



PATIENT

Princess Leia Trigo

SPECIES

Canine

BREED

Chihuahua

SEX

Female, spayed

AGE

6 Yrs.

WEIGHT

8.5 lbs.

INTERPRETED BY

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

**IMAGING
PERFORMED BY**

Dr. Ferrer

HOSPITAL NAME

Paseos VC

REFERRING VET

Dr. Davila

INVOICE

12980

DATE

2/8/22

PRESENTING CLINICAL SIGNS

History: Presented for a recheck ultrasound after a mass was found coming from the uterus and was surgically removed. It was recommended to recheck the area every 3 months. The mass was an uterine papillary cystadenoma, but it was not completely excised and monitoring was recommended.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The bladder lumen is moderately distended. The wall is normal in thickness with a smooth mucosal surface. Luminal contents are anechoic. No cystic calculi are observed. The region of the trigone is normal. The proximal urethral wall is prominent to slightly thickened (up to 0.17 cm). The proximal urethral lumen is not overtly dilated.

The left kidney is normal size (4.17 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 hydronephrosis. Renal vasculature is normal.

The right kidney is not visualized. It was previously determined to be markedly decreased in size via CT scan.

Adrenal Glands

The left adrenal gland is normal size (0.42 cm at cranial pole) (0.48 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.

The right adrenal gland is normal size (0.49 cm at cranial pole) (0.54 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.

Spleen

The spleen is normal in size (0.83 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 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. The gall bladder lumen is moderately distended. The wall is thin and smooth. A small to moderate amount of echogenic debris is observed within the lumen, most of which is gravity-dependent and some of which is suspended. 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



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pyloric outflow tract is patent. The small intestinal lumen is 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. No obstructive disease is noted.

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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.

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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

There are no obvious abnormalities in the region where the uterine mass was removed.

AGE

6 Yrs.

ULTRASONOGRAPHIC FINDINGS

- There is no obvious evidence of recurrence of the uterine mass.
- The proximal urethral wall changes may be a normal variant for this patient or could be consistent with urethritis. Neoplasia is possible but considered unlikely, particularly in the absence of lower urinary tract signs.
- The medullary band seen in the left kidney may represent a benign incidental finding or could be consistent with low-grade/subclinical renal disease.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Continued serial sonographic monitoring (i.e., every 3 months) is recommended to assess for recurrence of the mass.
- Given the urethral changes, a urinalysis +/- urine culture and sensitivity should be considered.

