



PATIENT PRESENTING CLINICAL SIGNS

Jack Tocco History: Acute diarrhea.
Abnormal PE/Chem/CBC/UA Results: 9/15/22 ALP 503, CPL 267 11/1/22 ALP 543, CPL 305

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine *Urinary System*

The urinary bladder wall is normal in thickness and the mucosal surface in the region of the apex is slightly irregular. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

BREED

Bichon Frise mix

The prostate is normal in size (1.01 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 (4.79 cm in length) with a normal shape and smooth peripheral contours. The cortex is diffusely thickened and hyperechoic with several small cortical cysts. There is moderate loss of corticomedullary distinction. Mild pyelectasia is present (0.21 cm in the transvers plane). There is no evidence of infarcts or hydroureter.

AGE

13 Yrs.

The right kidney is normal size (5.18 cm in length) with a normal shape and smooth peripheral contours. The cortex is diffusely thickened and hyperechoic with several small cortical cysts. There is moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

WEIGHT

21 lbs.

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland is borderline enlarged (0.59 cm at cranial pole) (0.56 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 right adrenal gland is borderline enlarged (0.49 cm at cranial pole) (0.61 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.

IMAGING PERFORMED BY

Amy Mayhew

Spleen

HOSPITAL NAME

SVS Imaging Michigan

The spleen is normal in size (0.87 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.

REFERRING VET

Oxford VH

Liver

The liver is subjectively enlarged with swollen peripheral contours. The parenchyma is isoechoic relative to the spleen and subtly mottled in appearance. An approximately 3 cm swelling is observed at the caudal aspect, near the portal hilus. Vascular and biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is distended. The wall is thin and smooth. A large amount of aggregated, echogenic suspended sludge in a partially stellate pattern is observed within the lumen. The cystic and common bile ducts are normal/not seen.

INVOICE

14283

Gastrointestinal

DATE

11/28/22



PATIENT

Jack Tocco

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not distended. 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 thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

SPECIES

Canine

Pancreas

The right limb of the pancreas is normal in size with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

BREED

Bichon Frise mix

SEX

Male, neutered

Free Abdomen

There is no evidence of free fluid. A 1.32 cm rounded hypoechoic, medial iliac lymph node is visualized. In addition, a 1.85 cm hypoechoic rounded lymph node is observed in the cranial abdomen.

AGE

13 Yrs.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- The gallbladder changes are most consistent with an emerging mucocele.
- The diffuse hepatic parenchymal changes are non-specific and are most consistent with a benign process (i.e., vacuolar hepatopathy). The swelling at the caudal aspect could be consistent with a rounded, benign liver lobe. Alternatively, an emerging tumor is possible.
- The abdominal lymphadenopathy could be consistent with emerging neoplasia (i.e., lymphoma), reactive lymphadenitis or lymphoid hyperplasia.

Secondary Findings:

- Age-related pancreatic remodeling in the right limb.
- The bilateral renal changes are most consistent with chronic interstitial nephrosis/nephritis with cortical cysts.
- Borderline bilateral adrenomegaly.

INTERPRETED BY

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

IMAGING PERFORMED BY

Amy Mayhew

HOSPITAL NAME

SVS Imaging Michigan

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Regarding the gallbladder changes, a prophylactic cholecystectomy can be considered. If pursued, liver biopsies should be obtained at the time of surgery and the swollen portion of the liver biopsied +/- removed with submission for histopathology. If a more conservative approach is desired at this time, consider initiation of Ursodiol therapy with serial sonographic monitoring (i.e., every 4-6 weeks) to assess for progression. The swollen area of liver should also be sonographically monitored.
- Serial monitoring (i.e., every 3 months) of the patient's liver values is also recommended to assess for worsening.

REFERRING VET

Oxford VH

INVOICE

14283

DATE

11/28/22



PATIENT

Jack Tocco

- With regard to the abdominal lymphadenopathy, consider a fine needle aspirate of the enlarged medial iliac lymph node, if clotting status is appropriate. A 25-gauge needle should be used.

SPECIES

Canine

- Consider testing for hyperadrenocorticism with a low-dose dexamethasone suppression test or ACTH stimulation test if clinical signs (i.e., PU/PD) develop.

BREED

Bichon Frise mix

SEX

Male, neutered

AGE

13 Yrs.

WEIGHT

21 lbs.

