



**PATIENT PRESENTING CLINICAL SIGNS**

**Penny Hund**  
History: P presented today for episodes that are happening daily, started a few months ago. P will start shaking/acting scared, drool, pant, and sometimes fall over. Episodes can last multiple hours, and P acts completely normally afterwards. P has been reluctant to eat, but will finish full meal with encouragement. ECG/Chest rads were taken and sent to cardiologist. Sinus arrhythmia with no cardiopulmonary changes on rads.

**Canine**  
Abnormal PE/Chem/CBC/UA Results: Chem 27, CBC, T4, UA performed. ALT: 196 U/L. NSF on rest of lab work.

**BREED ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Pit mix *Urinary System***

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

**SEX**

Female, spayed

The left kidney is normal size (5.76 cm in length); normal shape and architecture with 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 hydroureter.

**AGE**

9 Yrs.

The right kidney is normal size (6.39 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. Renal vasculature is normal.

**WEIGHT**

49 lbs.

***Adrenal Glands***

The left adrenal gland is normal size (0.47 cm at cranial pole) (0.70 cm at caudal pole); 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 caudal pole of the right adrenal gland is visualized and is normal size (0.74 cm in width) with a normal shape, glandular echogenicity and detail. Surrounding vasculature appears normal.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

Dr. Saum Hadi

***Spleen***

The spleen is subjectively prominent in size (2.68 cm in width at the level of the hilus) with normal to slightly swollen peripheral contours. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

**HOSPITAL NAME**

Bethany Family Pet  
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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. The gall bladder lumen is moderately distended. The wall is thin and smooth. A moderate amount of aggregated, echogenic to mineralized mostly gravity dependent debris/sludge is observed within the lumen. The cystic and common bile ducts are normal/not seen.

**REFERRING VET**

Dr. Saum Hadi

**INVOICE**

14502

***Gastrointestinal***

**DATE**

1/24/23



**PATIENT**

Penny Hund

The gastric lumen is mostly empty. In the region of the pyloric antrum, 1-2 small (<1 cm) shadowing structures are observed within the lumen. 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. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

**SPECIES**

Canine

***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.

**BREED**

Pit mix

***Free Abdomen***

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

**SEX**

Female, spayed

**AGE**

9 Yrs.

**ULTRASONOGRAPHIC FINDINGS**

- Suspected mild splenomegaly. This may be a normal variant for this patient or may represent a benign process (i.e., lymphoid hyperplasia, extramedullary hematopoiesis or similar) or emerging neoplasia (i.e., lymphoma).
- The shadowing structures observed within the pyloric antral lumen may represent normal kibble, pills, or small foreign material. There is no obvious evidence of obstruction at the time of the study.
- The remainder of the abdomen is unremarkable.

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Consider a fine needle aspirate of the spleen (if clotting status is appropriate). A 25-gauge needle should be used.
- Also consider pre and post prandial serum bile acids +/- a blood ammonia level to assess for hepatic encephalopathy.
- A baseline blood pressure measurement is recommended to assess for systemic hypertension.
- A thorough neurologic examination is also recommended.
- If the above diagnostics are inconclusive, consultations with a cardiologist and neurologist may be warranted.

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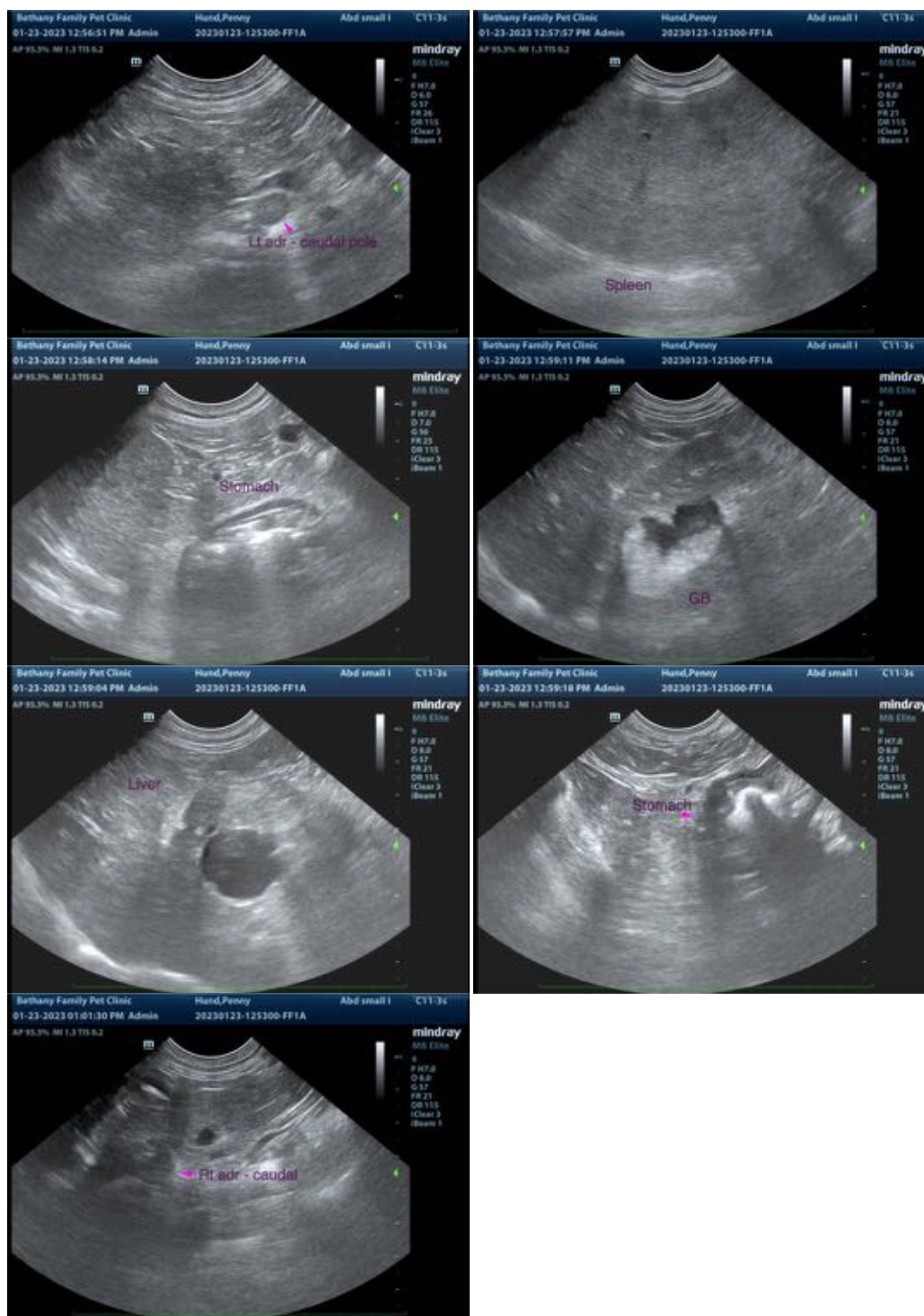
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.



**PATIENT**

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