



PATIENT PRESENTING CLINICAL SIGNS

Penny Finn

SPECIES

Canine

History: P presented on 1/4/22 for hematochezia and vomiting. Chem 10/CBC and 3-view abdominal rads were WNL. SNAP cPL abnormal. Treated supportively with low fat food, fluids and anti-nausea meds. Mild improvement but P has continued with hyporexia since. Weight down from 13.6 in January to 13.0 pounds today.

Abnormal PE/Chem/CBC/UA Results: Snap cPL: Abnormal

BREED

Papillon

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Spayed Female

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended. A scant amount of suspended echogenic debris is observed within the lumen. 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.

AGE

12 years

The left kidney presented normal size (3.48 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

WEIGHT

13 lbs

The right kidney presented normal size (4.20 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland is normal size (0.44 cm at cranial pole) (0.51 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

Dr. Saum Hadi

The right adrenal gland is normal size (0.92 cm at cranial pole) (0.47 cm at caudal pole) (1.42 cm in length); 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.

HOSPITAL NAME

Bethany Family Pet
Clinic

Spleen

The spleen is subjectively normal in size (1.19 cm in width at the level of the hilus) with normal curvilinear peripheral contours. The parenchyma is diffusely mottled in appearance. A few tiny myelolipomas are seen. Splenic vasculature is normal with no evidence of thrombosis.

REFERRING VET

Dr. Saum Hadi

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. No pathological hepatic lymphadenopathy observed.

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The gall bladder lumen is moderately distended. The wall is thin and smooth. A 0.69 cm cholelith is observed at within the lumen along with a small amount of echogenic to mineralized debris. The cystic and common bile ducts are normal.

DATE

2/23/22

Gastrointestinal



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The gastric lumen is minimally fluid distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract appears patent. The proximal duodenal lumen is slightly fluid distended. The remaining small intestinal loops are 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. There is no evidence of an obstructive pattern.

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Pancreas

The left limb of the pancreas is visible 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

Papillon

SEX

Spayed Female

Free Abdomen

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

AGE

12 years

Other

A brief visualization of the heart reveals no obvious evidence of pericardial effusion.

WEIGHT

13 lbs

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Minor age-related pancreatic remodeling +/- fibrosis. Low-grade pancreatitis is also possible, particularly if the patient exhibits pain on cranial palpation.
- Cholelith, incidental/nonobstructive

**An obvious cause for the patient's clinical signs is not identified in this study. Considerations include mild pancreatitis, primary gastrointestinal disease (i.e., inflammatory bowel disease, food allergy/intolerance, intestinal dysbiosis), underlying metabolic issue, other.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider repeating baseline lab work, including a CBC Chemistry panel, urinalysis and T4 to reassess for underlying metabolic issues.
- Fecal evaluation for ova and Giardia
- GI Panel (send to Texas A&M)
- Consider three-view thoracic radiographs to assess for occult disease in the chest.
- A resting cortisol level to screen for hypoadrenocorticism. If resting cortisol level is < 2.0 mcg/dL, an ACTH stimulation test is recommended.
- Also consider orthopedic and neurologic evaluations to assess for nonmetabolic causes of anorexia.

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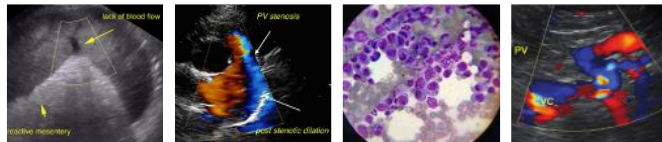
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- If the above diagnostics are inconclusive, GI biopsies (i.e., endoscopic or surgical), may be necessary to get a definitive diagnosis.

