

PATIENT

Bailey Allen

SPECIES

Canine

BREED

Golden-doodle

SEX

Female Spayed

AGE

14.9 years

WEIGHT

52 pounds

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Tam Mengine, DVM,
DABVP (canine / feline)

HOSPITAL NAME

Stoney Creek VH

REFERRING VET

Tam Mengine, DVM,
DABVP (canine/ feline)

INVOICE

10269

DATE

2/3/22

PRESENTING CLINICAL SIGNS

History: Iris Stage 2 renal disease diagnosed in 8/21 (Creat 1.9, no proteinuria), started Purina NF diet. About a week ago, decreased appetite, only eating chicken, and having diarrhea and tenesmus (which she has had on and off for a year). CBC / Chem - Hct 28.7%, BUN 112, Creat 8.2, Phos 9.8, K+ 5.6, else unremarkable. U/A, culture, blood pressure pending

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with mostly anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

The left kidney is normal size (5.63 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild to moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

The right kidney is normal size (6.36 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

Adrenal Glands

The left adrenal gland is normal size (0.66 cm at cranial pole) (0.55 cm at caudal pole); (1.87 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.

The right adrenal gland is not definitively visualized due to patient discomfort. However no obvious pathology is observed in this region.

Spleen

The spleen is subjectively prominent in size (2.86 cm in width at the level of the hilus) with normal curvilinear peripheral contours. The parenchyma is subtly mottled in appearance. No distinct focal lesions are observed. Splenic vasculature is normal with no evidence of thrombosis.

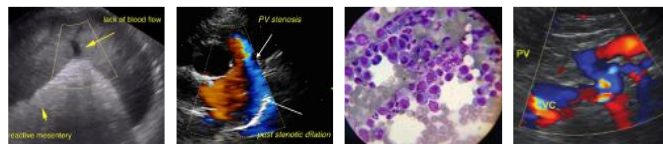
Liver

The liver is subjectively prominent in size with normal curvilinear peripheral contours. The parenchyma is isoechoic relative to the spleen, mottled and heterogenous in appearance, with a few ill-defined hyper- and hypoechoic nodules/areas. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal.

Gastrointestinal

The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is segmentally gas distended. The small intestinal wall thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The ileocecolic junction and colonic wall are normal. There is no evidence of an obstructive pattern.



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Pancreas

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The region of the pancreas is isoechoic relative to surrounding omental fat. No obvious parenchymal abnormalities are observed. There is no evidence of regional inflammation or effusion.

SPECIES

Free Abdomen

Canine

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. A 1.59 cm medial ileac lymph node is visualized and is normal in shape and echogenicity

BREED

ULTRASONOGRAPHIC FINDINGS

Golden-doodle

Primary Findings

SEX

- Bilateral non-specific nephropathy. Based on the clinical history, acute-on-chronic renal failure is suspected.

Female Spayed

Secondary Findings

AGE

14.9 years

- The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, regenerative nodular hyperplasia, and/or age-related remodeling. Inflammatory and infiltrative disease are considered less likely.
- The splenic parenchymal changes are non-specific and could be associated with a benign process such as lymphoid hyperplasia or extramedullary hematopoiesis. Emerging neoplasia is also possible but is considered less likely.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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- Supportive care for acute-on-chronic renal failure is recommended, including IV fluid diuresis, gastric protectants, antiemetics (as needed) and broad-spectrum antibiotic therapy (while awaiting urine culture and sensitivity results).
- Consider three-view thoracic radiographs to assess cardiopulmonary status, particularly in the face of IV fluid diuresis.
- Although the renal disease is chronic, consider Leptospirosis testing to assess for an underlying cause for acute decompensation.
- Also consider a UPC (if proteinuria is present).

