

PATIENT

Amos George

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: Elevated liver values, distended abdomen, and on Denamarin

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Mini Schnauzer

Urinary System

The urinary bladder is moderately distended. The wall is normal in thickness with a smooth mucosal surface. Several, varying-sized cystic calculi are observed within the lumen. The remaining luminal contents are mostly anechoic. The region of the trigone and the proximal urethra, visible to a depth of 4.5 cm, are normal.

SEX

Male Neutered

The prostate is normal in size (0.84 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

AGE

03/07/15

The left kidney is normal in size (4.98 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. Mild pyelectasia is present (0.25 cm in the longitudinal plane). Several, small, nonobstructive nephroliths are visualized. There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

26.4

The right kidney is normal in size (5.27 cm in length) with an irregular shape. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. Trace pyelectasia is present (0.16 cm in the longitudinal plane). Several, small, nonobstructive nephroliths are visualized. A cortical infarct is suspected at the caudal pole. There is no evidence of hydroureter. Renal vasculature is normal.

INTERPRETED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

Adrenal Glands

The left adrenal gland is mildly enlarged (0.69 cm at cranial pole) (0.67 cm at caudal pole) with slightly swollen peripheral contours. Glandular echogenicity and detail are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

IMAGING PERFORMED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

The right adrenal gland is normal in size (0.54 cm at cranial pole) (0.51 cm at caudal pole) with a normal shape and 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

Pawleys VH

Spleen

The spleen is normal in size (1.11 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. Several, varying-sized hyperechoic nodules are observed throughout the organ. Splenic vasculature is normal.

REFERRING VET

Dr Kiningham

Liver

The liver is enlarged, with irregular peripheral contours. A >11.8 cm hyperechoic- to heterogenous, slightly cavitated expansile mass is arising from the parenchyma, mid-liver. In addition, a 2.1 x 2.0 cm hypoechoic mass is observed deep, left- to mid-liver. The remaining parenchyma is mildly heterogenous in appearance. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

INVOICE

22688

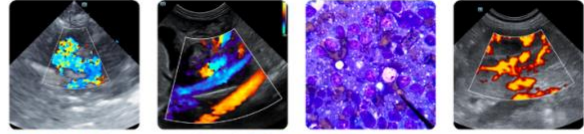
The gallbladder lumen is distended. The wall is thin and smooth. A small amount of mobile echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

DATE

3-13-26

Gastrointestinal

The gastric lumen is mildly distended with ingesta. 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 is normal in thickness with a normal layering pattern and appropriate mural



PATIENT

Amos George

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Male Neutered

AGE

03/07/15

WEIGHT

26.4

INTERPRETED BY

Andrea Nicastrò DVM
Diplomate ACVIM
(Sm Animal Internal Med)

**IMAGING
PERFORMED BY**

Andrea Nicastrò DVM
Diplomate ACVIM
(Sm Animal Internal Med)

HOSPITAL NAME

Pawleys VH

REFERRING VET

Dr Kiningham

INVOICE

22688

DATE

3-13-26

detail. Discreet masses are not identified. The ileocecolic junction and colonic wall are normal. There is no obvious evidence of an obstructive pattern.

Pancreas

The right 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.

Lymph Nodes

The abdominal lymph nodes are normal/not visible.

Free Abdomen

There is no obvious evidence of free fluid.

Other

A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

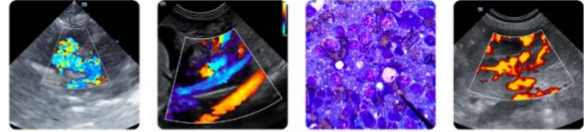
- Large, mid-hepatic mass. Neoplasia (i.e., adenoma, adenocarcinoma, sarcoma, round cell tumor) is suspected with a low possibility of a non-neoplastic process. The smaller hepatic mass could be consistent with neoplasia or a benign process (i.e., regenerative nodule, inflammatory focus, other). The diffuse hepatic parenchymal changes are nonspecific and could be secondary to regenerative nodular hyperplasia, vacuolar hepatopathy, inflammatory disease, hepatotoxicosis, fibrosis, infiltrative neoplasia, and/or other hepatopathy.

