



**PATIENT**

Annie Hill

**PRESENTING CLINICAL SIGNS**

DEP, having trouble catching breath, upon US noted free fluid in abdomen, it is blood by needle asp. Lack of detail with radiograph.

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: WNL

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED**

Boxer Mix

**Urinary System**

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 4 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.

**SEX**

FS

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 5.4 cm in length. The right kidney measured 5.6 cm in length.

**AGE**

9yr

The area of the iliac trifurcation was free of pathology including no evidence of medial, iliac or sublumbar lymphadenopathy or masses.

**WEIGHT**

54

**Adrenal Glands**

The left and right adrenal glands were not definitively visualized. No obvious pathology was present in the area of the bilateral adrenal glands.

**INTERPRETED BY**

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

**Spleen**

The spleen exhibited normal size and contour with subtle parenchyma heterogeneity. No overtly visualized splenic mass or nodule. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis.

**IMAGING PERFORMED BY**

Shelley Parker DVM

**Liver/Gallbladder**

The liver presented enlarged in size. The parenchyma of the liver was subjectively normal in echogenicity compared to the spleen and renal cortices. The liver parenchyma was uniform with a mildly coarse echotexture. The capsule of the liver was symmetrically rounded to mildly swollen in margination. The hepatic and portal vasculature were normal in appearance without signs of congestion. The gallbladder and common bile duct were not definitively visualized.

**HOSPITAL NAME**

Animal Mansion  
Veterinary Hospital

**Gastrointestinal**

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained mild non-shadowing ingesta with no signs of ileus, obstruction or foreign material.

**REFERRING VET**

Shelley Parker DVM

The visualized segments of 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.

**INVOICE**

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

**DATE**

05/02/2023

**Pancreas**



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The pancreas was indistinctly visualized with no evidence of active pancreatic pathology or inflammatory criteria.

**Free Abdomen**

**SPECIES**

Canine

No omental masses or overt lymphadenopathy was present.

Mild top moderate volume peritoneal effusion was present.

**BREED**

Boxer Mix

**ULTRASONOGRAPHIC FINDINGS**

- Overtly normal spleen.
- Mild hepatic parenchyma remodeling.
- Structurally unremarkable visualized GI tract with mild gastric ingesta.
- Mild to moderate volume peritoneal effusion.

**SEX**

FS

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

A definitive cause of the peritoneal effusion or hemoabdomen was not obvious. Correlation with effusion analysis cytology as well as assessment for hemoabdomen clotting which may indicate potential active intra-abdominal bleed vs insidious abdominal bleed is recommended.

**AGE**

9yr

Clotting status and three view chest radiographs are recommended to assess for occult thoracic pathology if not done. Assessment for evidence of trauma is recommended.

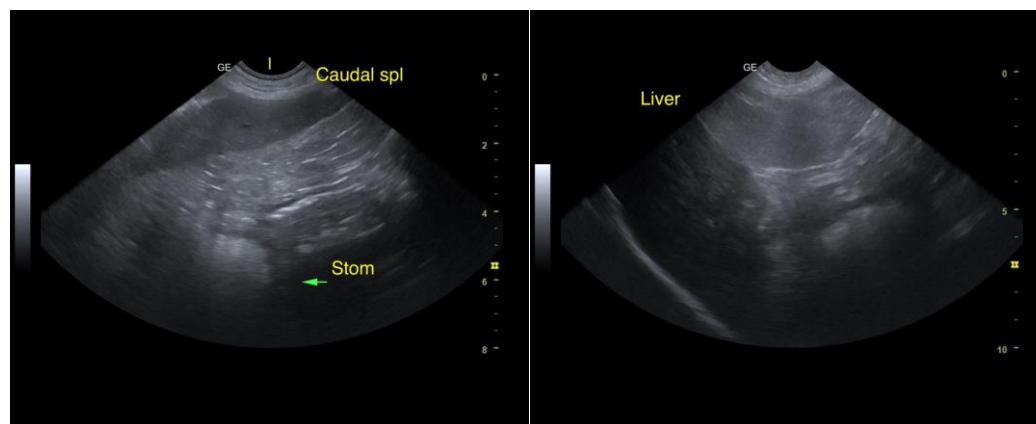
**WEIGHT**

54

If strong clinical concern for active intra-abdominal bleed, assuming no pathology on three view chest radiographs and pending clotting status, exploratory laparotomy for gross inspection of the abdominal cavity may be indicated.

