



PATIENT PRESENTING CLINICAL SIGNS

Winnie Stone
History: Diagnosed with pulmonary blastomycosis and currently treated with itraconazole and prednisone (to control coughing, given eod). Urinary tract infections that continue to have positive culture despite antibiotics based on sensitivity.
Abnormal PE/Chem/CBC/UA Results: Urine culture positive for E. coli

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Shepherd mix

The urinary bladder and visible portion of the pelvic urethra are normal for the degree of luminal distension. The urine is anechoic with no evidence of debris. Cystic calculi and discrete masses are not observed. The region of the trigone is normal.

SEX

Female, spayed

The left kidney is normal size (6.19 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.

AGE

1 yr.

The right kidney is normal size (6.99 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

34 kg.

Adrenal Glands

The left adrenal gland is normal in length (0.25 cm at cranial pole) (0.33 cm at caudal pole) with a flattened contour. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

INTERPRETED BY

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

The right adrenal gland is normal in length (0.60 cm at cranial pole) (0.35 cm at caudal pole) with a flattened contour. 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 (1.90 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.

IMAGING PERFORMED BY

Dr. Barthelemy

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. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

HOSPITAL NAME

Bridgeland VC

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14676

DATE

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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 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.



PATIENT

Pancreas

Winnie Stone

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.

SPECIES

Canine

Free Abdomen

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

BREED

Shepherd mix

SEX

Female, spayed

Primary Findings:

- An obvious cause for the patient's persistent urinary tract infections is not identified in this study. Considerations include chronic immunosuppression (due to corticosteroid therapy), malformation of the external genitalia (i.e., recessed vulva), underlying metabolic issue, other.

AGE

1 yr.

Secondary Findings:

- The bilaterally flattened adrenal glands are likely secondary to atrophy resulting from chronic corticosteroid administration. Alternatively, this may be a normal variant for this patient.

WEIGHT

34 kg.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INTERPRETED BY

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

- Evaluation of the external genitalia is recommended to assess for predisposing factors (i.e., recessed vulva).
- Baseline labwork including a CBC chemistry panel and T4 is recommended to assess for underlying metabolic issues that may be predisposing to infection.
- Also consider a prolonged antibiotic course (i.e., 4-6 weeks) with a urine culture and sensitivity midway through the antibiotic course to assess for development of antibiotic resistance.

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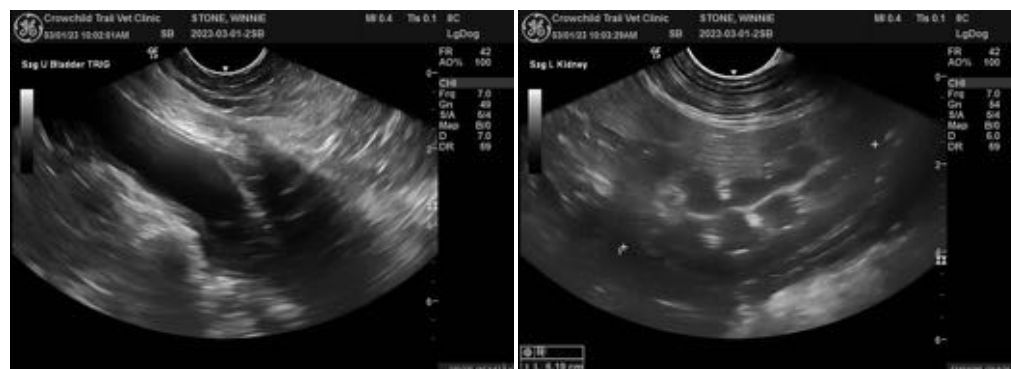
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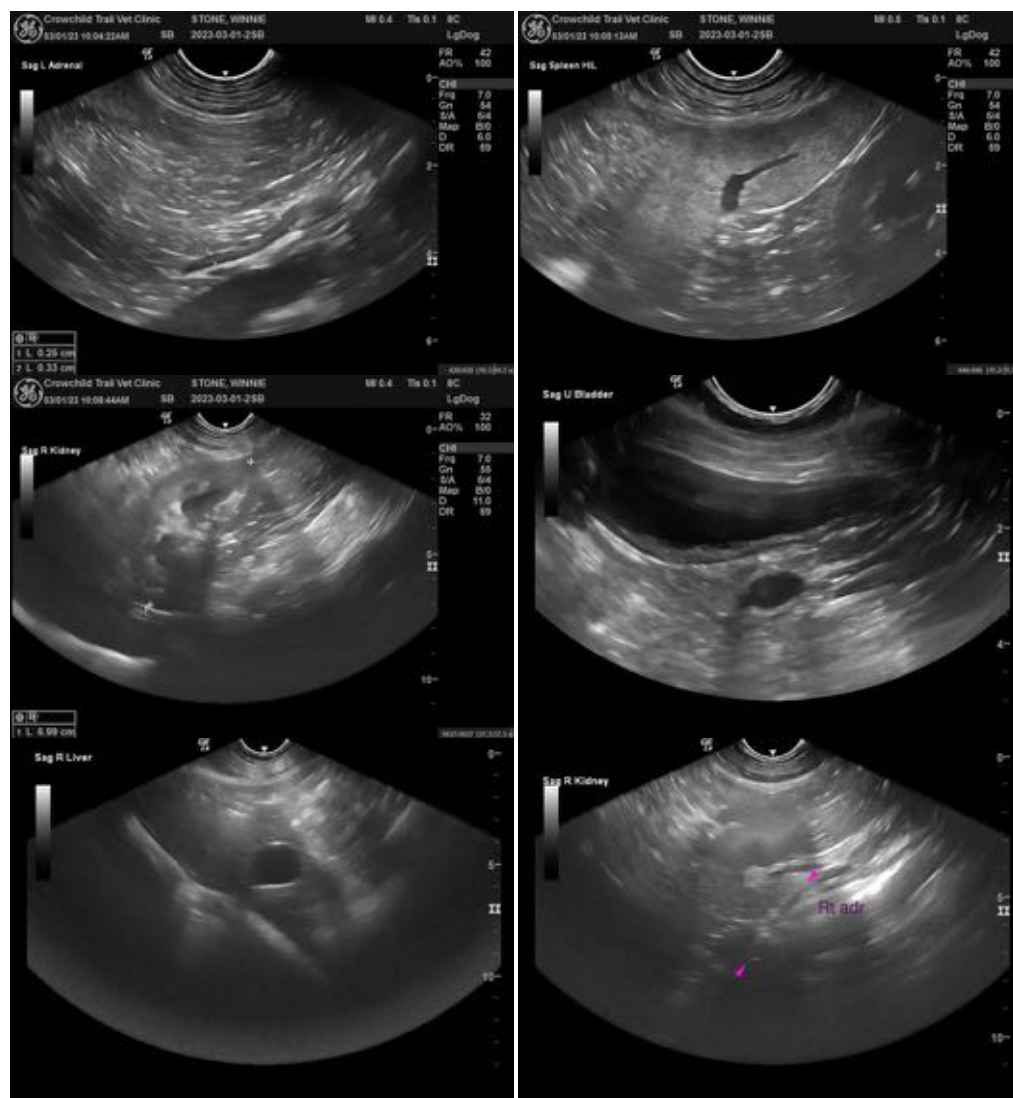
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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