



PATIENT

Bailey Miles

SPECIES

Canine

BREED

Chihuahua mix

SEX

Female, spayed

AGE

16 Yrs.

WEIGHT

5 kg.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Amy Hess

HOSPITAL NAME

PetMedic Urgent Care

REFERRING VET

Dr. Amy Hess

INVOICE

14618

DATE

2/21/23

PRESENTING CLINICAL SIGNS

History: Acute vomiting last night and dizziness, suspect vestibular episode long history of CKD managed with KD diet on galliprant for arthritis
Abnormal PE/Chem/CBC/UA Results: BW pend to IDEXX recent labwork showed very mild azotemia Pe unremarkable

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 and the visible portion of the proximal urethra are normal.

The left kidney is normal in size (2.88 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. Mild pyelectasia is present (0.18 cm in the longitudinal plane). There is no evidence of infarcts or hydroureter.

The right kidney is normal in size (2.62 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild to moderate loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis.

Adrenal Glands

The left adrenal gland is normal size (0.55 cm at cranial pole) (0.50 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.

No images of the right adrenal gland provided.

Spleen

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. 1-2 small hyperechoic nodules are visualized, the largest measuring 0.52 cm in length. Splenic vasculature is normal.

Liver

The liver is subjectively prominent in size with normal curvilinear peripheral contours. The parenchyma is isoechoic 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 moderate amount of aggregated echogenic debris/sludge is observed within the lumen, some of which is partially dependent and some of which is adhered to the mucosal surface. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

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 segmentally dilated with chyme (mild). The



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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.

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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

Chihuahua mix

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

SEX

ULTRASONOGRAPHIC FINDINGS

Female, spayed

Primary Findings:

AGE

- Bilateral, degenerative renal changes with dystrophic mineralization and left pyelectasia.

16 Yrs.

Secondary Findings:

WEIGHT

- The hyperechoic lesions adjacent to the splenic vessels are most consistent with myelolipomas. Although a neoplastic process within the spleen cannot be excluded, it is considered unlikely in this patient.
- The hepatic parenchymal changes are most consistent with a benign hepatopathy. Vacuolar hepatopathy (i.e., endocrine, idiopathic) is a top differential. However correlation with the patient's liver values is recommended.
- The gallbladder debris/sludge could be consistent with cholestasis, fasting or a developing mucocele.

5 kg.

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*An obvious cause for the patient's clinical signs is not identified in this study.

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(*Small Animal Internal
Medicine*)

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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- Consider a baseline blood pressure measurement to assess for systemic hypertension.
- Also consider thoracic radiographs +/- cardiac workup (if indicated).
- While awaiting bloodwork results, symptomatic care for vestibular disease is recommended. If the patient's clinical signs do not improve within 5-7 days, consider consultation with a board certified neurologist for further workup.

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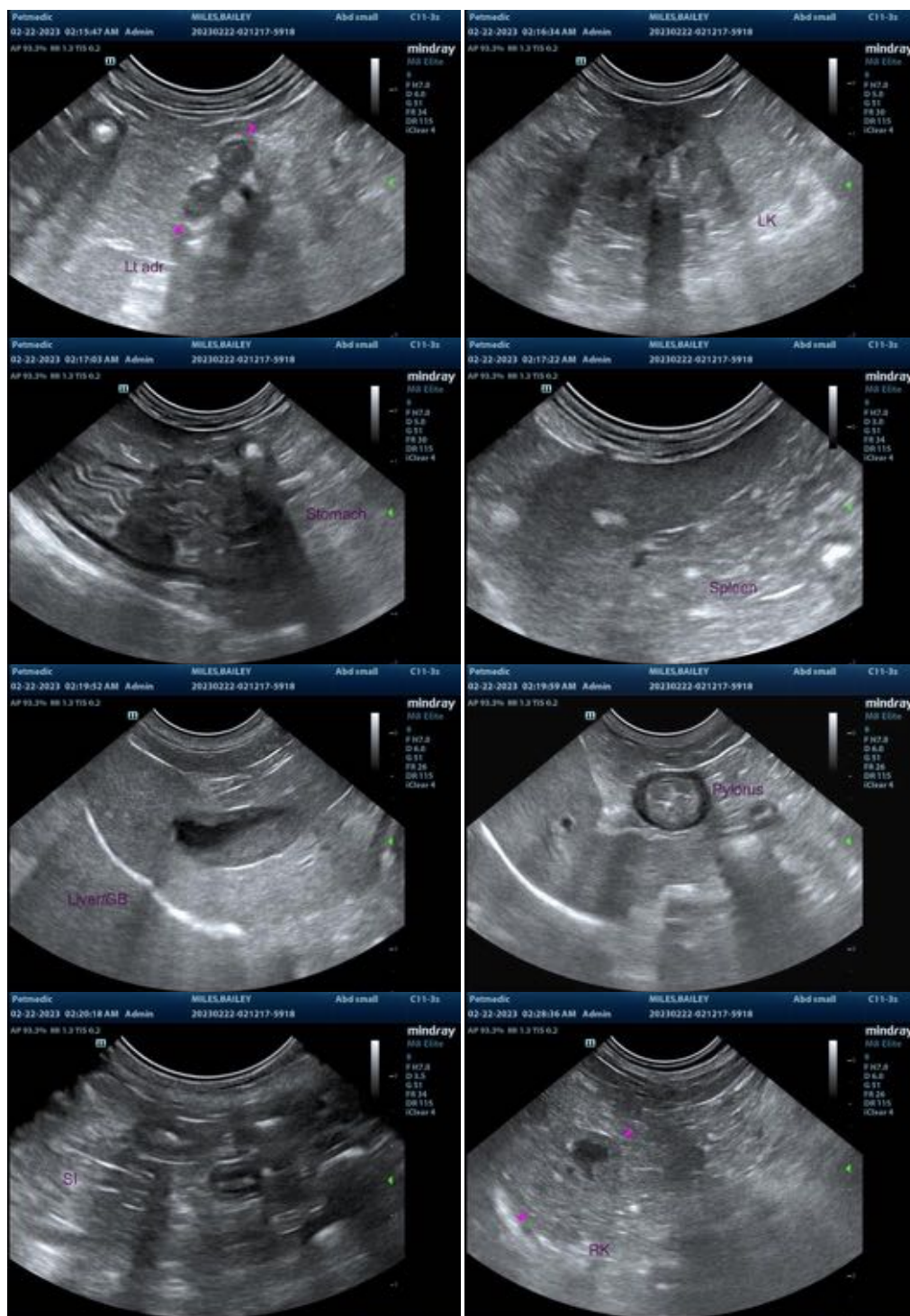
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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