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(Canine and Feline)



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**HOSPITAL NAME**

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**AGE**

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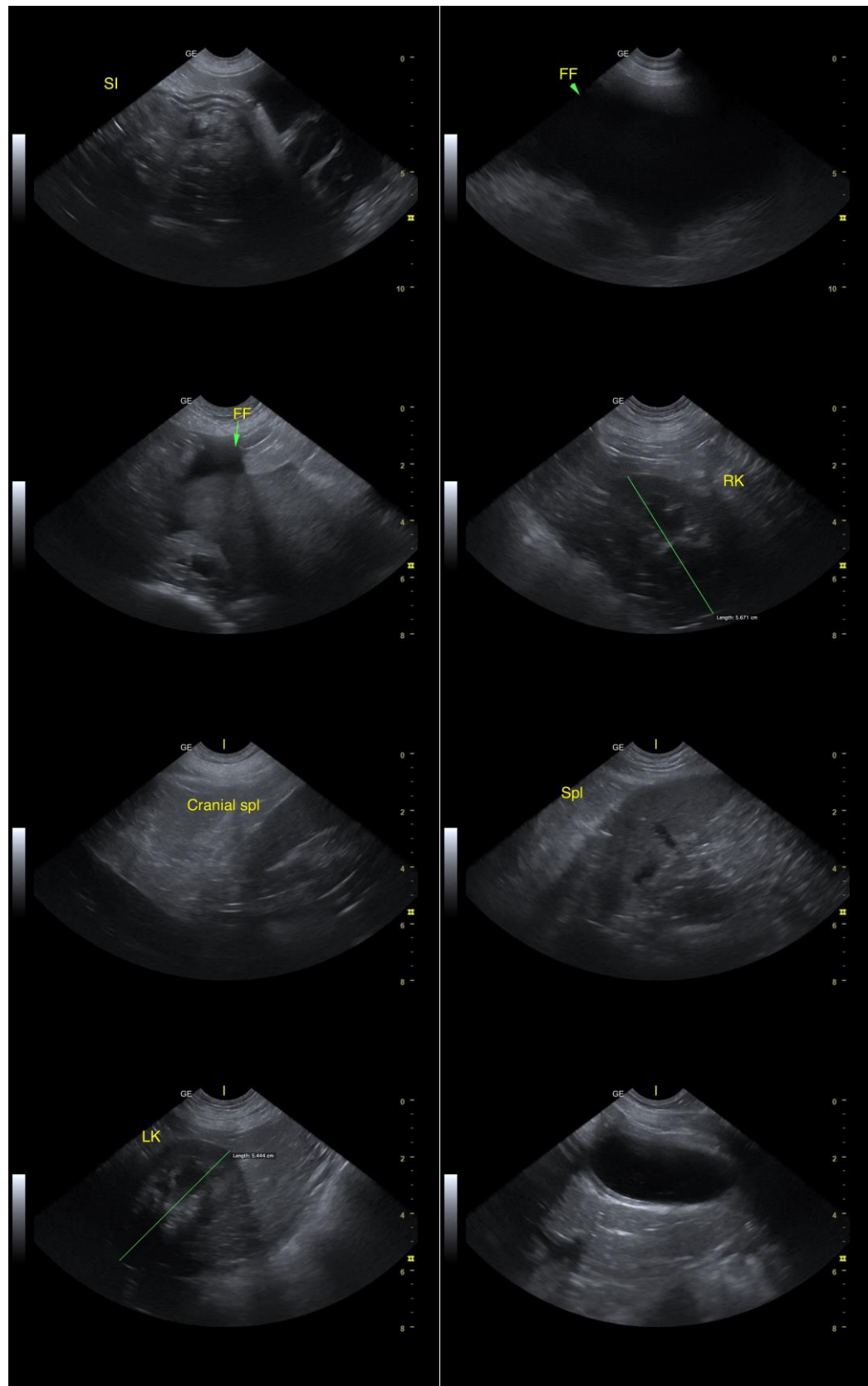
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

**SPECIES**

Canine

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.

**BREED**

Boxer Mix

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**SEX**

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**AGE**

9yr

**WEIGHT**

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