



## PATIENT PRESENTING CLINICAL SIGNS

**Callie Delano** History: Presented for staging work up after multiple mammary masses were seen. Chest rads and BW unremarkable.

## SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Unremarkable blood work. Referring vet did not do CPL test as no hx of pancreatitis.

## BREED

Shih Tzu

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder wall is normal in thickness. The mucosal surface is smooth. The bladder is moderately distended. Luminal contents are anechoic. No cystic calculi are observed. The region of the trigone and visible portion of the proximal urethra are normal.

## SEX

Female Spayed

The left kidney is normal in size (4.37 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild- to moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

## AGE

8

The right kidney is normal in size (4.78 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild- to moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

## WEIGHT

9.3

### Adrenal Glands

The left adrenal gland is mildly enlarged (0.60 cm at cranial pole) (0.59 cm at caudal pole) with slightly swollen peripheral contours. Glandular echogenicity and detail are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

## INTERPRETED BY

Andrea Nicastro, DVM,  
Diplomate ACVIM  
(Small Animal Internal  
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The right adrenal gland is mildly enlarged (0.60 cm at cranial pole) (0.55 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.

## IMAGING PERFORMED BY

Dr. Sarah Colborne

### Spleen

The spleen is normal in size (0.79 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.

## HOSPITAL NAME

Riverside Small AH

### Liver

The liver is subjectively normal in size with normal peripheral contours. The parenchyma is isoechoic relative to the spleen. Several ill-defined hypoechoic nodules are visualized on the left side (one measuring 1.49 cm in its longest dimension). Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

## REFERRING VET

Dr. Sarah Colborne

## INVOICE

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The gallbladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

## DATE

3-25-26

### Gastrointestinal

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 is normal in thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The ileoceocolic junction and colonic wall are normal. There is no evidence of



**PATIENT** an obstructive pattern.

Callie Delano **Pancreas**  
See "Free Abdomen".

**SPECIES** **Lymph Nodes**  
Canine The abdominal lymph nodes are normal/not visible.

**BREED** **Free Abdomen**  
Shih Tzu An ill-defined area of hyperechoic mesentery is observed in the right cranial- to mid-abdomen. Trace free fluid is observed between the liver lobes.

**ULTRASONOGRAPHIC FINDINGS**

**SEX**

Female Spayed • The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, regenerative nodular hyperplasia, and/or age-related remodeling. Inflammatory disease, infiltrative neoplasia and other hepatopathies are considered less likely.

**AGE**

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• Mild bilateral adrenomegaly

**WEIGHT**

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• Bilateral nonspecific age-related renal changes

• The ill-defined hyperechoic mesentery in the right cranial- to mid-abdomen is suggestive of mild peritonitis, the cause of which is unclear. It may be secondary to mild pancreatitis, panniculitis, bowel inflammation (if applicable), other.

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\*There is no obvious evidence of metastatic disease in the abdomen.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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- Regarding the mammary masses, consider a consultation with a board-certified oncologist and/or surgeon for further recommendations.
- Regarding the hyperechoic mesentery, consider fine-needle aspiration (assuming normal clotting status). A 25-gauge needle should be used. A cPLI can also be considered to assess for pancreatitis. If further testing is not pursued, consider a recheck ultrasound in 4-6 weeks to assess progression.

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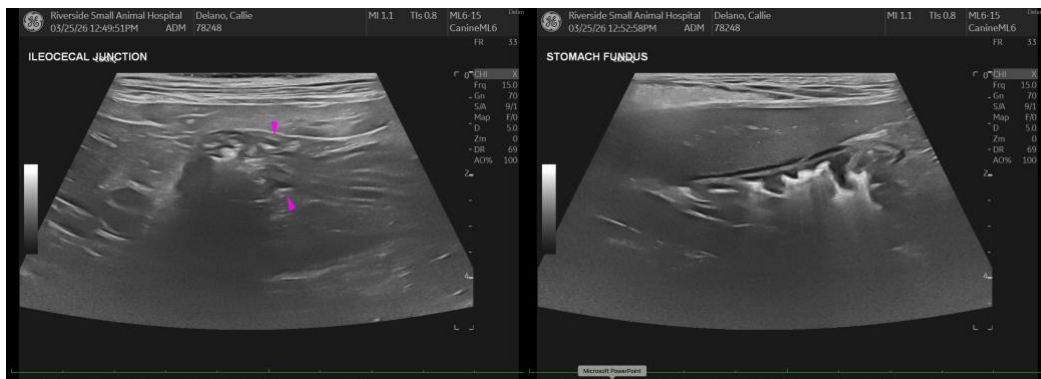
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**PATIENT**

