



PATIENT PRESENTING CLINICAL SIGNS

Kiana Pupo History of foreign body ingestion, vomiting, straining to defecate Cerenia, Pepcid, IVF
Elevated albumin, ALP, Neutrophils, and Platelets

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Pitbull

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 3.0 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.

SEX

F/S

The area of the iliac trifurcation was free of pathology.

AGE

2010

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. The left kidney measured 6.3 cm in length. The right kidney measured 6.6 cm in length.

WEIGHT

57

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 3.1 cm length x 0.66 cm width at the caudal pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 3.2 cm length x 0.55 cm width at the caudal pole.

INTERPRETED BY

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

Spleen

The spleen was not definitively visualized.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

Liver/ Gallbladder

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. 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.

HOSPITAL NAME

Maple Hills VH

REFERRING VET

Dr. Eckman

Gastrointestinal

The stomach presented intact and overtly normal wall layering in the area of the fundus and gastric body. Mildly thickened gastric wall layering in the area of the antrum and pylorus with subjective mild decreased antrum and pylorus mural echogenicity and indistinct wall layer detail were noted. The stomach contained a mild amount of retained ingesta / chyme and luminal gas. The fundus wall width measured 0.47 cm width. By comparison, the pylorus wall measured 0.85 cm width. No obvious evidence of mechanical pyloric outflow obstruction or definitive obstructive pyloric mural pathology.

INVOICE

14635

DATE

8/16/22



PATIENT
 Kiana Pupo
 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. The duodenum wall measured 0.46 cm width. The jejunum wall measured 0.26 cm width.

SPECIES
 Canine
 The visualized colon exhibited sonographically unremarkable wall layering containing subjective semi-formed fecal matter. The distal descending colon wall width measured 0.21 cm. Overt evidence of obstructive descending colon or colorectal mural pathology was not visualized.

BREED
 Pitbull
Pancreas
 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
 F/S
Free Abdomen
 No overt lymphadenopathy or peritoneal effusion was present.

AGE
 2010
ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Mildly thickened gastric antrum / pylorus
- Suspect mild colitis
- Overtly normal small bowel
- Mild parenchymal remodeling - benign

INTERPRETED BY
 R. McKenzie Daniel,
 DVM, DABVP
 (Canine and Feline)
Secondary Findings

- Mild chronic renal changes

IMAGING PERFORMED BY
 Rebekah Jakum, CVT
 ARDMS/RVT
HOSPITAL NAME
 Maple Hills VH
REFERRING VET
 Dr. Eckman
INVOICE
 14635
DATE
 8/16/22

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
 Sonographically, the appearance of the stomach was suggestive of gastritis. The potential for early infiltrative gastric neoplasia, which may present in a similar sonographic manner, cannot be definitively excluded. No overt evidence of gastrointestinal foreign body or mechanical gastrointestinal obstructive pattern. Rectal palpation to assess for evidence of non-visualized colorectal luminal pathology, if not done, is suggested. Some or all of the following protocol may be considered with an assessment of clinical response including Omeprazole vs Pepcid, which may be more effective. Three-view chest radiographs are suggested to rule out occult thoracic or esophageal pathology as a contributing factor.

No overt evidence of active pancreatitis, although potential for low-grade or chronic pancreatitis could be present. Further assessment including Spec cPL could be considered.

Gastric endoscopy with potential for biopsies should be considered in this patient if persistent vomiting is noted despite empirical therapy.

A clinical trial of **Zithromax (Dogs: 5-10 mg/kg p.o. q24h. May increase dosing interval to q48h after 3-5 days of treatment), Metronidazole (10-20 mg/kg p.o. b.i.d.), Pepcid (0.5-1 mg/kg s.i.d.) and Sucralfate (0.5-2 g/dog PO) or Omeprazole (1 mg/kg p.o. s.i.d.)** over the next 3 weeks along with a



PATIENT

Kiana Pupo

novel-protein or hydrolyzed diet with slurry feeding b.i.d./t.i.d. over the next 2-4 days and then increase to canned diet bid. Dry food should be avoided over the next 4 weeks. A recheck sonogram to assess GI improvement or progression would be ideal in 4 weeks.

