 cm width at the caudal pole.

IMAGING PERFORMED BY
Jose

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

Elmhurst Animal
Emergency Hospital

REFERRING VET

Dr. Suci

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 with mild nondependent sludge. The cystic and common bile ducts were normal.

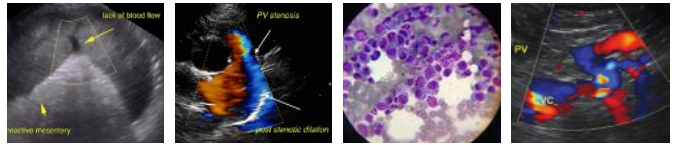
INVOICE

10408ag

Gastrointestinal

DATE

04/16/2022



PATIENT

Luna Rodriguez

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

SPECIES

Canine

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

Pancreas

BREED

Bully

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.

SEX

Female

Free Abdomen

No overt lymphadenopathy and the omentum was of uniform echogenicity.

Small pocket of scant peritoneal free fluid noted in the left lateral abdomen adjacent to the spleen. The fluid was anechoic.

AGE

2 years

ULTRASONOGRAPHIC FINDINGS

- Sonographically unremarkable urinary bladder.
- Expected uterus appearance for estrus.
- Normal bilateral kidneys.
- Small pocket of scant free fluid adjacent to the spleen-nonspecific.

WEIGHT

39 pounds

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No overt evidence of abdominal visceral specifically upper of lower urinary tract or uterine pathology. Urine C/S on sterile sample may be considered pending response to current empirical antibiotic or if pollachiuria persists

An obvious cause of the scant peritoneal free fluid was not definitive and may potentially be incidental assuming normal ALB levels. Correlation with full CBC/Chem panel and UA is recommended.

Diagnostic abdominocentesis could be considered if possible for fluid analysis and cytology.

