



**PATIENT PRESENTING CLINICAL SIGNS**

Bonnie Hinchey

**SPECIES**

Canine

**BREED**

Border Collie

**SEX**

Female Spayed

**AGE**

12-08-2013

**WEIGHT**

17.30 kg

**INTERPRETED BY**

Andrea Nicastrò DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**IMAGING PERFORMED BY**

Andrea Nicastrò DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**HOSPITAL NAME**

PawMed VUC W Ashley

**REFERRING VET**

Dr. Erin Watts, DVM

**INVOICE**

22236

**DATE**

12-8-25

Clinical Exam Findings:  
Mucous Membranes: Icteric  
Hydration Status: 5-6%  
Body Condition Score: 5/9  
Pain Score: 3/4  
Fear Anxiety Stress Score: Mild to Moderate  
Eyes: Sclera are icteric  
Ears: External ear canals are free of debris. Pinnae are icteric  
Nasal: no nasal discharge bilaterally  
Oral/Dental: grade 2/4 mild-mod tartar  
Cardiovascular: heart auscultates normal  
Respiratory: lungs auscultate clear; no crackles or wheezes  
Neurological: No ataxia, CPs intact, no overt CN deficits noted  
Musculoskeletal: Ambulatory x4  
Lymphatic: LNs palpate normal size, texture, location  
Gastrointestinal: Abdomen is mildly distended. A brief ultrasound scan revealed an abnormal-appearing liver.  
Reproductive/Urinary: Not mentioned  
Integument: The skin is diffusely icteric. Alopecia is noted on the dorsal aspect of the hocks and the caudal aspect of the thighs.  
Masses: Not mentioned

Abnormal lab-work values/Chemistry Results: GLOB 3.8. TCHO 425. ALP >993. GGT 28. TBIL 8.8  
K 3.7. CBC  
Results Lymphopenia 0.12 (RI 0.83-4.91)  
PT: 18.7 (RI 12.0-17.0)  
aPTT: 111.4 (RI 96-116)  
SNAP 4DX NEG  
cPLI ABNORMAL  
Current Medications: n/a

Abdominal/Thoracic Rads Findings: 6 projections of the thorax and abdomen.  
Cardiopulmonary structures, mediastinum, and pleural space are normal. Trachea and mainstem bronchi are patent.  
Visible aspects of the liver, spleen, kidneys, and urinary bladder are normal. Stomach contains granular soft tissue material. Small intestinal tract is uniform and normal in size and the colon contains feces. Formed feces in the colon. Serosal detail is adequate.  
Moderate spondylosis deformans at L2-3. Mild bilateral periarticular coxofemoral osteophytosis.  
Assessment:  
Normal thorax.  
Gastric material may represent food/chyme. Nonobstructive foreign material cannot be ruled out. No evidence of mechanical obstruction on this study.  
Bilateral hip osteoarthritis.  
Clinical signs could be secondary to primary gastrointestinal or hepatic disease. Given the reported history and blood work findings, recommend abdominal ultrasound for further evaluation of the liver and gastrointestinal tract. Specialist: Dr. Adam Schlax, DACVR



**PATIENT                      ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Bonnie Hinchey

**Urinary System**

The urinary bladder is moderately distended. The wall is normal in thickness with a smooth mucosal surface. A small amount of gravity-dependent mineralized sand +/- tiny, cystic calculi are observed within the lumen. The region of the trigone and the proximal urethra, visible to a depth of 3-4 cm, are normal.

**SPECIES**

Canine

**BREED**

Border Collie

The left kidney is normal in size (6.02 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 hydronephrosis. Renal vasculature is normal.

**SEX**

Female Spayed

The right kidney is normal in size (5.91 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 hydronephrosis. Renal vasculature is normal.

**AGE**

12-08-2013

**Adrenal Glands**

The left adrenal gland is subjectively normal in length, with a slightly flattened contour (0.39 cm at cranial pole) (0.48 cm at caudal pole). Glandular echogenicity and detail are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

**WEIGHT**

17.30 kg

The right adrenal gland is subjectively normal in length, with a slightly flattened contour (0.69 cm at cranial pole) (0.43 cm at caudal pole). Glandular echogenicity and detail are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

**INTERPRETED BY**

Andrea Nicastrò DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**Spleen**

The spleen is subjectively normal in size with a normal capsular contour. There is appropriate echogenicity and echotexture. A 1.29 x 0.72 cm hypoechoic nodule is observed approximately mid-spleen. Splenic vasculature is normal.

