



**PATIENT PRESENTING CLINICAL SIGNS**

Crysta Figueroa History: Acute onset vomiting and has vomited up a sock.

**SPECIES** Physical Examination: N/A.

Canine Urinalysis: N/A.

**BREED** Serum Biochemistry: N/A.

French bull dog Radiographic Findings: Normal.

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Intact Female **Urinary System**

**AGE** Full urinary bladder with a normal thickness (0.5 cm) and appearance of the wall. Small amount of floating hyperechogenic sediment. No uroliths evident.

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

**WEIGHT** Normal iliac lymph nodes (left 0.3 cm, right 0.5 cm). Ureters not visualized.

15.1 # Normal renal size (left 4.6 cm, right 4.8 cm), echogenic appearance, cortico-medullary differentiation, capsule, and pelvis.

**INTERPRETED BY** **Reproductive System**

Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM  
N/A.

**Adrenal Glands**

**IMAGING PERFORMED BY** Normal shape, echogenic appearance, position, and size. Left 0.36 cm, right 0.38 cm.

Dr Gabriel Ferrer, DVM **Spleen**

**HOSPITAL NAME** Normal size (1 cm) and echogenic appearance. Smooth homogenous parenchyma, regular capsule, and normal vasculature. No evidence of inflammatory, neoplastic, infarction, or infiltrative changes noted.

Paseos Veterinary Center

**REFERRING VET** **Liver**

Dr Jose Cruz Normal size, echogenic appearance, portal markings. No nodules or masses evident. Full gall bladder containing Normal anechoic bile. Normal thickness (0.1 cm) and echogenic appearance of the gall bladder wall. Normal bile duct.

**INVOICE** **Gastrointestinal**

302901

**DATE** Normal appearance of the duodenum, small intestine, ileo-cecal junction, and colon with no loss of layering, normal wall thickness (stomach 0.31 cm, duodenum 0.55 cm, jejunum 0.37 cm, colon 0.18 cm) and peristaltic activity and no distension of the lumen. Large amount of fluid/ingesta within the stomach extending into the pylorus.

4/13/22



**PATIENT** *Pancreas*

Crysta Figueroa Normal size (right 0.9 cm, left 0.7 cm) and echogenic appearance. Regular capsule. Normal echogenic appearance of the mesentery and fat surrounding the pancreas.

**SPECIES** *Free Abdomen*

Canine Mild mesenteric lymphadenomegaly (0.5 x 2.3 cm) with normal shape and echogenic appearance. No ascites.

**BREED** **ULTRASONOGRAPHIC FINDINGS**

French bull dog

**SEX** Primary Findings:

- Gastric pathology?
- Mesenteric lymphadenomegaly.

**AGE** Secondary Findings:

- Urinary bladder sediment.

**WEIGHT** **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

15.1 #

Although the fluid/ingesta within the stomach may merely be associated with a recent meal or delayed emptying from non-specific gastritis (viral, bacterial, helminths, toxins, dietary indiscretion), a material foreign body needs to be considered.

**INTERPRETED BY**

Remo Lobetti, BVSc,  
MMedVet (Med), PhD,  
Dipl. ECVIM

The mesenteric lymphadenopathy is most likely reactive with lymphadenitis, a less likely differential diagnosis.

Further assessment/specific therapy would be to repeat the ultrasound after 18-24 hours and if there is no change in the appearance of the stomach, then a gastrotomy would be indicated, especially with the history of vomiting up a sock.

**IMAGING PERFORMED BY**

Dr Gabriel Ferrer, DVM

**HOSPITAL NAME**

Paseos Veterinary Center

**REFERRING VET**

Dr Jose Cruz

**INVOICE**

302901

**DATE**

4/13/22



**PATIENT**

Crysta Figueroa

**IMAGES**

**Stomach**

**SPECIES**

Canine

**BREED**

French bull dog

**SEX**

Intact Female

**AGE**

6 years

**WEIGHT**

15.1 #

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**REFERRING VET**

Dr Jose Cruz



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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.

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.

**Remo Lobetti, BVSc, MMedVet (Med), PhD, Dipl. ECVIM (Internal Medicine)**  
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