



**PATIENT PRESENTING CLINICAL SIGNS**

Nina Cantos History: V/D lethargic

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**SPECIES**

Canine

**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 is normal.

**BREED**

Poodle

The left kidney is normal in size (3.18 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

**SEX**

Female

The right kidney is normal size (3.21 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

**AGE**

14 Yrs.

**Adrenal Glands**

The left adrenal gland is normal size (0.39 cm at cranial pole) (0.51 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.

**WEIGHT**

8.3 lbs.

**INTERPRETED BY**

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

What is thought to be the caudal pole of the right adrenal gland is normal size (0.51 cm in width) with normal shape, glandular echogenicity and detail. Surrounding vasculature appears normal.

**Spleen**

The spleen is normal in size (0.47 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**

Jenn

**Liver**

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and mottled in appearance. No focal lesions are observed. Hepatic vasculature 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 anechoic. The cystic and common bile ducts are normal/not seen.

**HOSPITAL NAME**

Rockaway

**REFERRING VET**

Dr. Maniar

**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 normal layering pattern. There is disruption in the normal 1:3 muscularis: mucosal ratio in most segments. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

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**Pancreas**

**DATE**

11/23/22



**PATIENT**

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.

Nina Cantos

**SPECIES**

**Free Abdomen**

Canine

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

**BREED**

Poodle

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings:**

**SEX**

- Bowel pattern suggestive of inflammatory bowel disease.

Female

**Secondary Findings:**

**AGE**

14 Yrs.

- Mild bilateral, age-related renal and hepatic changes with dystrophic mineralization.
- 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.

**WEIGHT**

8.3 lbs.

\*An obvious cause for the patient's clinical signs is not identified in this study. Considerations include dietary indiscretion, food allergy, intolerance, infectious/parasitic disease, underlying metabolic issue, mild pancreatitis, other.

**INTERPRETED BY**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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

- Baseline labwork including a CBC chemistry panel, urinalysis and T4 is recommended, if not already performed.
- A fecal evaluation for ova/Giardia is also recommended.
- Supportive care for acute gastroenteritis should be considered. If the patient's clinical signs do not begin to improve within 48-72 hours of initiating therapy, further workup may be warranted.

**IMAGING PERFORMED BY**

Jenn

**HOSPITAL NAME**

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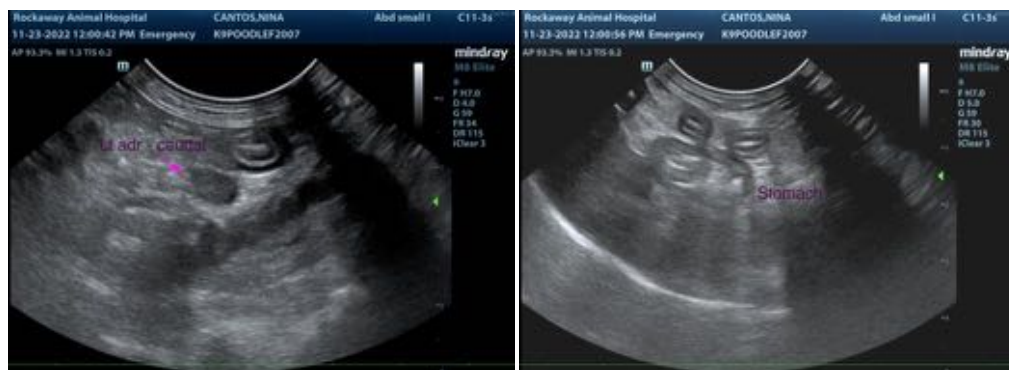
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## PATIENT

Nina Cantos

## SPECIES

Canine

## BREED

Poodle

## SEX

Female

## AGE

14 Yrs.

## WEIGHT

8.3 lbs.

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Andrea Nicastro, DVM,  
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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](mailto:info@SonoPath.com)