



PATIENT PRESENTING CLINICAL SIGNS

Culo Heald History: Pet has polydipsia and dilute urine SG 1.012. Otherwise pet is acting normal.
Abnormal PE/Chem/CBC/UA Results: CBC/Chemistry panel: within normal limits.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine Urinary System

The urinary bladder wall is 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 1-2 cm, are normal.

BREED

Goldendoodle

The prostate is normal in size (0.94 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

SEX

Male, neutered

The left kidney is normal size (6.47 cm in length) with an irregular shape. The cortex is variably thickened and there is moderate loss of corticomedullary distinction. A 1.60 cm septated cortical cyst is observed at the caudal aspect. There is a possible infarct at the caudal pole. There is no evidence of pyelectasia, nephroliths or hydroureter. Renal perfusion is normal to slightly reduced.

AGE

9 Yrs.

The right kidney is normal size (6.80 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. Renal perfusion is normal to slightly reduced.

WEIGHT

96 lbs.

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland is normal size (0.57 cm at cranial pole) (0.64 cm at caudal pole) (2.77 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 region of the right adrenal gland is evaluated. No obvious pathology is observed.

IMAGING PERFORMED BY

Dr. Sheldon

Spleen

The spleen is normal in size (2.39 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.

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Advanced PetCare
Oakland

Liver

The liver is normal to slightly prominent in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and homogeneous in appearance. No focal lesions are observed. 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. Luminal contents are mostly anechoic. The cystic and common bile ducts are normal/not seen.

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Gastrointestinal

The gastric 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

DATE

11/21/22



PATIENT

normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

Culo Heald

Pancreas

SPECIES

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.

Canine

BREED

Free Abdomen

Goldendoodle

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. 1-2 lymph nodes are visible at the aortic trifurcation, the largest measuring 2.30 cm in length. The nodes are normal in shape and echogenicity.

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ULTRASONOGRAPHIC FINDINGS

- Bilateral chronic renal changes with a suspected cortical infarct.

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*Differentials for the patient's PU/PD include early renal disease, occult pyelonephritis, Leptospirosis, occult hepatic dysfunction, hyperadrenocorticism (less likely), diabetes insipidus, psychogenic polydipsia, other.

WEIGHT

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- A urinalysis with a culture and sensitivity are recommended to assess for occult pyelonephritis.
- Other diagnostic considerations include the following:
 - Leptospirosis testing (i.e., blood and urine PCR, serology)
 - Pre and post prandial serum bile acids to assess hepatic function
 - ACTH stimulation test or low-dose Dexamethasone suppression test to evaluate for Cushing's disease
 - +/- DDAVP trial
 - +/- modified water deprivation test

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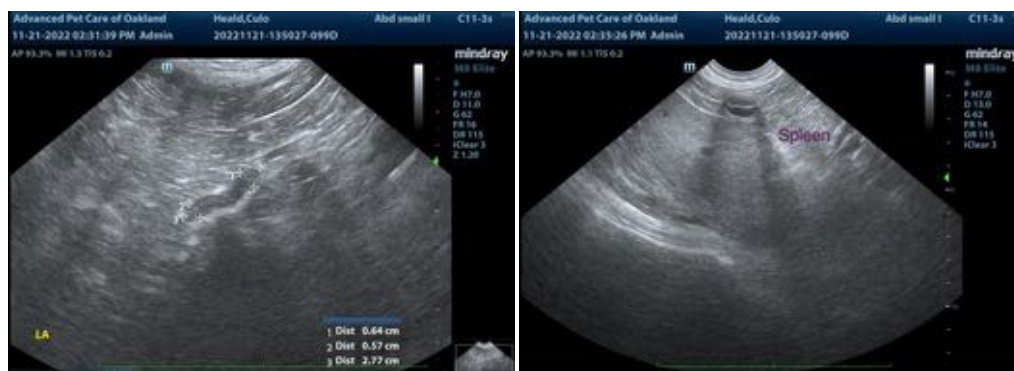
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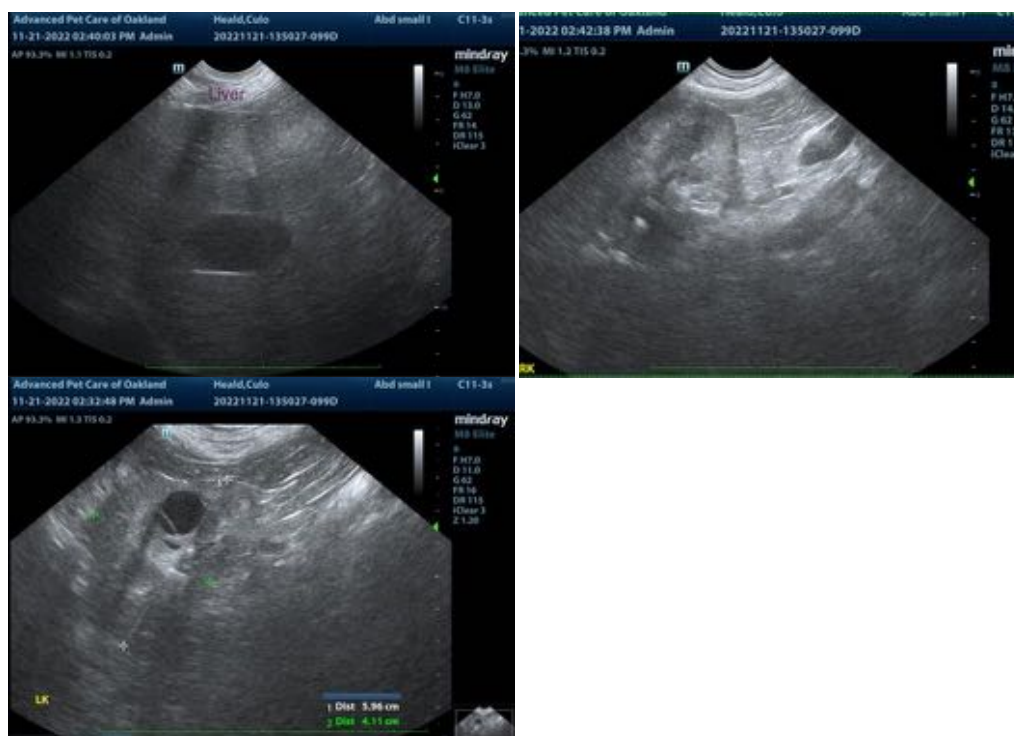
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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