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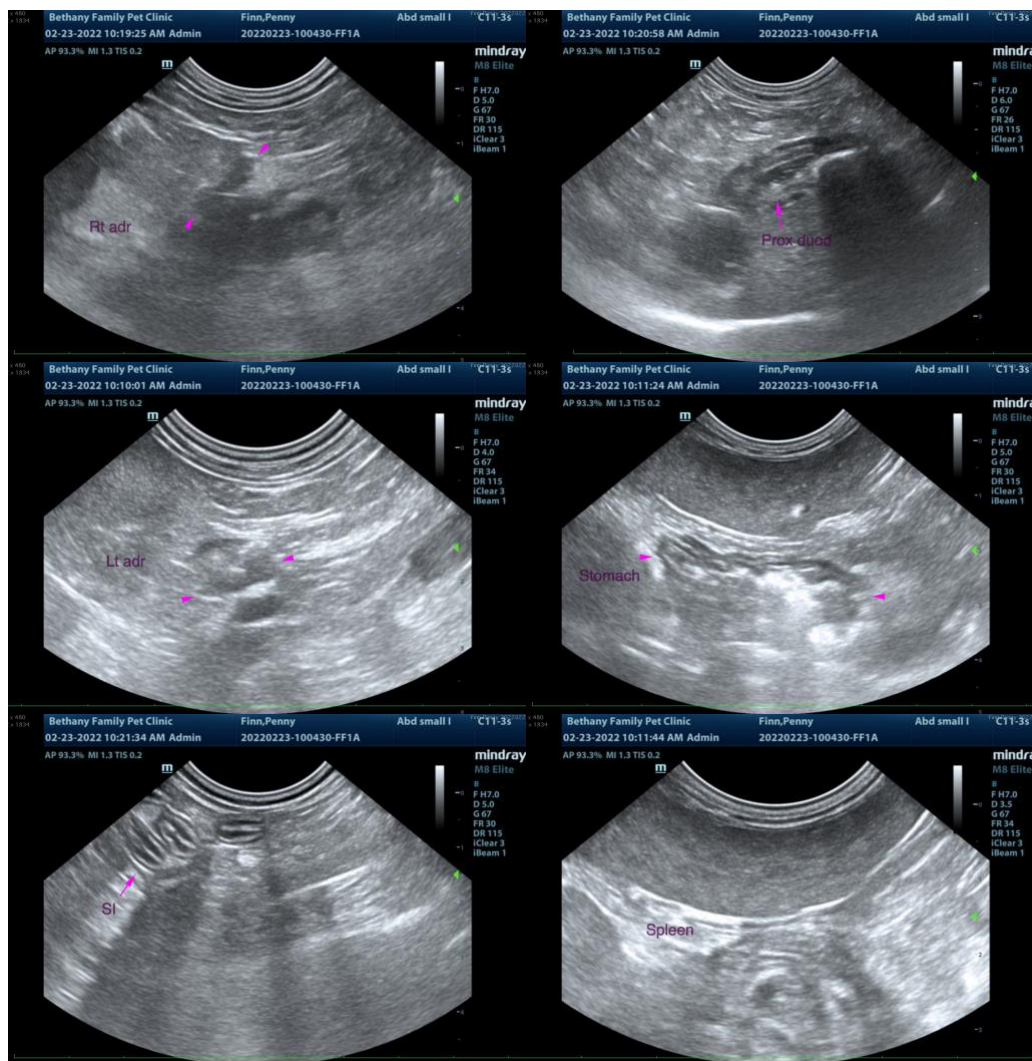
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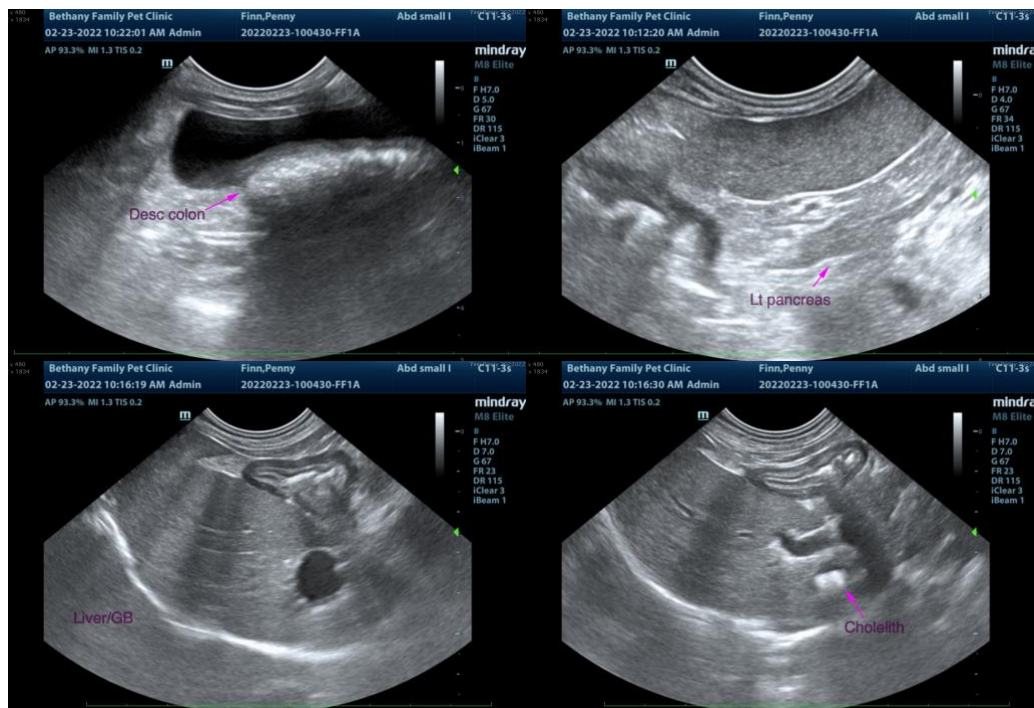
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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