**IMAGING PERFORMED BY**

Andrea Nicastrò DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**Liver**

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and slightly heterogeneous in appearance. No distinct focal lesions are observed. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion. The portal vein to caudal vena cava ratio is approximately 1:1.

**HOSPITAL NAME**

PawMed VUC W Ashley

The gallbladder is distended. The wall is normal in thickness. The lumen is completely filled with echogenic-to-mineralized sludge, with a few suspected choleliths. The cystic duct is questionably visualized. The common bile duct is not seen.

**REFERRING VET**

Dr. Erin Watts, DVM

**Gastrointestinal**

The gastric lumen is minimally-to-mildly distended with ingesta. 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 is normal in thickness with retention of the normal layering pattern. At least one bowel segment is slightly plicated in appearance. Discreet masses are not identified. The colonic wall is normal. There is no obvious evidence of an obstructive pattern.

**INVOICE**

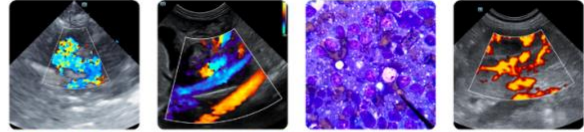
22236

**Pancreas**

The right limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is slightly hypoechoic 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.

**DATE**

12-8-25



**PATIENT**

Bonnie Hinchey

**Lymph Nodes**

The abdominal lymph nodes are normal/not visible.

**SPECIES**

Canine

**Free Abdomen**

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

**BREED**

Border Collie

**Other**

A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings**

**SEX**

Female Spayed

- The gallbladder changes are most consistent with a mucocele with mineralized sand and suspected small choleliths

**AGE**

12-08-2013

- The hepatic changes are nonspecific and could be secondary to inflammatory disease (i.e., cholangiohepatitis, chronic hepatitis), Leptospirosis, hepatotoxicosis, infiltrative neoplasia (i.e., lymphoma), vacuolar hepatopathy, regenerative nodular hyperplasia, other hepatopathy, or some combination thereof.

**WEIGHT**

17.30 kg

- Urinary bladder sediment +/- tiny cystic calculi

**Secondary Findings**

**INTERPRETED BY**

Andrea Nicastrò DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

- The flattened glands may be a normal variant or could be consistent with early atrophy (i.e., secondary to hypoadrenocorticism)
- Mild, bilateral, nonspecific age-related renal changes
- The hypoechoic splenic nodule trends toward the benign (i.e., focus of lymphoid hyperplasia or similar) with a lower possibility of emerging neoplasia.
- The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.

**IMAGING PERFORMED BY**

Andrea Nicastrò DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**HOSPITAL NAME**

PawMed VUC W Ashley

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

A cholecystectomy with submission of the gallbladder for histopathology, as well as aerobic and anaerobic bile cultures is recommended. Liver biopsies +/- hepatic copper quantitation should also be performed. If surgery is pursued, also consider a cystotomy with stone/sand removal, analysis and culture. Clotting times and thoracic radiographs are recommended prior to anesthesia.

**REFERRING VET**

Dr. Erin Watts, DVM

**INVOICE**

22236

**DATE**

12-8-25



**PATIENT**

Bonnie Hinchey

**SPECIES**

Canine

**BREED**

Border Collie

**SEX**

Female Spayed

**AGE**

12-08-2013

**WEIGHT**

17.30 kg

**INTERPRETED BY**

Andrea Nicastrò DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**IMAGING PERFORMED BY**

Andrea Nicastrò DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**HOSPITAL NAME**

