



PATIENT PRESENTING CLINICAL SIGNS

Bella Blank History: Chronic UTI's, history of low grade MCT Flexadin, Carprofen, Cetirizine, Doxycycline

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SPECIES

Canine

Urinary System

The urinary bladder, trigone, cystourethral junction, and visible pelvic urethra to a depth of 5 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.

BREED

Pitbull

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 7.2 cm in length. The right kidney measured 7.5 cm in length.

SEX

FS

The area of the aortic trifurcation was free of pathology.

AGE

2011

Adrenal Glands

The left adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The left adrenal gland measured 0.50 cm width at the caudal pole and 0.44 cm width at the cranial pole. The right adrenal gland was uniform in size and contour with a uniformly hypoechoic parenchyma. The right adrenal gland measured 0.63 cm width at the caudal pole and 0.44 cm width at the cranial pole.

WEIGHT

90

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.

INTERPRETED BY

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

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 hyperechoic debris. No evidence of gallbladder inflammatory criteria. The cystic and common bile ducts were normal.

IMAGING PERFORMED BY

Rebekah Jakum, CVT
 ARDMS/RVT

HOSPITAL NAME

Pottstown Animal
 Wellness

Gastrointestinal

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach contained echogenic, nonshadowing ingesta without signs of obstruction or foreign material.

REFERRING VET

Dr. DiBuono

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.

INVOICE

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

Pancreas

DATE

08/05/2022



PATIENT

Bella Blank

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

SPECIES

Canine

No overt lymphadenopathy or peritoneal effusion was present.

BREED

Pitbull

ULTRASONOGRAPHIC FINDINGS

SEX

FS

- Unremarkable urinary bladder and visible proximal urethra
- Normal kidneys
- Gastric ingesta-likely post prandial
- Gallbladder debris-incidenta

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

2011

The appearance of the gastrointestinal tract was non-specific with considerations including dietary intolerance / food hypersensitivity, occult parasitism, inflammatory bowel disease without evidence of mural changes or other. A GI panel to include PLI/TLI/Cobalamin/Folate, fresh fecal analysis to assess for parasitic ova / Giardia and resting cortisol to rule out occult Addison's Disease is warranted.

WEIGHT

90

No overt evidence of urinary tract pathology as a nidus for recurring UTI was present in this study. Assessment of the vulva and vaginal vault which may predispose to ascending infection may be considered. Weight loss protocol may be beneficial. No evidence of abdominal neoplastic criteria was present.

INTERPRETED BY

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(Canine and Feline)

Recheck urine C/S if not recently done is suggested. A higher dose shorter frequency antibiotic regimen i.e. enrofloxacin 20 mg/kg PO SID x 5 days with recheck urine C/S 7 days post completion may be more effective.

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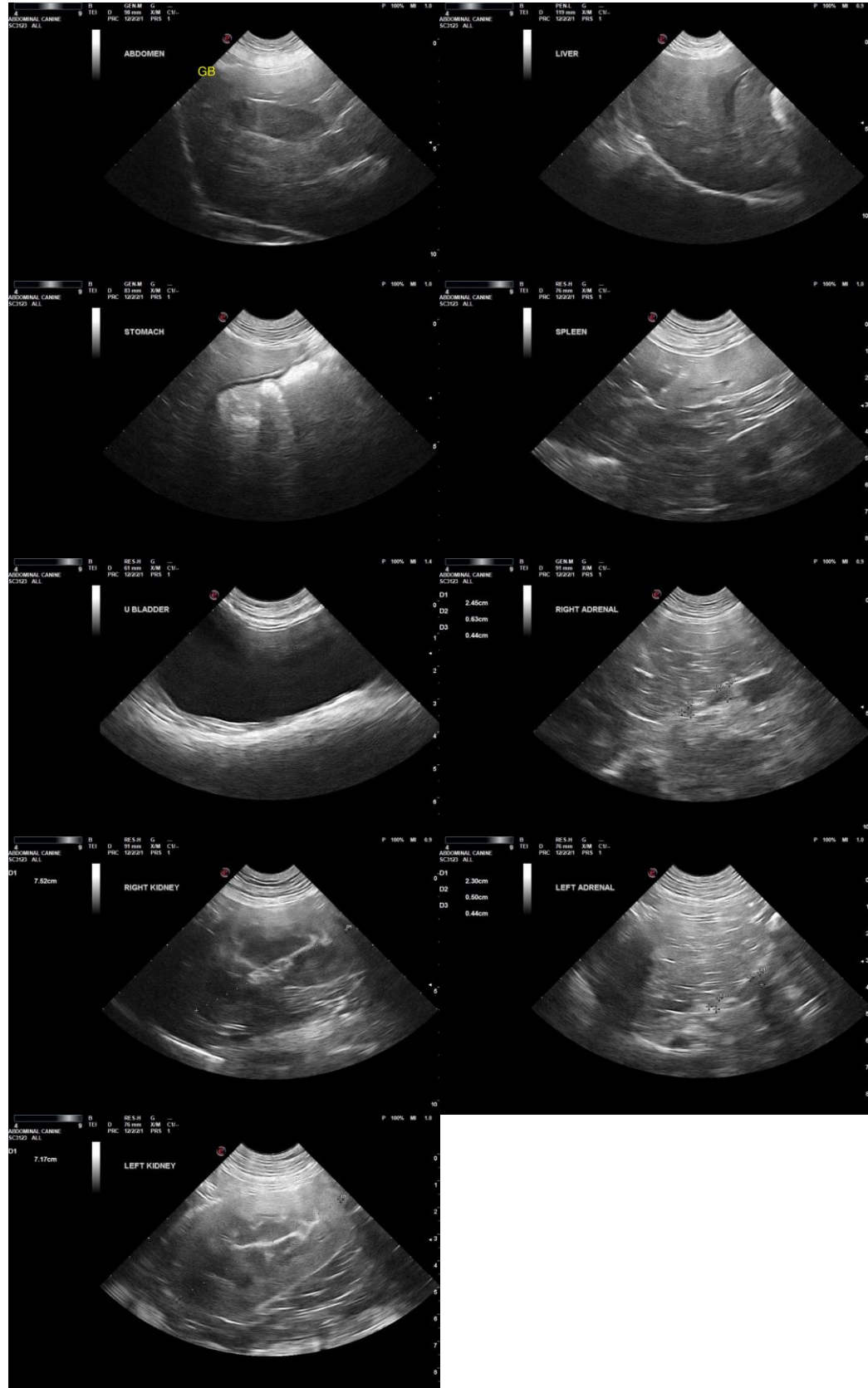
Dr. DiBuono

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PATIENT

Bella Blank

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

Pitbull

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