



## PATIENT PRESENTING CLINICAL SIGNS

**Buddy Petrosino** History: Presented for acute onset vomiting bile after ingesting raisins and chestnuts. Otherwise doing well at home

**SPECIES** Abnormal PE/Chem/CBC/UA Results: CBC/Chemlytes: WNL

## Canine ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### BREED *Urinary System*

Labrador Retr The urinary bladder wall is normal in thickness. The mucosal surface is smooth. The bladder is moderately distended. Luminal contents are anechoic. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 5 cm, are normal.

**SEX** The prostate is enlarged (4.18 cm in width) with smooth peripheral contours. Parenchyma is hyperechoic relative to surrounding omental fat and heterogenous-in appearance, with some small, ill-defined cystic areas. The prostatic urethra is not overtly dilated.

Intact Male

**AGE** The left kidney is subjectively normal-in-size, with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

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**WEIGHT** The right kidney is normal in size (8.03 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

76 lbs

## INTERPRETED BY

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

### *Adrenal Glands*

The left adrenal gland is normal in size (0.76 cm at cranial pole) (0.71 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.

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The region of the right adrenal gland is evaluated. No obvious pathology is observed in this region.

### *Spleen*

The spleen is overall normal- to prominent-in-size (1.81 cm in width at the level of the hilus) with a normal capsular contour. The parenchyma is diffusely mottled in appearance. A 5.9 x 4.5 cm heterogenous, expansile mass is arising from the parenchyma. Splenic vasculature is normal.

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### *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.

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The gallbladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

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### *Gastrointestinal*

The gastric lumen is not distended. a 2.0 cm shadowing structure is observed within the lumen. The gastric wall is normal in thickness with a normal layering pattern. 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 colonic wall is normal. There is no evidence of an

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**PATIENT** obstructive pattern.

Buddy Petrosino

**Pancreas**

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.

**SPECIES**

Canine

**Lymph Nodes**

The abdominal lymph nodes are normal/not visible.

**BREED**

Labrador Retr

**Free Abdomen**

The peritoneal cavity is normal. There is no evidence of inflammation or effusion.

**SEX**

Intact Male

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings**

**AGE**

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- Splenic mass. Neoplasia (i.e., round cell tumor, sarcoma, other) is suspected, with a lower possibility of a benign process (i.e., focus of lymphoid hyperplasia or similar). The diffuse splenic parenchymal changes could be consistent with lymphoid hyperplasia, extramedullary hematopoiesis, splenitis, antigenic stimulation, infiltrative neoplasia, other.

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76 lbs

**Secondary Findings**

- Mild, bilateral nonspecific age-related renal changes
- The shadowing material within the gastric lumen may represent normal ingesta and/or foreign material. It appears nonobstructive at the time of this study.
- The prostate changes are most consistent with cystic benign prostatic hyperplasia, with a lower possibility of infiltrative neoplasia. Concurrent bacterial prostatitis is also possible. Correlation with the patient's urinalysis and clinical history is recommended.

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\*It is unclear if the splenic mass is associated with the patient's clinical signs or if this is an incidental finding.

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Regarding the splenic mass, consider the following:
  1. Three-view thoracic radiographs are recommended to assess for pulmonary metastases
  2. Fine-needle aspiration (assuming normal clotting status). A 25-gauge needle should be used.

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- Regarding the patient's clinical signs, consider the following:

1. Fecal evaluation for ova and Giardia
2. Serial monitoring of the patient's bloodwork to assess organ functions
3. Supportive care for gastroenteritis/dietary indiscretion
4. If clinical signs persist despite medical management, further work-up may be indicated.

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**PATIENT**

Buddy Petrosino

**SPECIES**

Canine

**BREED**

Labrador Retr

**SEX**

Intact Male

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**REFERRING VET**

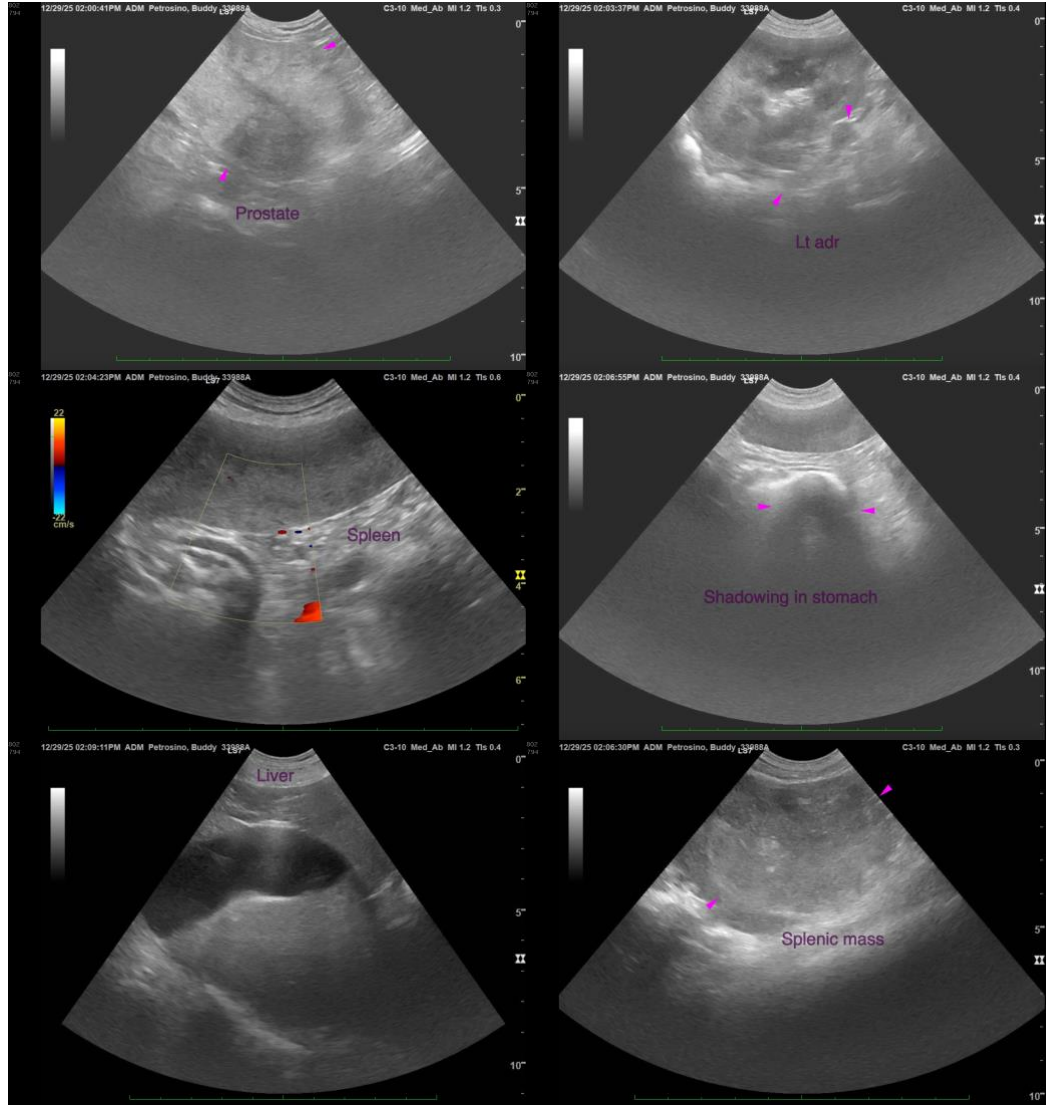
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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