



PATIENT PRESENTING CLINICAL SIGNS

Gia MonTanez History: Lethargic and vomiting since OHE (8 days ago). Dark urine.
 SPECIES Physical Examination: Mild icterus, normal appearance of the incision site.
 Canine Urinalysis: Pending.
 BREED CBC: Pending.
 Maltese Previous Serum Biochemistry: Pending.
 Radiographic Findings: Pending.

SEX

FS

AGE

1 year

WEIGHT

5.3 #

INTERPRETED BY

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MMedVet (Med), PhD,
Dipl. ECVIM

IMAGING PERFORMED BY

Dr Cathleen Whitcraft,
DVM

HOSPITAL NAME

Craig Road Animal
Hospital

REFERRING VET

Dr Cameron Johnson,
DVM

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DATE

1/31/23

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

Full urinary bladder with a normal thickness and appearance of the wall. Normal anechoic urine with no sediment or uroliths evident.

Normal trigone area, proximal urethra, and iliac blood vessels.

Normal iliac lymph nodes. Ureters not visualized.

Normal renal size (left 2.1 cm, right 1.7 cm), echogenic appearance, cortico-medullary differentiation, pelvis, and capsule.

Reproductive System

Hyperechogenic appearance of the uterine stump.

Adrenal Glands

Normal shape, echogenic appearance, and position but small in size. Left 0.32/0.33 cm, right 0.36/0.38 cm.

Spleen

Normal size and echogenic appearance. Smooth homogenous parenchyma, curvilinear capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Liver

Normal size with increased echogenic appearance, normal portal markings, and regular curvilinear capsule. No nodules or masses evident. Full gall bladder containing normal anechoic bile. Normal appearance and thickness of the gall bladder wall. Normal bile duct.

Gastrointestinal

Normal appearance of the stomach, duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness and peristaltic activity, and no distension of the lumen. Gas within the stomach and proximal intestine.



PATIENT *Pancreas*

Gia MonTanez Normal size and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

SPECIES *Free Abdomen*

Canine Mesenteric lymphadenomegaly with normal shape and hypoechogenic appearance. Hyperechogenic appearance of the mesentery. No ascites.

BREED

Maltese

ULTRASONOGRAPHIC FINDINGS

SEX

Primary Findings:

FS

- Hepatopathy.
- Mesenteric inflammation.
- Lymphadenomegaly.
- Small adrenal glands?

AGE

1 year

Secondary Findings:

- None.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

The appearance of the uterine stump is consistent with post OHE surgery.

The most likely etiology for the hepatopathy would be reactive hepatitis secondary to the surgery, drugs, and mesenteric inflammation.

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DVM

The most likely etiology for the lymph nodes would be reactive secondary to the OHE surgery and mesenteric inflammation, with lymphadenitis a differential diagnosis.

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Although the size of the adrenal glands is most likely a reflection of the small patient size, Addison's disease should be considered.

With the presenting clinical signs post-surgery pain/inflammation, GI tract ileus, and gastro-esophageal reflux would be important considerations.

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Further assessment needs to be based on the pending results. Basal cortisol assay should be considered.

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Specific therapy would be dependent on an etiological diagnosis. Symptomatic management would be fluid therapy, anti-emetics, intestinal diet, gastric protectants (omeprazole, sucralfate), metoclopramide, and analgesics.

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PATIENT

Gia MonTanez

IMAGES

Liver/gall bladder

SPECIES

Canine

BREED

Maltese

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Uterine stump





PATIENT Mesenteric lymph nodes/mesentery

Gia MonTanez

SPECIES

Canine

BREED

Maltese

SEX

FS

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1 year

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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.

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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.

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