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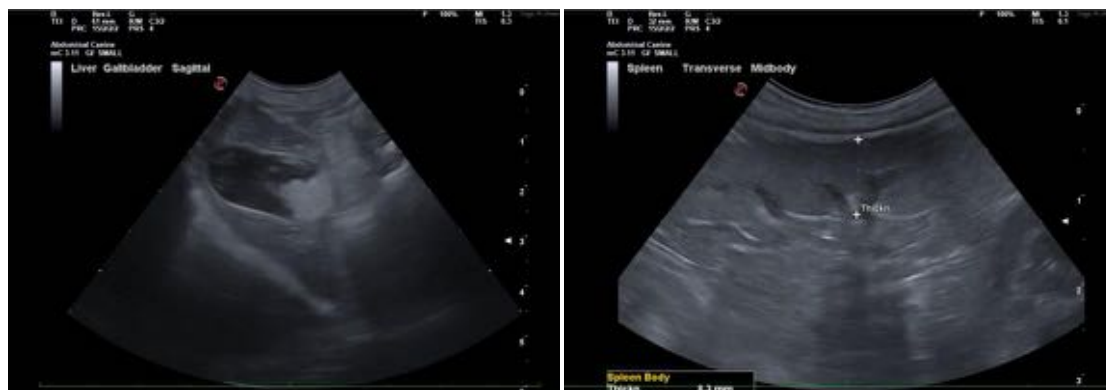
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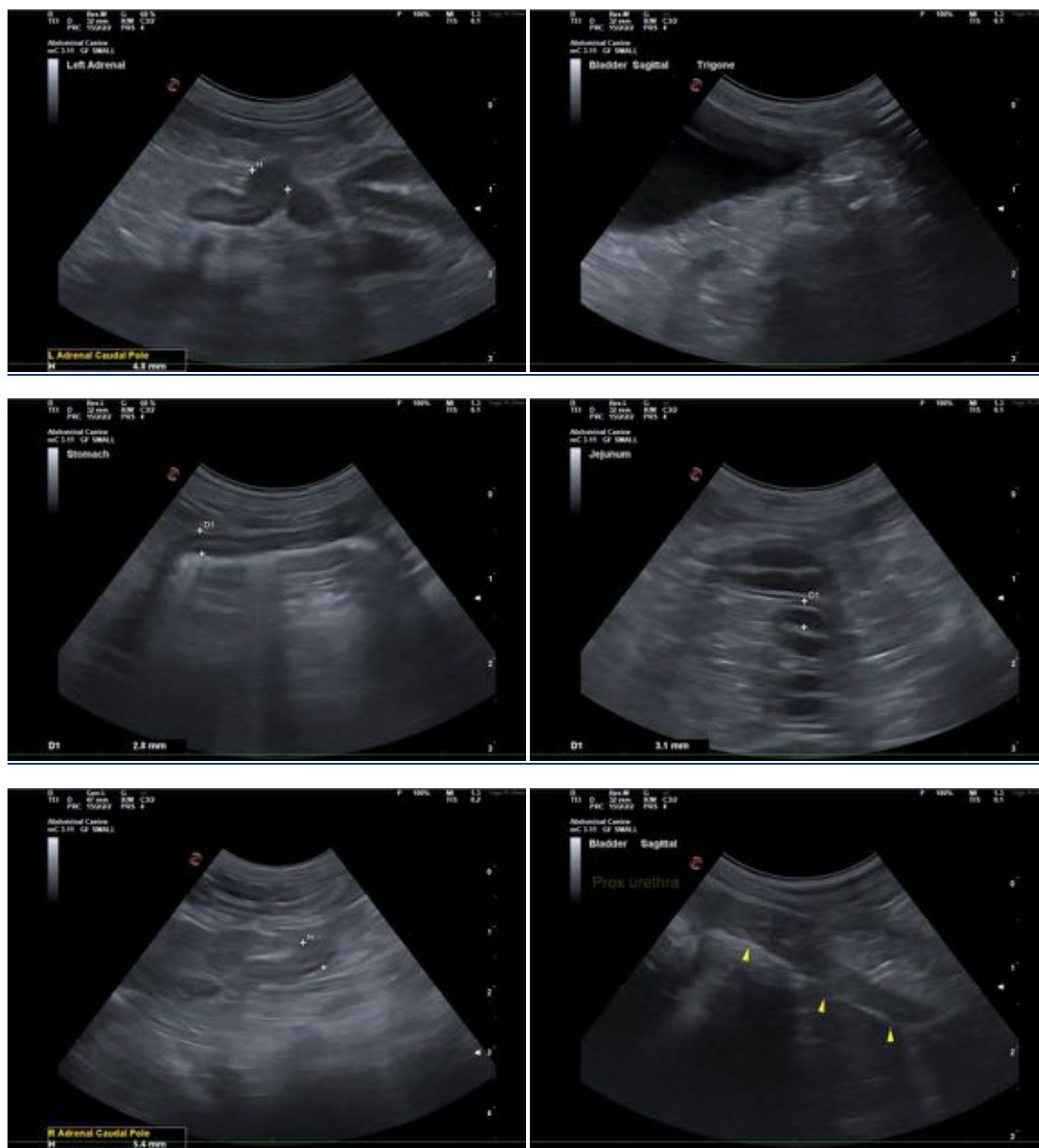
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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

Andrea.nicastro@sonopath.com