Secondary Findings

- Cystic calculi
- Bilateral nonspecific age-related renal changes with nonobstructive nephrocalcinosis, pyelectasia, and a right cortical infarct
- Mild left adrenomegaly
- The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.
- Minor retained gastric ingesta
- The hyperechoic splenic nodules likely represent benign myelolipomas, with a lower possibility of more insidious splenic pathology.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Three-view thoracic radiographs are recommended to assess for pulmonary metastases. If there is no evidence of pulmonary metastatic disease, and an aggressive approach is desired, consider referral to a board-certified surgeon to discuss hepatic mass debulking. An abdominal CT scan would be useful for presurgical planning. If surgery is pursued, consider a cystotomy with stone removal, analysis and culture. If



PATIENT

Amos George

further diagnostics are not pursued, palliative care is recommended.

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Male Neutered

AGE

03/07/15

WEIGHT

26.4

INTERPRETED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

**IMAGING
PERFORMED BY**

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

HOSPITAL NAME

Pawleys VH

REFERRING VET

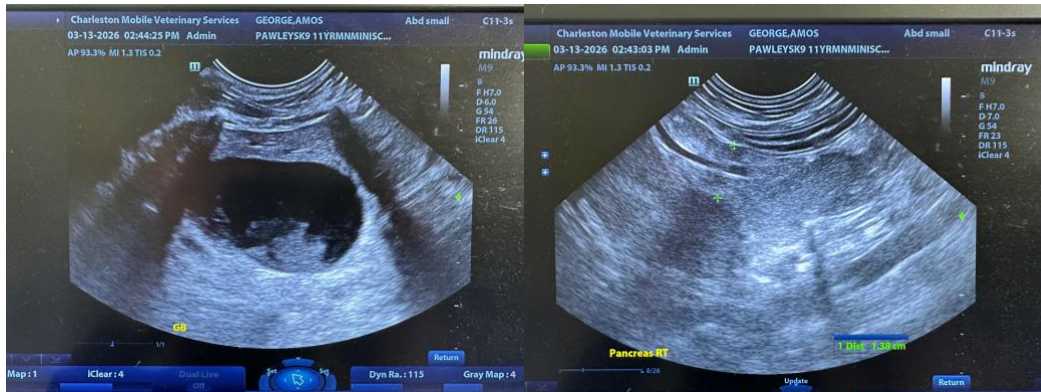
Dr Kiningham

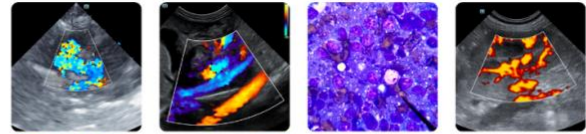
INVOICE

22688

DATE

3-13-26





PATIENT

Amos George

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Male Neutered

AGE

03/07/15

WEIGHT

26.4

INTERPRETED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

IMAGING PERFORMED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

HOSPITAL NAME

Pawleys VH

REFERRING VET

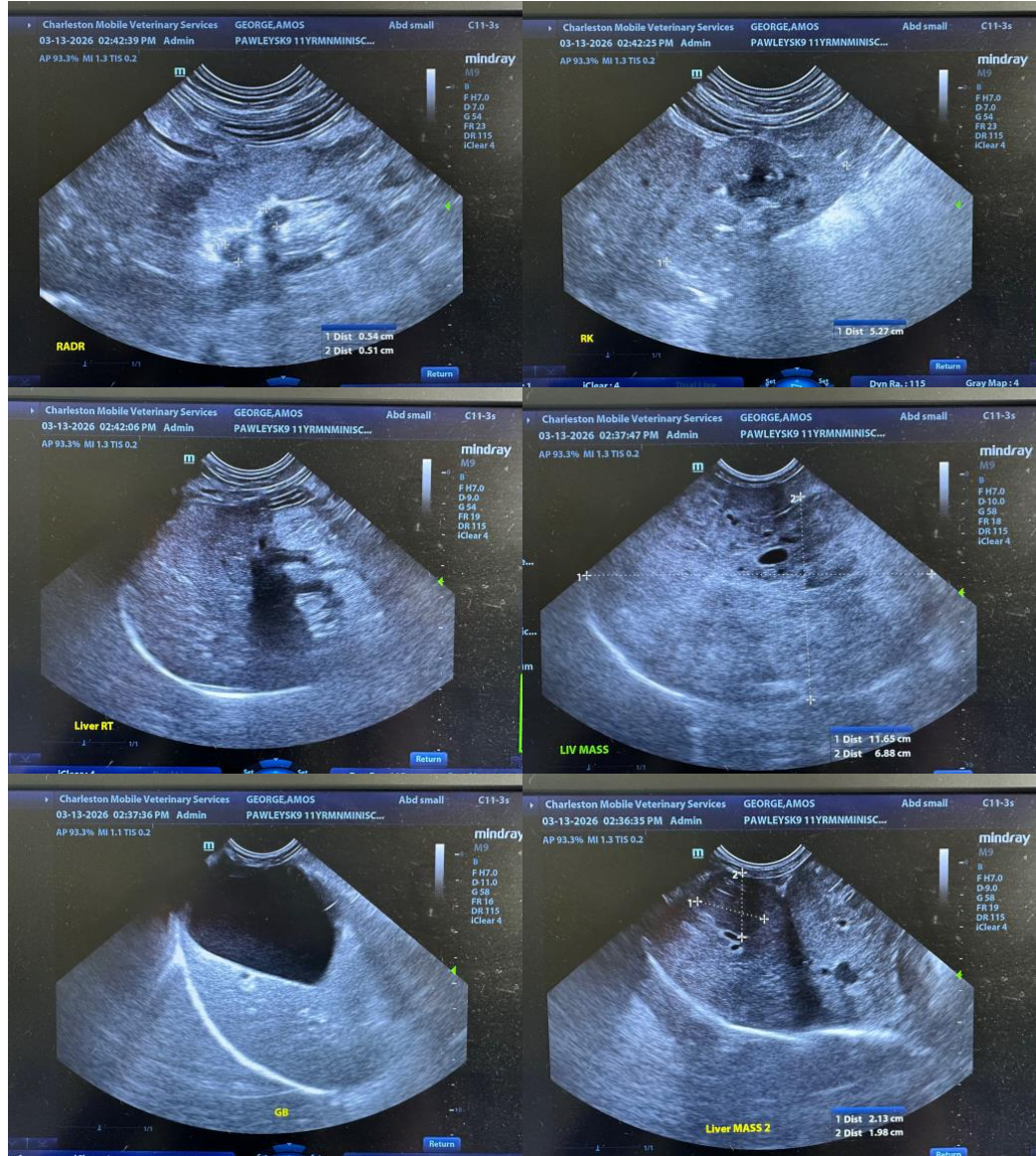
Dr Kiningham

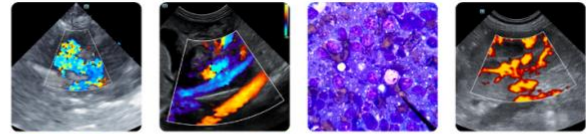
INVOICE

22688

DATE

3-13-26





PATIENT

