



## PATIENT PRESENTING CLINICAL SIGNS

**Mazie Cullen** History: P has history of exercise intolerance and constant panting; P has slightly potbellied appearance. P has elevated triglycerides and is on Royal Canin GI LF food and Chitin (Very well controlled). Low Dose Dex Suppression test done 1/22/26 was WNL

## SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: 1/13/26 - WBC - 21.3, ALKP - 636

## BREED

Mix

### Urinary System

The urinary bladder wall is normal in thickness. The mucosal surface is smooth. The bladder is mildly-to-moderately distended. Luminal contents are anechoic. No cystic calculi are observed. The region of the trigone and visible portion of the proximal urethra are normal.

## SEX

Female Spayed

The left kidney is normal in size (6.24 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

## AGE

9

The right kidney is normal in size (5.56 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

## WEIGHT

52.6 lbs

## INTERPRETED BY

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

### Adrenal Glands

The region of the adrenal glands is evaluated. No obvious pathology is observed in this region.

### Spleen

The spleen is normal in size (1.47 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.

## IMAGING PERFORMED BY

Christina CVT

### Liver

The liver is subjectively prominent in size with swollen curvilinear peripheral contours. The parenchyma is isoechoic relative to the spleen and exhibits mild heterogeneity. No distinct focal lesions are observed. Hepatic vasculature and biliary tracts are of normal volume with no evidence of congestion.

## HOSPITAL NAME

Animal Health VC

The gallbladder lumen is moderately distended. The wall is normal- to mildly-thickened (up to 0.19 cm) and hyperechoic. A few, small, polypoid-like lesions are arising from the mucosal surface. A small amount of suspended echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

## REFERRING VET

Dr. Readdy

### Gastrointestinal

The lumen is not distended. The gastric wall is 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. Discrete masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

## INVOICE

22444

## DATE

1-23-26

### Pancreas

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.



**PATIENT**

**Lymph Nodes**

The abdominal lymph nodes are normal/not visible.

Mazie Cullen

**SPECIES**

**Free Abdomen**

The peritoneal cavity is normal. There is no evidence of inflammation or effusion.

Canine

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

**Primary Findings**

Mix

- The diffuse hepatic changes are nonspecific and could be consistent with vacuolar hepatopathy, regenerative nodular hyperplasia, and/or age-related remodeling. Inflammatory disease, infiltrative neoplasia and other hepatopathies are considered less likely.

**SEX**

Female Spayed

- The gallbladder wall changes could be consistent with cholecystitis and/or age-related hyperplasia. The gallbladder polyps are likely a benign age-related incidental finding. However, they can sometimes be associated with cholecystitis.

**AGE**

9

\*An obvious cause for the patient's panting and exercise intolerance is not definitively identified in this study. Considerations include orthopedic or neurologic disease, cardiovascular disease, underlying metabolic issue, other.

**WEIGHT**

52.6 lbs

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**INTERPRETED BY**

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

- Serial monitoring (i.e., every 3-4 months) of the patient's liver values is recommended. If values continue to increase, a repeat abdomen ultrasound +/- a more advanced hepatic work-up (i.e., tissue sampling) may be warranted.
- Regarding the panting and exercise intolerance, three-view thoracic radiographs and neurologic examinations are the next diagnostic steps. Depending on the results, further work-up may be indicated.

**IMAGING PERFORMED BY**

Christina CVT

**HOSPITAL NAME**

Animal Health VC

**REFERRING VET**

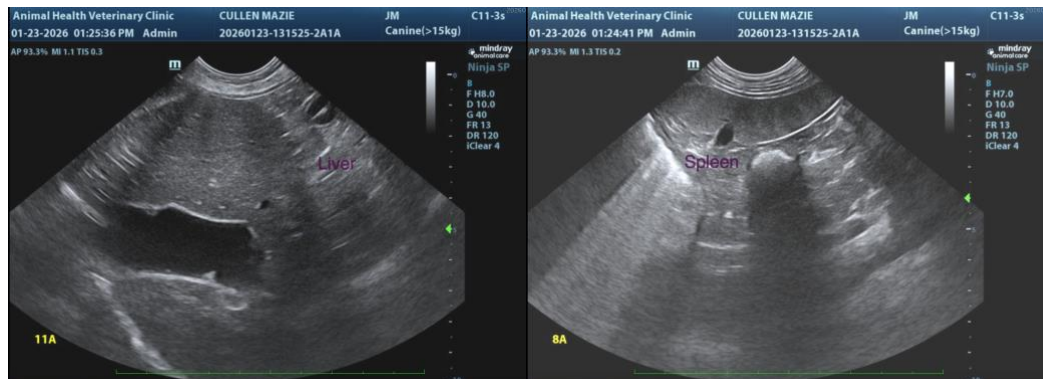
Dr. Readdy

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## PATIENT

Mazie Cullen

## SPECIES

Canine

## BREED

Mix

## SEX

Female Spayed

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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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