INTERPRETED BY

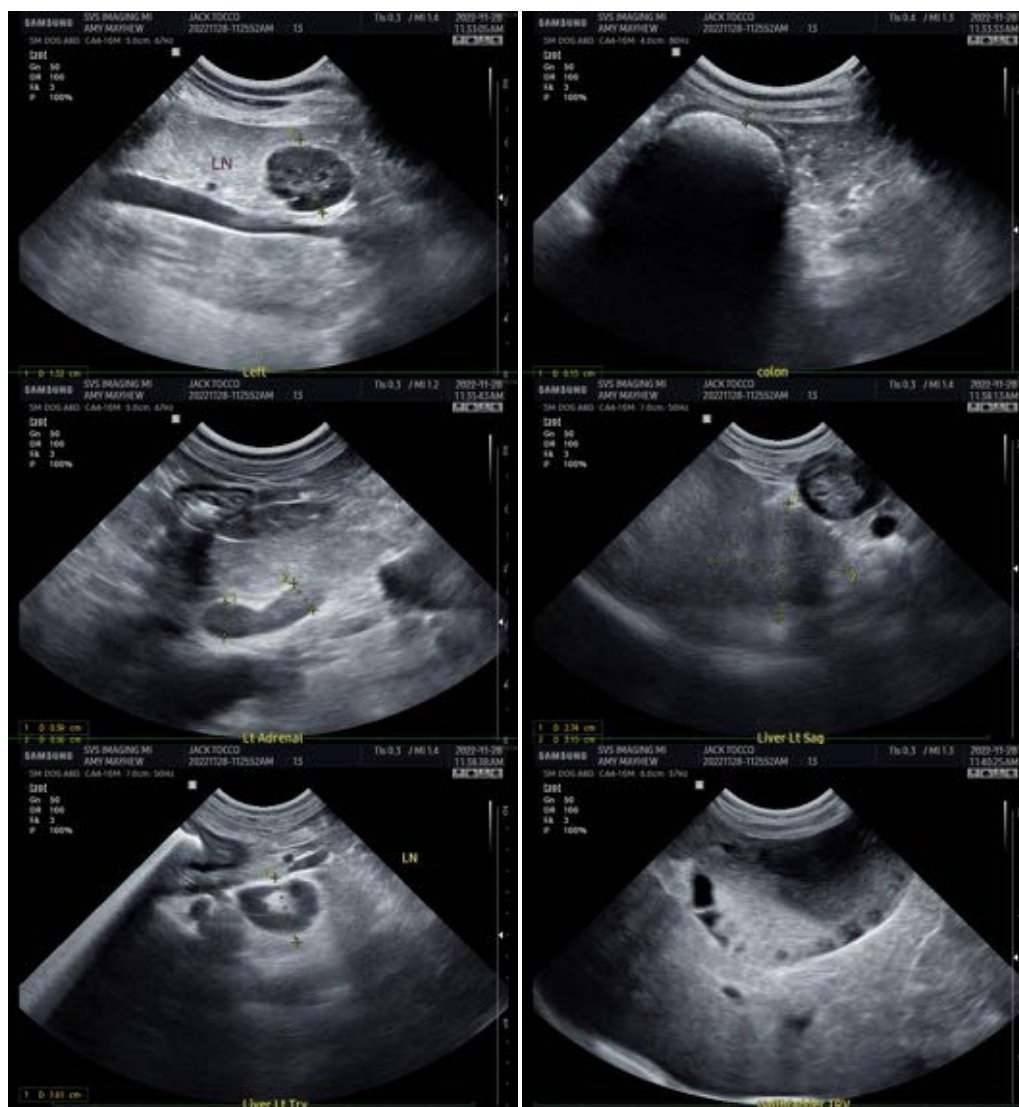
Andrea Nicastro, DVM,
Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Amy Mayhew

HOSPITAL NAME

SVS Imaging Michigan



REFERRING VET

Oxford VH

INVOICE

14283

DATE

11/28/22



PATIENT

Jack Tocco

SPECIES

Canine

BREED

Bichon Frise mix

SEX

Male, neutered

AGE

13 Yrs.

WEIGHT

21 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Amy Mayhew

HOSPITAL NAME

SVS Imaging Michigan

REFERRING VET

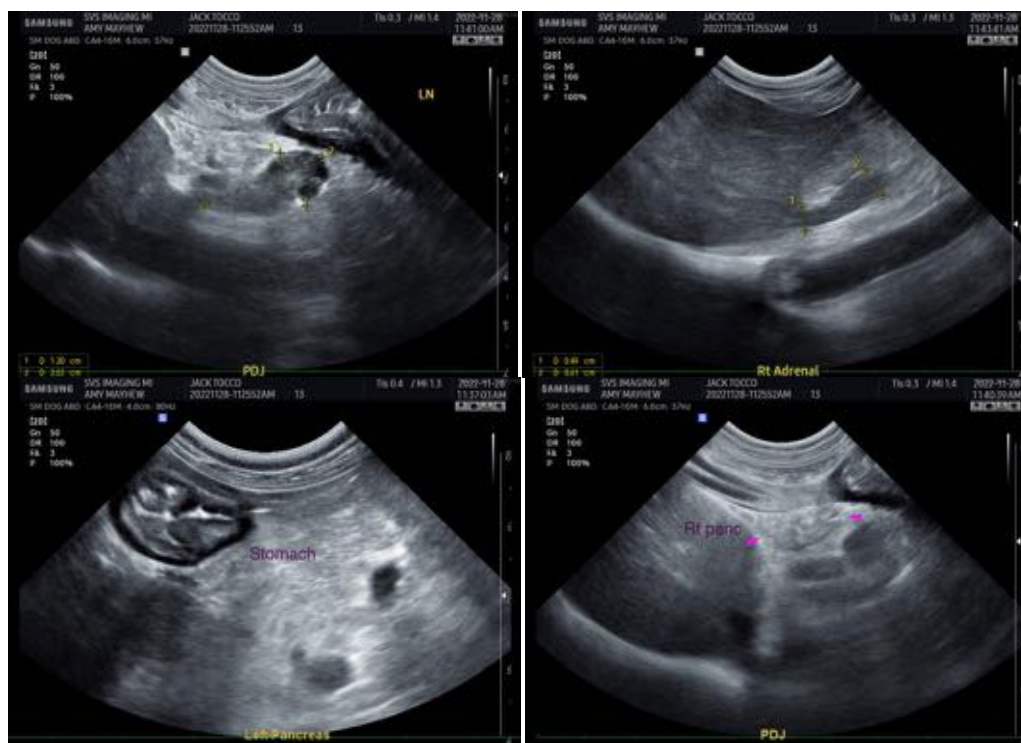
Oxford VH

INVOICE

14283

DATE

11/28/22



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