



PATIENT

Chiqui Castro

SPECIES

Canine

BREED

Yorkie

SEX

Female, intact

AGE

14 Yrs.

WEIGHT

9.2 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Reyes

HOSPITAL NAME

Mobile Vet Ultrasound

REFERRING VET

Dr. Correa

INVOICE

14579

DATE

2/14/23

PRESENTING CLINICAL SIGNS

History: Presented for mammary gland tumors. Owner is thinking about surgery to remove tumors and spay. Pet's heart appears enlarged on radiographs, echocardiogram would be done today. No other concerns. Pet has a pot belly appearance on PE. Cytology of affected mammary glands came back as inflamed epithelial neoplasm.

Abnormal PE/Chem/CBC/UA Results: BUN: 48.5 Chol: 417 Trig: 315

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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.

The left kidney is normal size (4.13 cm in length); normal shape and architecture with smooth peripheral margins. The cortex is isoechoic relative to the spleen. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. A few small cortical cysts are seen. Mild pyelectasia (0.20 cm in the longitudinal plane) is present. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal size (4.46 cm in length); normal shape and architecture with smooth peripheral margins. The cortex is isoechoic relative to the spleen. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. Hyperechoic shadowing diverticular foci are visualized. Several small cortical cysts are seen. Trace pyelectasia is present. There is no evidence of infarcts or hydroureter.

Adrenal Glands

The left adrenal gland is prominent at the cranial pole and normal at the caudal pole (0.69 cm at cranial pole) (0.50 cm at caudal pole) with a slightly irregular shape. A 1.05 x 0.69 cm echogenic nodule is observed at the cranial aspect. The glandular echogenicity and detail at the caudal aspect are unremarkable. Surrounding vasculature appears normal.

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

Spleen

The spleen is normal in size (0.84 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.

Liver

The liver is subjectively enlarged with slightly swollen peripheral contours. The parenchyma is hypoechoic relative to the spleen and diffusely homogeneous in appearance. No distinct focal lesions are observed. Vascular 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. A scant amount of echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

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



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normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

Pancreas

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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.

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Free Abdomen

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

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Other

The left ovary is subjectively normal in size (1.67 x 0.80 cm). A 0.81 x 0.47 cm cystic structure is observed within the gland. The parenchyma is otherwise homogeneous.

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The uterine body is visible and is subjectively normal in size (1.01 cm in width). The uterine horns are also visible at the bifurcation. A scant amount of fluid is observed in one uterine horn.

A few ring down lesions are suspected within the thoracic cavity.

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ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- There is no obvious evidence of metastatic disease in the abdomen.

Secondary Findings:

- Bilateral, chronic age-related renal changes with cortical cysts, pyelectasia and right dystrophic mineralization.
- The left adrenal nodule may represent a benign nodular hyperplasia or an emerging tumor.
- The mild hepatomegaly likely represents a benign process (i.e., emerging vacuolar hepatopathy) with a lower possibility of more insidious pathology.
- The ring down lesions in the thorax are concerning for pulmonary parenchymal disease.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for metastatic disease in the chest.
- Further recommendations should be based on the echocardiogram report.

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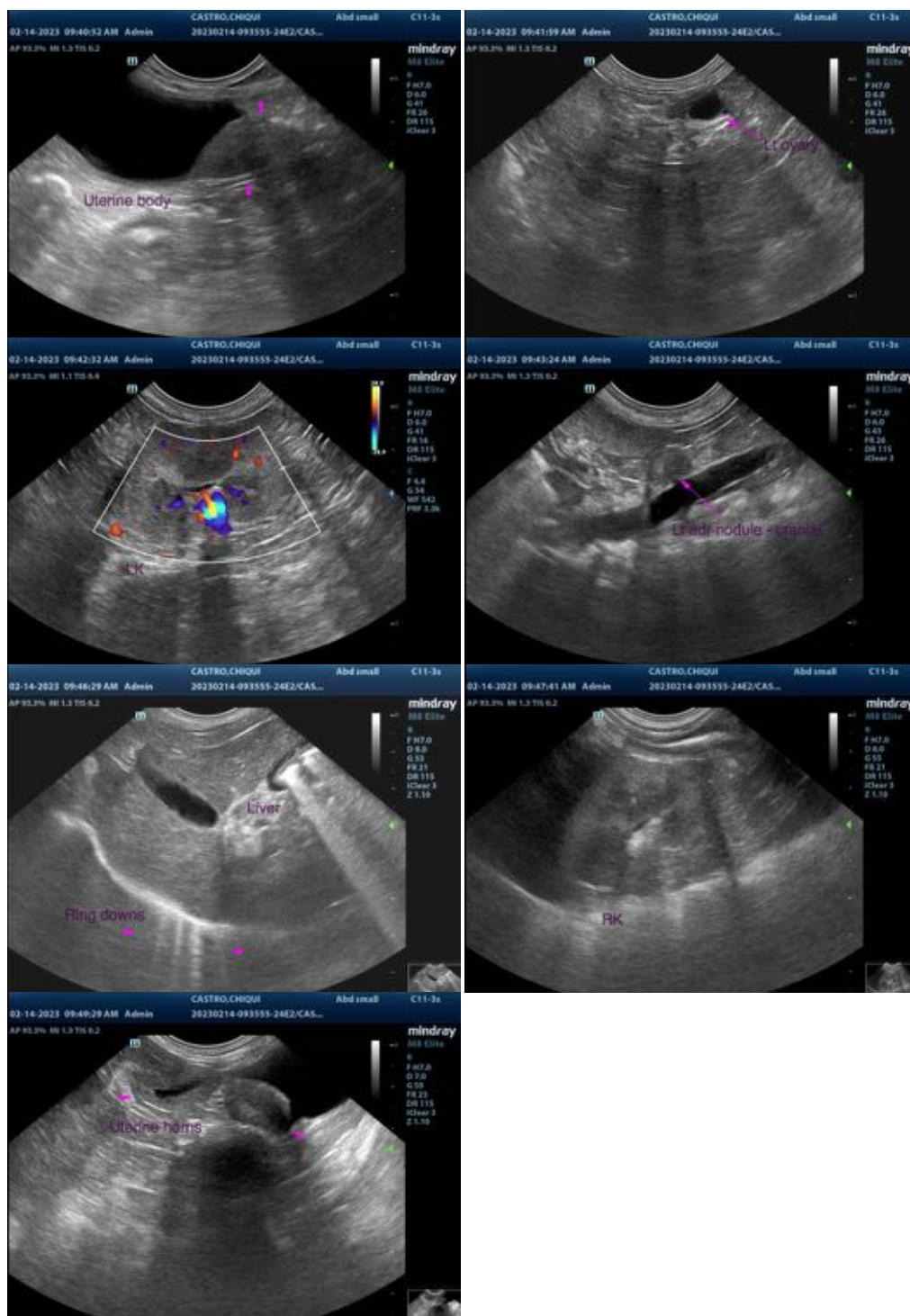
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com

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