TABLE 15

Clinical, Radiographic, and Ultrasonographic Findings Associated with Fluid Overload

Clinical Findings

- Increased body weight (>10%)
- Tissue edema (intermandibular area, limbs, paws, dependent regions, chemosis)
- · Serous nasal discharge
- Serous discharge from endotracheal tube in anesthetized patients
- Increased respiratory rate or effort
- Reduced SPO₂
- Novel murmur, novel gallop sound
- Gastrointestinal signs (abdominal distention, vomiting, diarrhea, inappetence, anorexia)
- No change in blood pressure; hypertension rarely associated with fluid overload except in AKI/ CKD.^{1,2}

Radiographic Findings

- · Body wall edema
- · Pleural effusion
- · Pulmonary edema
- Cardiomegaly
- · Enlarged pulmonary artery
- · Enlarged caudal vena cava
- Enlarged pulmonary vein
- · Loss of serosal detail
- · Distended intestines

Ultrasonographic Findings

- Subcutaneous edema
- Pleural effusion
- B-lines
- Enlarged La:Ao
- Enlarged caudal vena cava
- Decreased caudal vena cava collapsibility index
- Ascites
- · Intestinal wall thickening
- Ileus
- Hyperechoic mesentery and pancreas
- · Hepatic congestion
- · Gallbladder wall edema
- · Perirenal edema

AKI, acute kidney injury; Ao, aorta; CKD, chronic kidney disease; La, Left atrium; SpO2, oxygen saturation

- 1. Cole LP, Jepson R, Dawson C, Humm K. Hypertension, retinopathy, and acute kidney injury in dogs: A prospective study [published correction appears in *J Vet Intern Med.* 2020 Nov;34(6):3168]. *J Vet Intern Med.* 2020;34(5):1940-1947.
- 2. Park S, Lee CJ, Lee M, et al. Differential effects of arterial stiffness and fluid overload on blood pressure according to renal function in patients at risk for cardiovascular disease. *Hypertens Res.* 2019;42:341–353.

