



## PATIENT PRESENTING CLINICAL SIGNS

**Rico Haight**  
**SPECIES**  
 History: Intermittent diarrhea starting in July. Abdominal radiograph showed rounded liver w/ a slight mass effect pushing stomach dorsally - rounded area of liver looks like a mass with part of the liver visible underneath it.  
 Abnormal PE/Chem/CBC/UA Results: Consistently elevated ALT and ALP; Recent ALT of 831, ALP of 221

Canine

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### BREED

Chihuahua Mix

### Urinary System

The urinary bladder is moderately distended. The wall is normal in thickness with a smooth mucosal surface. At least one cystic calculus is observed within the lumen (measuring 0.19 cm in diameter). The remaining luminal contents are mostly anechoic. The region of the trigone and the proximal urethra, visible to a depth of 2 cm, are normal.

### SEX

Neutered Male

The prostate is normal in size (0.74 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

### AGE

12

The left kidney is normal in size (3.69 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. Several nonobstructive nephroliths are visualized. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

### WEIGHT

11 lbs

No images provided of the right kidney.

## INTERPRETED BY

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

### Adrenal Glands

The left adrenal gland is mildly enlarged (0.51 cm at cranial pole) (0.61 cm at caudal pole) with a normal shape, glandular echogenicity and detail. The phrenicoabdominal vein and surrounding vasculature are normal.

No images provided of the right adrenal gland.

## IMAGING PERFORMED BY

Michelle Lindemulder DVM

### Spleen

The spleen is normal in size (0.72 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.

## HOSPITAL NAME

Southkent VH

### 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.

## REFERRING VET

Michelle Lindemulder

The gallbladder is severely distended. The wall is normal to mildly thickened (up to 0.25 cm). A moderate to large amount of aggregated, echogenic, suspended sludge, in a stellate pattern, is observed within the lumen. The mesentery effacing the serosal surface is slightly hyperechoic. The cystic and common bile ducts are normal/not seen.

## INVOICE

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### Gastrointestinal

## DATE

11-26-25

The gastric lumen is mildly gas-distended. The gastric wall is normal in thickness with a normal layering pattern. In the visible small intestinal segments, the wall appears normal in thickness. The lumen is not dilated. The visualized portion of the colonic wall is normal.



**PATIENT** *Pancreas*

Rico Haight

In the visualized portion of the left limb, it appears isoechoic relative to surrounding omental fat. No focal lesions are observed. The pancreatic duct is not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

**SPECIES**

Canine

*Lymph Nodes*

There is no obvious evidence of lymphadenopathy in the available images.

**BREED**

Chihuahua Mix

*Free Abdomen*

There is no obvious evidence of free fluid in the available images.

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

Neutered Male

**Primary Findings**

**AGE**

12

**WEIGHT**

11 lbs

- The gallbladder changes are consistent with a fully-formed mucocele, with suspected mild adjacent peritonitis.
- The hepatic changes are nonspecific and could be secondary to inflammatory disease (i.e., cholangiohepatitis, chronic hepatitis), hepatotoxicosis, infiltrative neoplasia (i.e., lymphoma), vacuolar hepatopathy, regenerative nodular hyperplasia, other hepatopathy, or some combination thereof.
- Cystic calculus/calculi
- Left age-related renal changes with nonobstructive nephrolithiasis (no images of the right kidney New Frontier Animal Medical Center)
- Mild left adrenomegaly (no images of the right kidney provided)

**INTERPRETED BY**

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(Small Animal Internal  
Medicine)

**IMAGING  
PERFORMED BY**

Michelle Lindemulder DVM

**HOSPITAL NAME**

Southkent VH

**REFERRING VET**

Michelle Lindemulder

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Given the gallbladder changes, a prophylactic cholecystectomy is recommended due to concern for potential rupture and subsequent bile/septic peritonitis. If surgery is pursued, liver biopsies should also be obtained. Also consider a cystotomy with stone removal, analysis and culture at the time of surgery. Clotting times and thoracic radiographs are recommended prior to anesthesia. Also consider obtaining the remaining ultrasound images (right kidney, right adrenal gland, right pancreas, intestinal segments) prior to surgery to assess for pathology.
- In the meantime, initiation of Ursodiol therapy and empirical broad-spectrum antibiotics (i.e., amoxicillin-clavulanic acid) as well as other symptomatic measures should be considered.

