



DATE PRESENTING CLINICAL SIGNS

1/5/26

Patient History: 7 month old female intact mixed breed dog Presenting Complaint: Lucy presents for suspected vehicular trauma Patient History: - Suspected struck by vehicle vs coyote attack Friday night (3 days prior to presentation) - Hematochezia since Friday night; some stool formed with blood, some diarrhea with blood - Anorexia since Friday; ate small amount of chicken and rice once yesterday - Severe adipsia since Friday (approximately 3 laps of water total in one day) - Weakness and falling to right side noted after incident - Currently in heat x 7-8 days - No vomiting, coughing, or sneezing - Diet: Science Diet puppy food - Not on flea, tick, or heartworm preventatives - Up to date on vaccines - Lives in rural area, goes outside off-leash - No known allergies - No other medical history

PATIENT

Lucy Wilhelm

SPECIES

Canine

BREED

Chihuahua

SEX

Female, intact

AGE

6/4/2025

WEIGHT

7.6 lbs.

INTERPRETED BY

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

HOSPITAL NAME

Animal Emergency
Hospital

REFERRING VET

Dr. Shannahan

INVOICE

13369

Current Medications: Methadone, Unasyn, Denamarin.

Labwork Results: Leukocytosis with a neutrophilia and monocytosis, ALT 2267, ALP 248.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed by: Rachel Brillhart, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder is moderately distended. Luminal contents are mostly anechoic. No cystic calculi are observed. The region of the trigone is normal.

The left kidney is normal in size (3.83 cm in length) with a normal shape, architecture and 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.

The right kidney is normal in size (4.12 cm in length) with a normal shape, architecture and 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.

Adrenal Glands

The left adrenal gland is normal in size (0.46 cm at cranial pole) (0.48 cm at caudal pole) with a normal shape and 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 normal in size (0.56 cm at cranial pole) (0.50 cm at caudal pole) with a normal shape and homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

Spleen

The spleen is normal in size (0.78 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.

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.

The gall bladder lumen is moderately distended. The wall is thin and smooth. A small amount of echogenic debris is suspended within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is mildly distended with ingesta. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is not dilated. The small intestinal wall is normal in thickness 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.

Pancreas

The pancreas is normal in size with normal peripheral contours. The pancreatic duct is normal. The base and limbs of the pancreas are isoechoic to surrounding omental fat. No focal lesions are observed. There is no evidence of peripancreatic inflammation or effusion.

Lymph nodes

The abdominal lymph nodes are normal/not visible.

Free Abdomen

There is no obvious evidence of free fluid.

Other

The left ovary is visualized and subjectively normal in size (1.31 x 0.91 cm). A 0.50 x 0.42 cm follicle is observed within the parenchyma. The right ovary is visualized and subjectively normal in size (1.98 x 0.77 cm). Several follicles are visualized, one measuring 0.70 x 0.64 cm.

The uterus is visualized. The uterine body measures 0.50 cm in width. No obvious pathology is seen.