SPECIES

Canine

BREED

Pitbull

SEX

F/S

AGE

2010

WEIGHT

57

INTERPRETED BY

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

IMAGING PERFORMED BY

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

Maple Hills VH

REFERRING VET

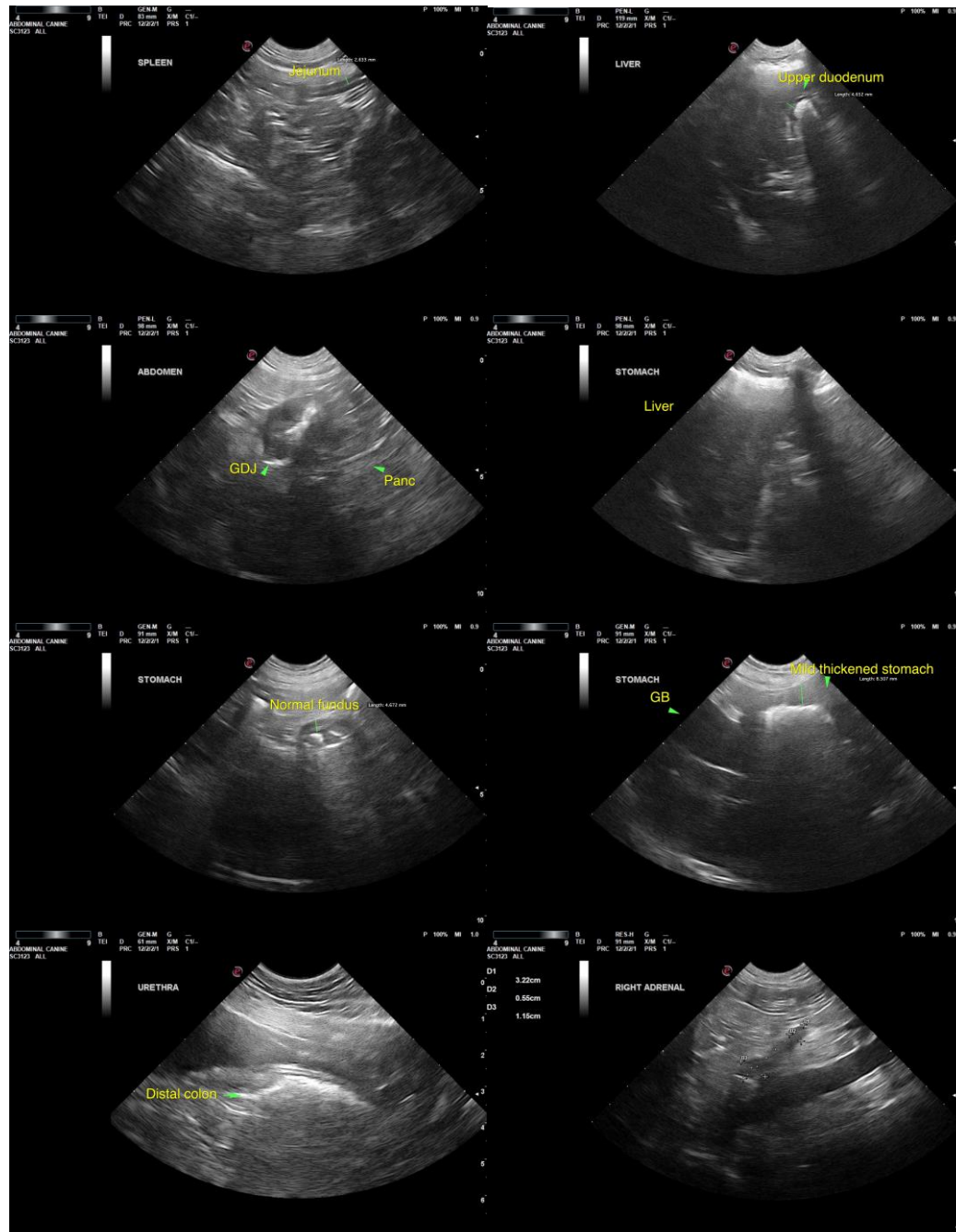
Dr. Eckman

INVOICE

14635

DATE

8/16/22





PATIENT

Kiana Pupo

SPECIES

Canine

BREED

Pitbull

SEX

F/S

AGE

2010

WEIGHT

57

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Rebekah Jakum, CVT
ARDMS/RVT

HOSPITAL NAME

Maple Hills VH

REFERRING VET

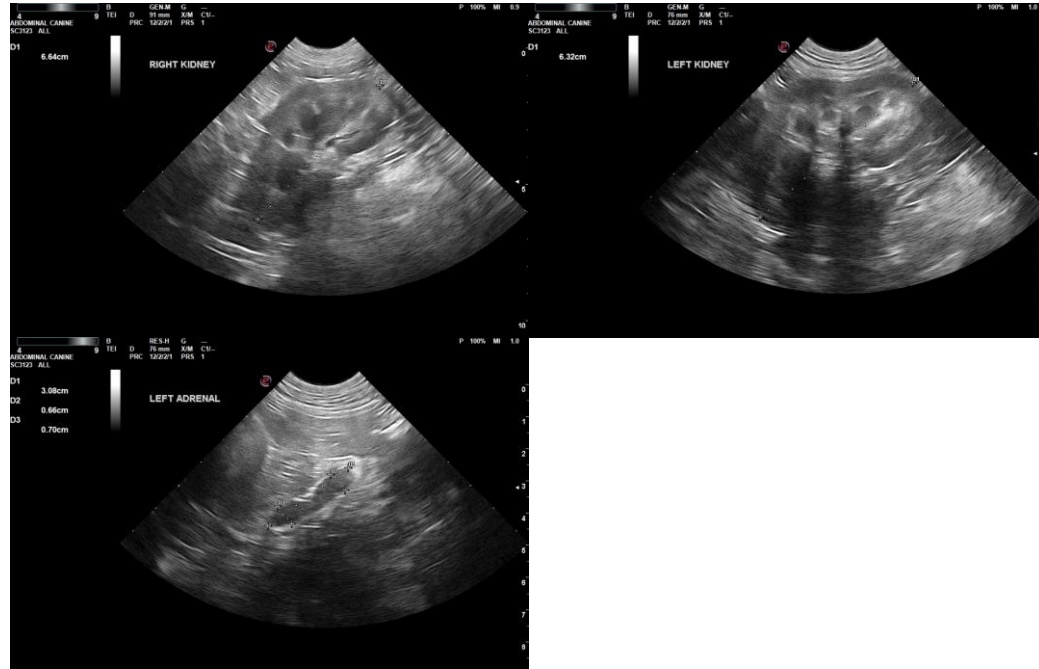
Dr. Eckman

INVOICE

14635

DATE

8/16/22



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.

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)
mac.daniel@sonopath.com