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**PATIENT**

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**SPECIES**

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**BREED**

Chihuahua Mix

**SEX**

Neutered Male

**AGE**

12

**WEIGHT**

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Michelle Lindemulder DVM

**HOSPITAL NAME**

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**REFERRING VET**

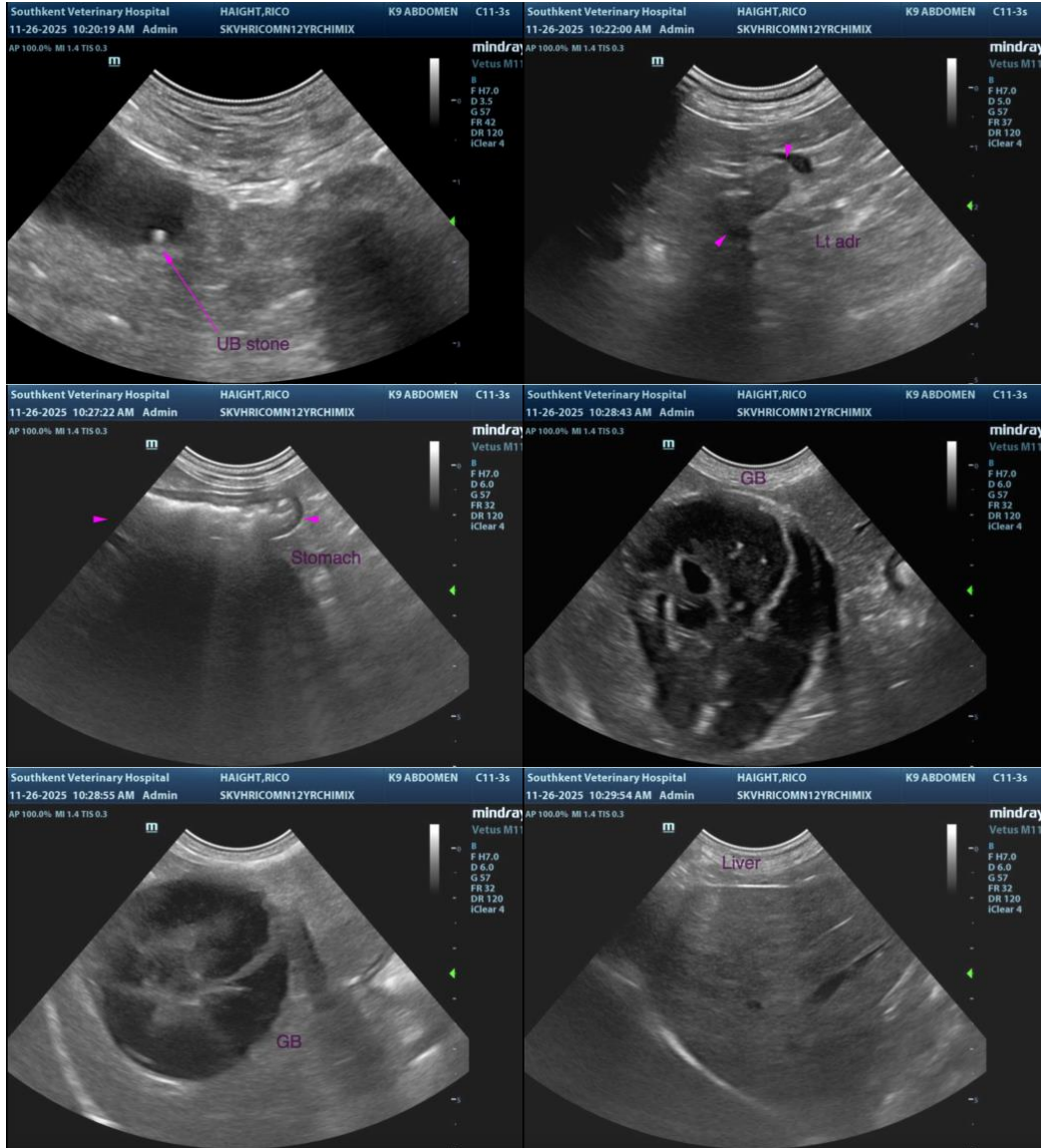
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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)**  
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