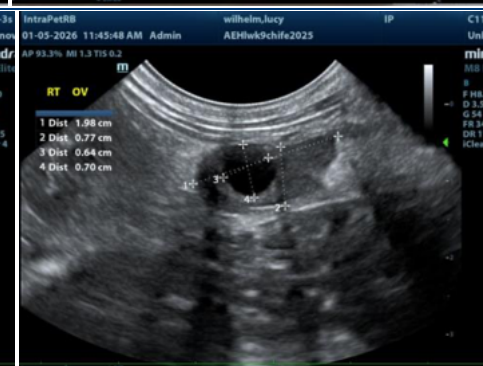
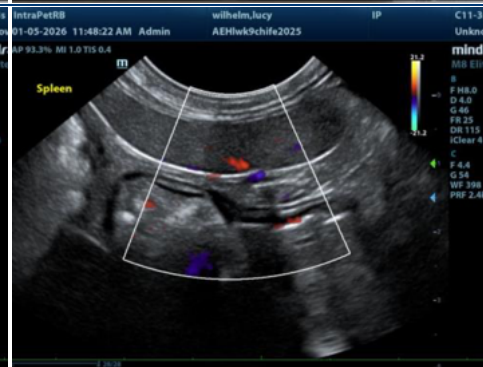
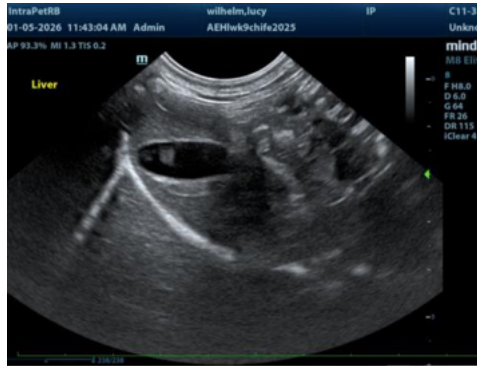
Brief visualization of the heart reveals no obvious evidence of pericardial or pleural effusion in the visible window. No masses are seen. A few B-lines are suspected.

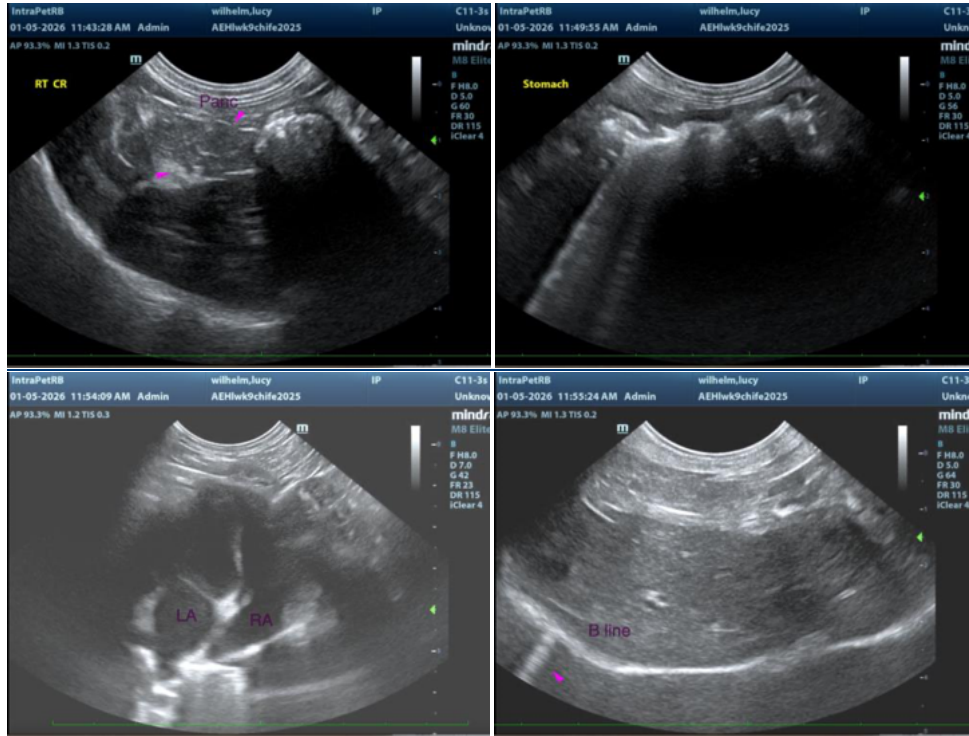
ULTRASONOGRAPHIC FINDINGS

- There are a few suspected B-lines, suggestive of pulmonary parenchymal disease.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

1. Three-view thoracic radiographs are recommended to assess for pathology in the chest, particularly given the history of possible trauma.
2. Supportive care and nutritional support are recommended. Liver values should also be monitored.





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