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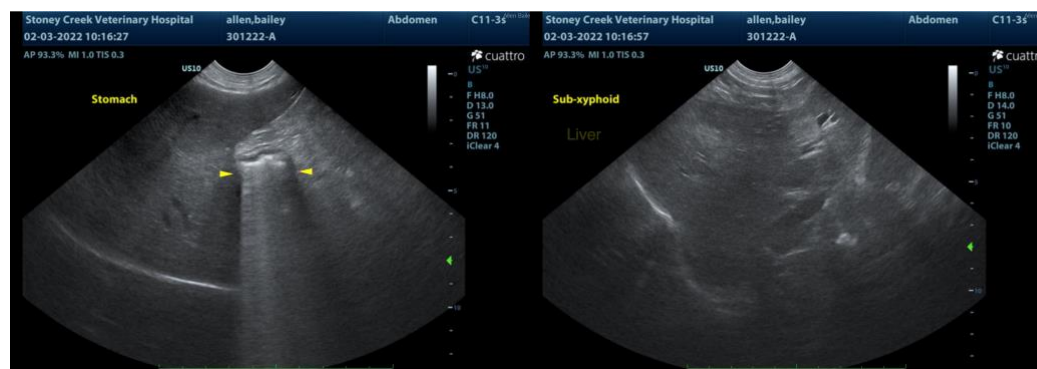
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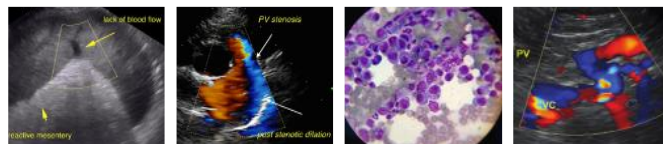
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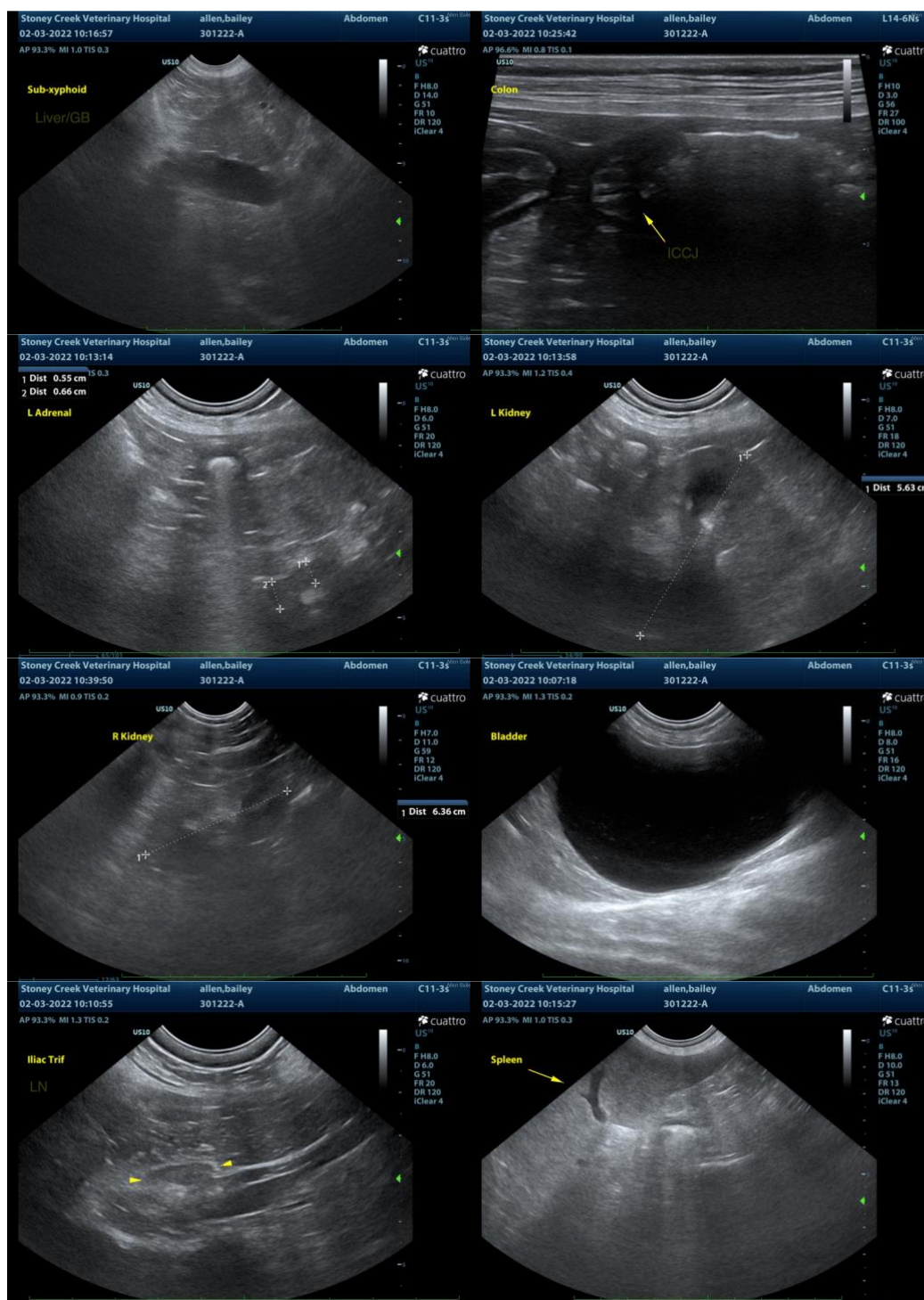
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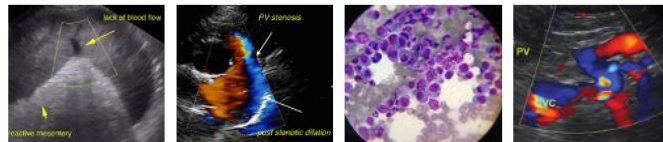
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



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