Amos George

SPECIES

Canine

BREED

Mini Schnauzer

SEX

Male Neutered

AGE

03/07/15

WEIGHT

26.4

INTERPRETED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

IMAGING PERFORMED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

HOSPITAL NAME

Pawleys VH

REFERRING VET

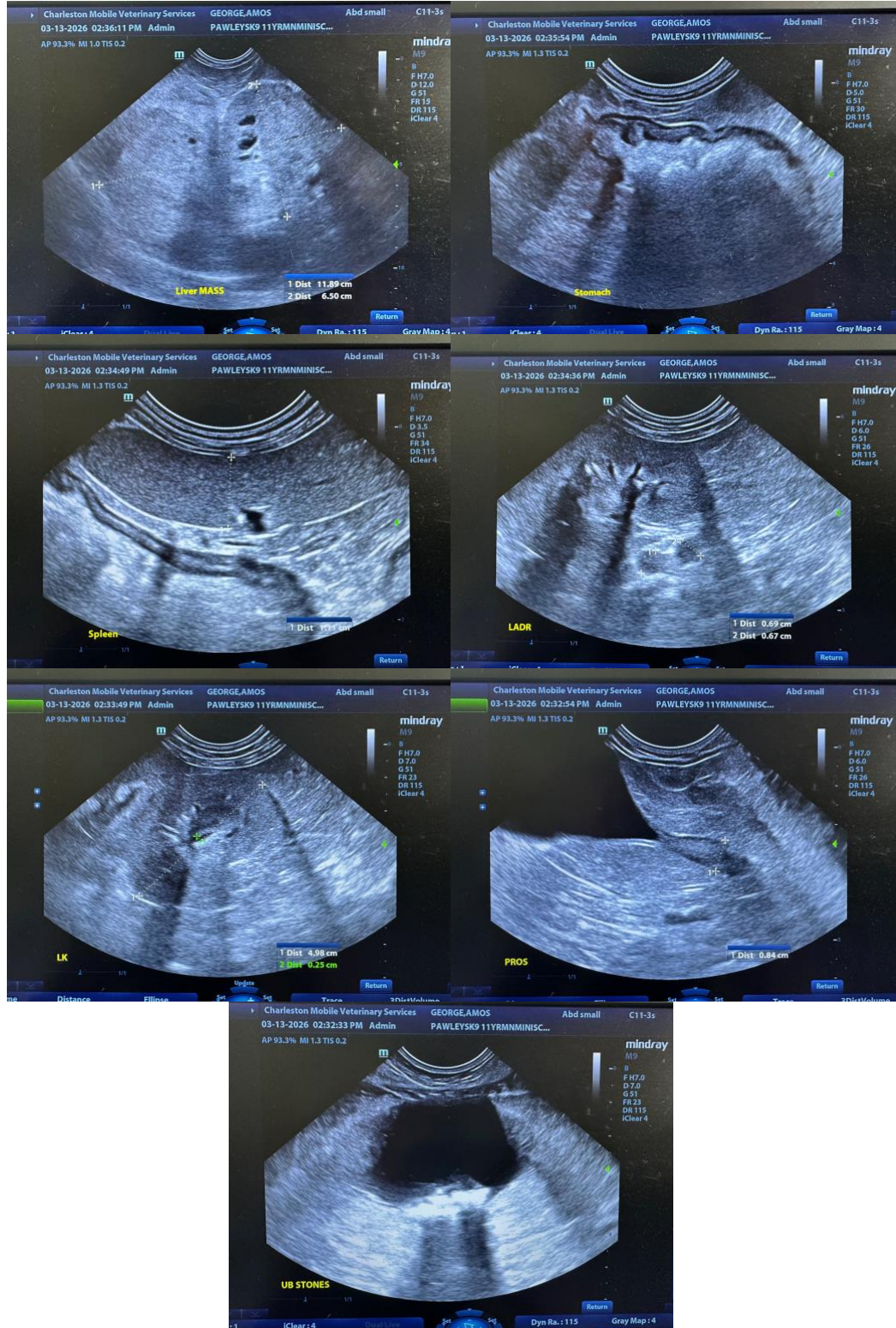
Dr Kiningham

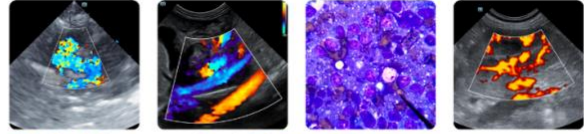
INVOICE

22688

DATE

3-13-26





PATIENT

Amos George

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.

SPECIES

Canine

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.

BREED

Mini Schnauzer

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

SEX

Male Neutered

AGE

03/07/15

WEIGHT

26.4

INTERPRETED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

**IMAGING
PERFORMED BY**

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

HOSPITAL NAME

Pawleys VH

REFERRING VET

Dr Kiningham

INVOICE

22688

DATE

3-13-26