PawMed VUC W Ashley

**REFERRING VET**

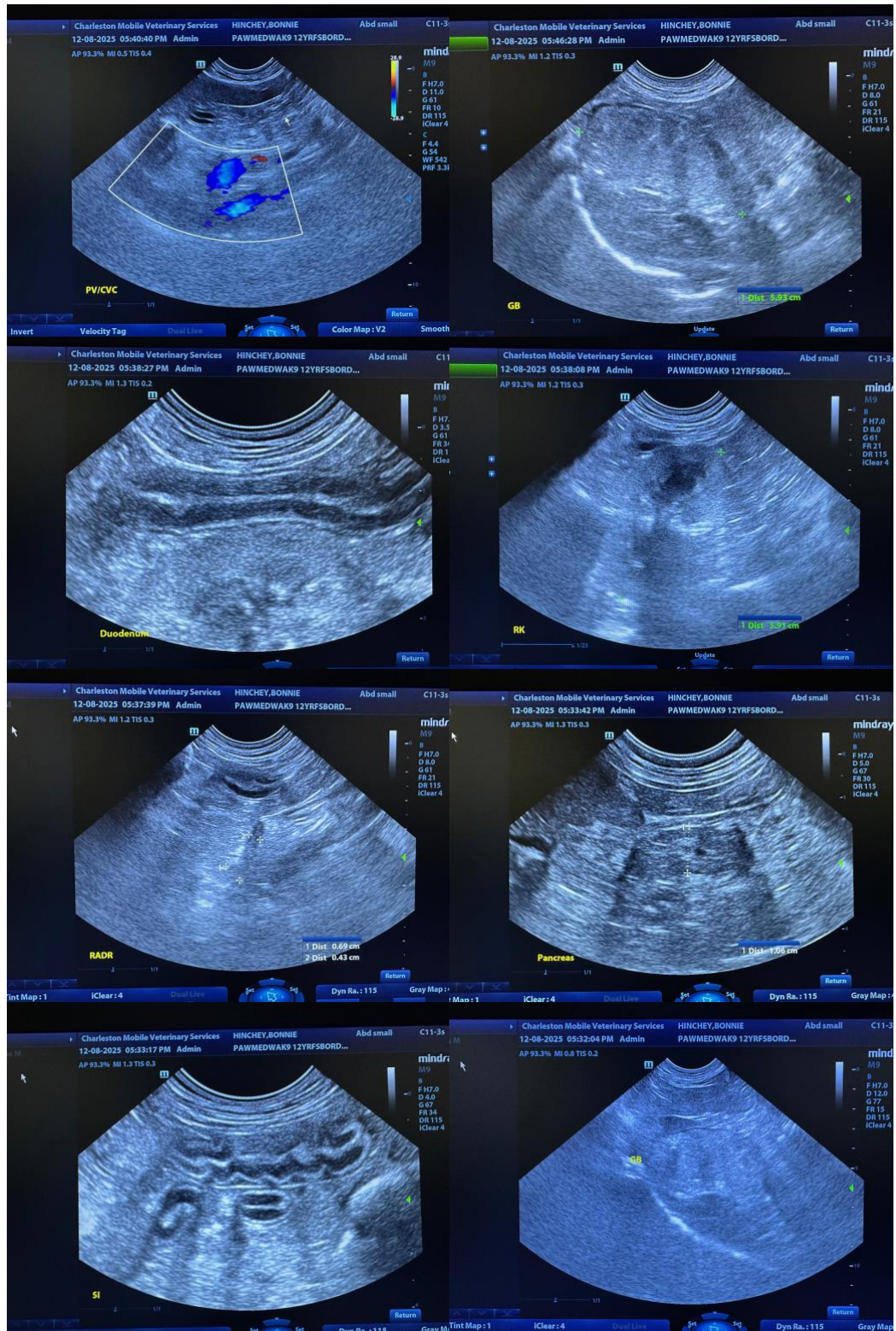
Dr. Erin Watts, DVM

**INVOICE**

22236

**DATE**

12-8-25





**PATIENT**

Bonnie Hinchey

**SPECIES**

Canine

**BREED**

Border Collie

**SEX**

Female Spayed

**AGE**

12-08-2013

**WEIGHT**

17.30 kg

**INTERPRETED BY**

Andrea Nicastrò DVM  
 Diplomate ACVIM  
 (Sm Animal Internal Med)

**IMAGING PERFORMED BY**

Andrea Nicastrò DVM  
 Diplomate ACVIM  
 (Sm Animal Internal Med)