IMAGING PERFORMED BY

Jose

HOSPITAL NAME

Elmhurst Animal
Emergency Hospital

REFERRING VET

Dr. Suciu

INVOICE

10408ag

DATE

04/16/2022



PATIENT

Luna Rodriguez

SPECIES

Canine

BREED

Bully

SEX

Female

AGE

2 years

WEIGHT

39 pounds

INTERPRETED BY

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

IMAGING PERFORMED BY

Jose

HOSPITAL NAME

Elmhurst Animal
Emergency Hospital

REFERRING VET

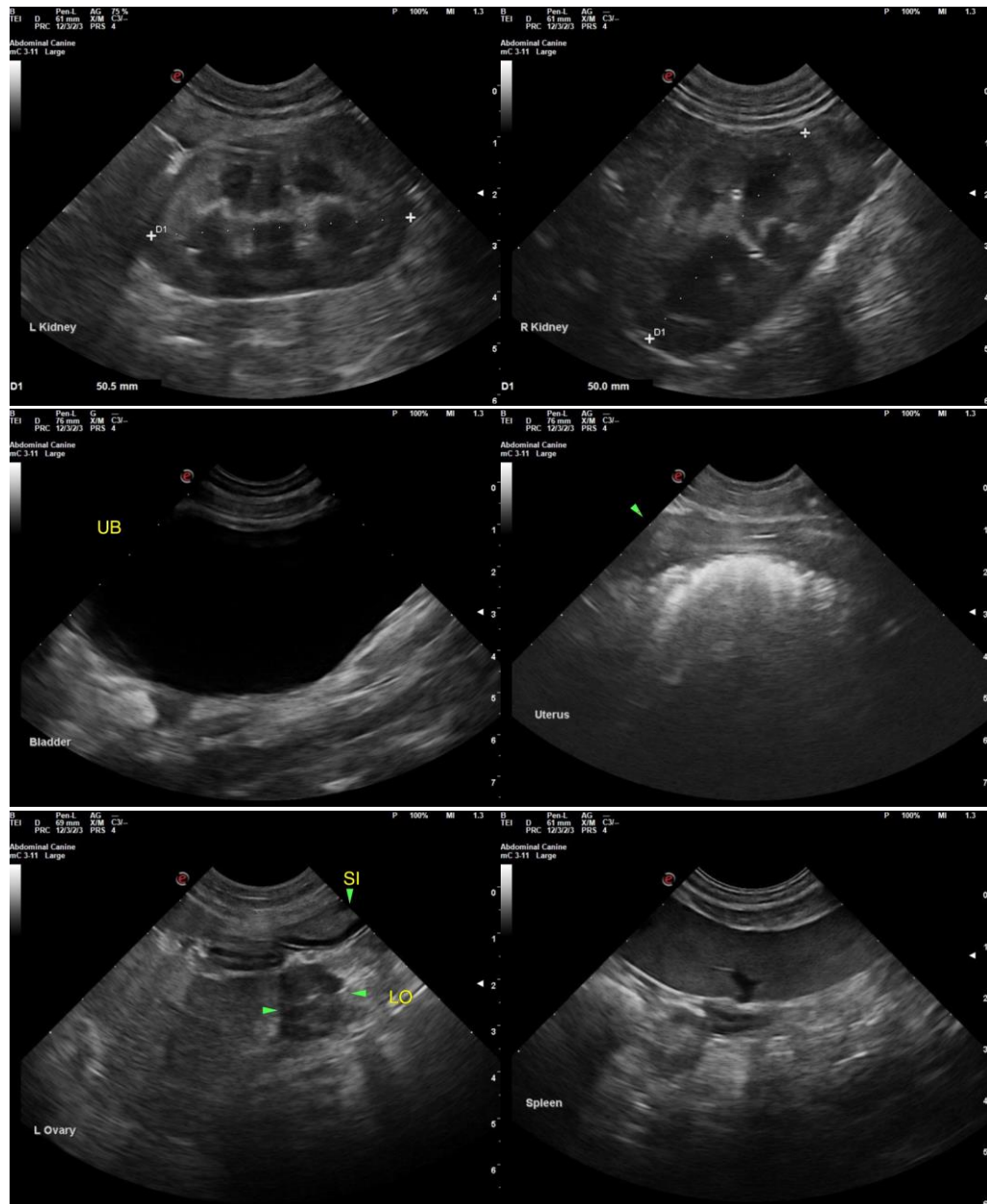
Dr. Suciu

INVOICE

10408ag

DATE

04/16/2022





PATIENT

Luna Rodriguez

SPECIES

Canine

BREED

Bully

SEX

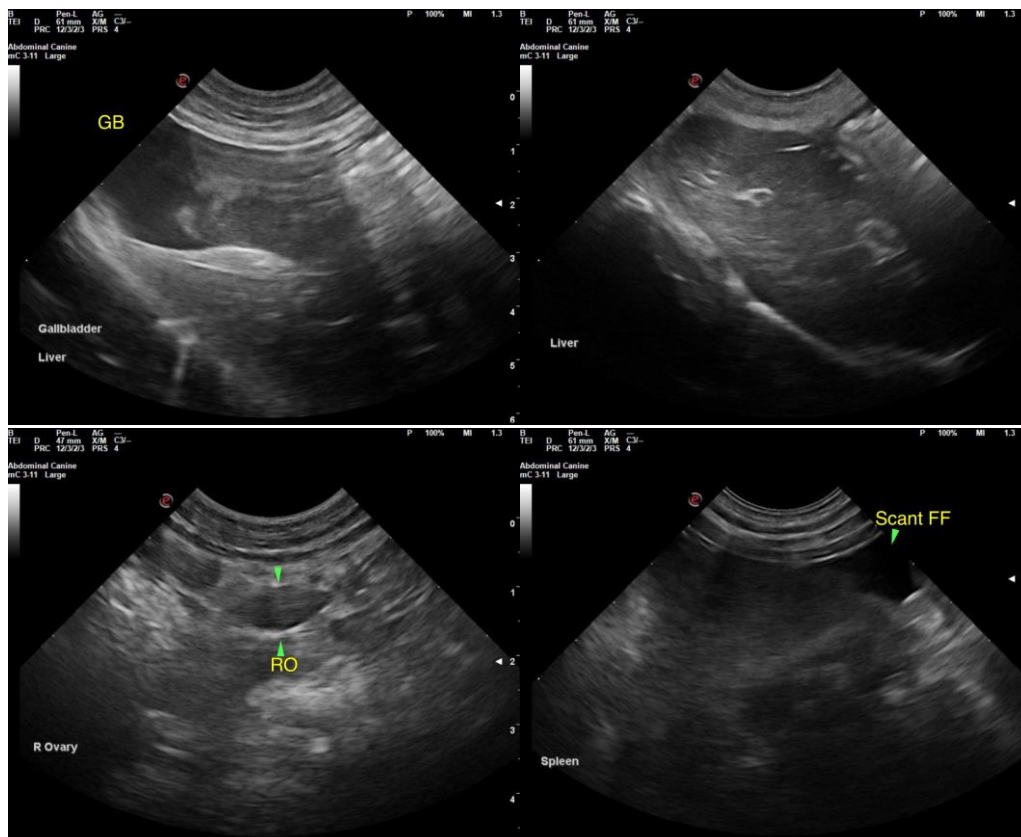
Female

AGE

2 years

WEIGHT

39 pounds



INTERPRETED BY

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

IMAGING PERFORMED BY

Jose

HOSPITAL NAME

Elmhurst Animal
Emergency Hospital

REFERRING VET

Dr. Suciu

INVOICE

10408ag

DATE

04/16/2022

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.

R. McKenzie Daniel, DVM, DABVP (Canine / Feline Practice)

info@SonoPath.com