Callie Delano

**SPECIES**

Canine

**BREED**

Shih Tzu

**SEX**

Female Spayed

**AGE**

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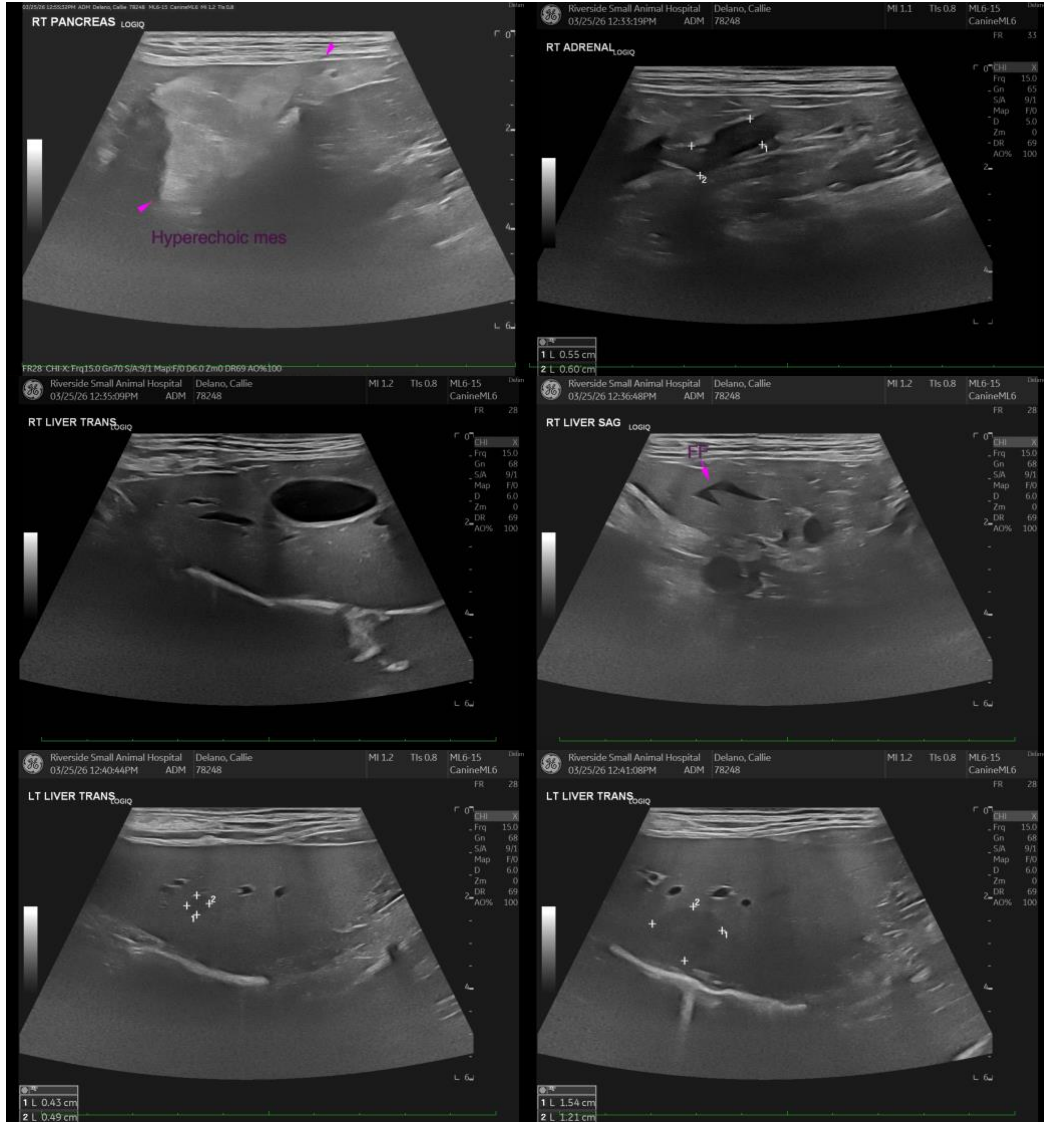
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**SPECIES**

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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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