

PATIENT PRESENTING CLINICAL SIGNS

Bevi Tinkle History: September 2021 - presented with first UTI. Culture: Staph pseudointermedius, Enterococcus canintestini in October 2021. Today Enterococcus canintestini still present. Suspect stones may be present. Started c/d diet in November 2021.

SPECIES Abnormal PE/Chem/CBC/UA Results:

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

The urinary bladder is moderately distended. The wall is diffusely thickened (up to 0.76 cm) with a slightly irregular mucosal surface. Numerous varying-sized cystic calculi are observed within the lumen as well as a moderate amount of suspended echogenic debris. The region of the trigone and the visible portion of the proximal urethra are normal.

Rottweiler

SEX

The left kidney is normal in size (6.65 cm in length); with a slightly irregular shape and architecture with smooth peripheral margins. Hyperechoic shadowing diverticular foci are visualized. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia or hydroureter. Renal vasculature is normal.

Spayed Female

AGE

The right kidney presented normal size (7.28 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

7 years

WEIGHT

107 lbs

Adrenal Glands

The left adrenal gland is normal size (0.40 cm at cranial pole) (0.65 cm at caudal pole) (3.52 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

Andrea Nicaastro, DVM,
Diplomate ACVIM (Small
Animal Internal Medicine)

The right adrenal gland is normal size (2.17 cm at cranial pole) (0.65 cm at caudal pole) (3.08 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

IMAGING PERFORMED BY

Jenna Walsh, CVT

Spleen

The spleen is normal in size (1.90 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

HOSPITAL NAME

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Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.

REFERRING VET

Dr Remcho

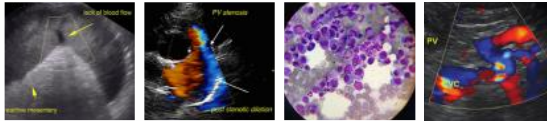
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The gall bladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal/not

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PATIENT seen.

Bevi Tinkle

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is mildly fluid distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The small intestinal lumen is not dilated. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive or overt infiltrative disease is noted.

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Pancreas

The right limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

SEX

Spayed Female

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

AGE

7 years

Other

A uterine stump is visible (0.48 cm in width), No obvious pathology is seen. A brief echocardiogram reveals no evidence of pericardial effusion.

WEIGHT

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ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Cystic calculi with bladder wall changes consistent with cystitis. Changes are similar to the previous sonogram.
- Minor degenerative or renal changes with dystrophic mineralization

Secondary Findings

- The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- A cystotomy with stone removal, analysis and culture is recommended.
- Three-view thoracic radiographs should be performed prior to anesthesia to assess cardiopulmonary status.

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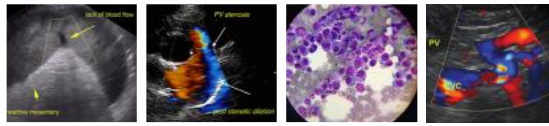
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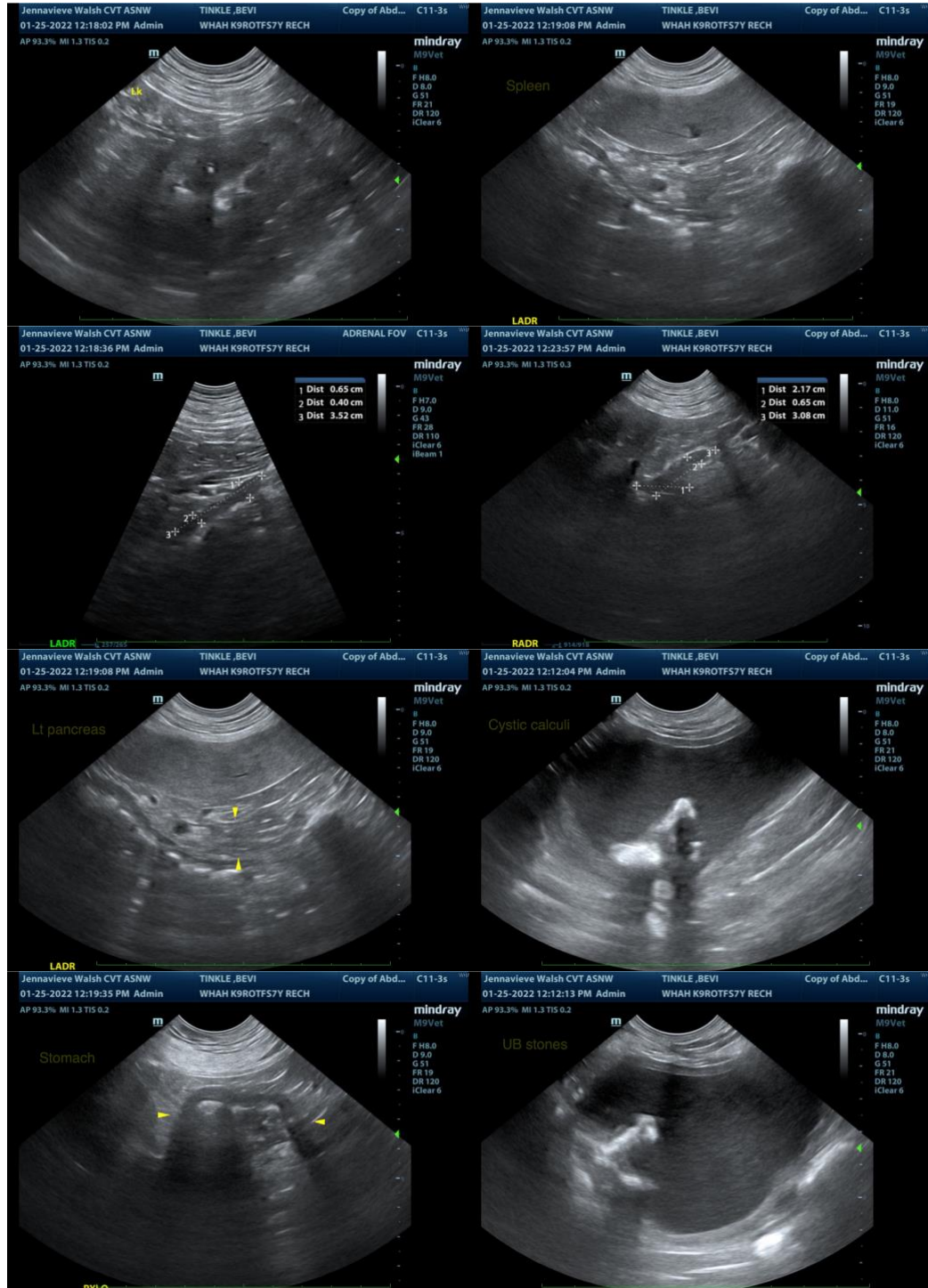
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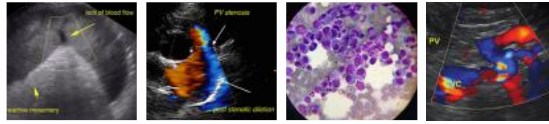
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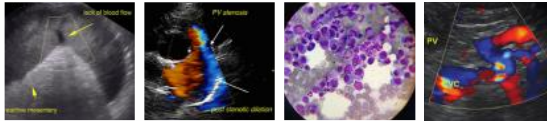
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Andrea Nicastro, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com



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