**HOSPITAL NAME**

PawMed VUC W Ashley

**REFERRING VET**

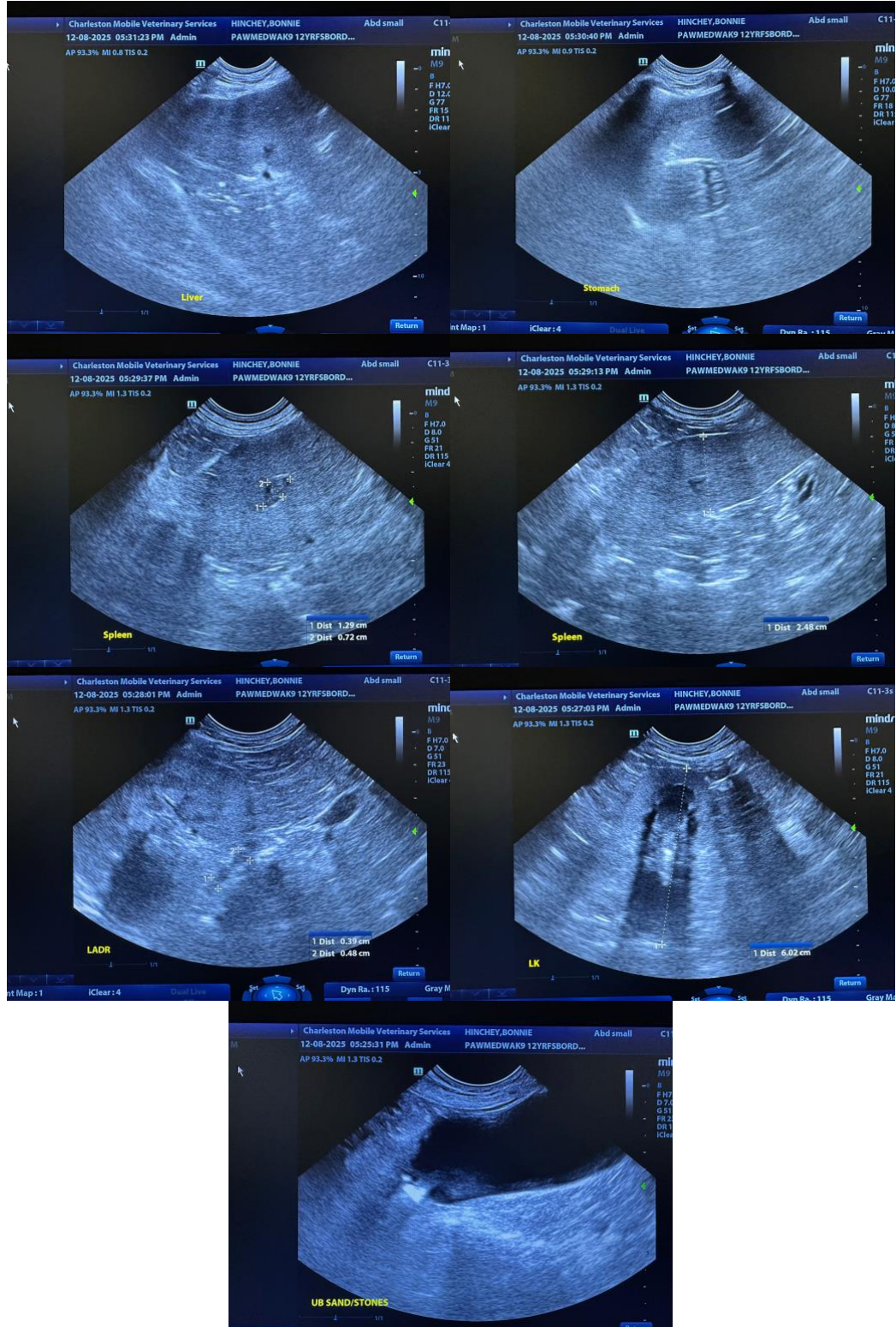
Dr. Erin Watts, DVM

**INVOICE**

22236

**DATE**

12-8-25





**PATIENT**

Bonnie Hinchey

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.

**SPECIES**

Canine

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.

**BREED**

Border Collie

**Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)**  
[info@SonoPath.com](mailto:info@SonoPath.com)

**SEX**

Female Spayed

**AGE**

12-08-2013

**WEIGHT**

17.30 kg

**INTERPRETED BY**

Andrea Nicastro DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**IMAGING  
PERFORMED BY**

Andrea Nicastro DVM  
Diplomate ACVIM  
(Sm Animal Internal Med)

**HOSPITAL NAME**

PawMed VUC W Ashley

**REFERRING VET**

Dr. Erin Watts, DVM

**INVOICE**

22236

**DATE**

12-8-25