



**PATIENT PRESENTING CLINICAL SIGNS**

- Roxie Boge
- Hypoalbuminemia, mild hyporexia, lethargy
  - Grade I-II/ VI heart murmur
- SPECIES**
- Osteoarthritis
  - Mild dental disease
- Canine
- Various dermal sq growths
  - Dasequin, Nordic Naturals, probiotics

**BREED**

Mix Abnormal PE/Chem/CBC/UA Results: Albumin 2.4 All else WNL U/a pH 5.0, 1+ bilirubin, 0-1 squad. Epithelia USG 1.048

**SEX ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

Female Spayed

**Urinary System**

The urinary bladder wall is normal in thickness, and the mucosal surface is smooth. The bladder is moderately distended. Luminal contents are mostly anechoic. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 2 cm, are normal.

**AGE**

9 years 9 mos

The left kidney is normal in size (6.78 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

**WEIGHT**

73.2 lbs

The right kidney is normal in size (7.07 cm in length) with a normal shape, architecture and 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. Renal vasculature is normal.

**INTERPRETED BY**

Andrea Nicastro DVM  
 Diplomate ACVIM  
 (Sm Animal Internal Med)

**Adrenal Glands**

The left adrenal gland is normal in size (0.57 cm at cranial pole) (0.67 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**

Chloe Lowe, CVT

The right adrenal gland is mildly enlarged (1.78 cm at cranial pole) (0.84 cm at caudal pole) with a slightly irregular shape. Glandular echogenicity and detail are normal. The phrenicoabdominal vein and surrounding vasculature appear normal.

**HOSPITAL NAME**

Andover AH

**Spleen**

The spleen is normal in size (2.18 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. A 0.50 cm ill-defined, hypoechoic nodule is observed approximately mid-body. Splenic vasculature is normal.

**REFERRING VET**

Dr. Lawlor

**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.

**INVOICE**

22800

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

**DATE**

4-1-26

**Gastrointestinal**

The gastric lumen is mildly distended with ingesta. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is not dilated. In one segment of bowel (measuring at least 5.0



**PATIENT**

Roxie Boge

cm), the wall is severely thickened (up to 1.25 cm) and hypoechoic, with loss of the normal layering pattern. There appears to be disruption in the serosal surface in this region. The mesentery surrounding this segment is hyperechoic and irregular. In the remaining bowel segments, the wall is normal in thickness with a normal layering pattern and appropriate mural detail. The colonic wall appears normal.

**SPECIES**

Canine

**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.

**BREED**

Mix

**Lymph nodes**

The abdominal lymph nodes are normal/not visible.

**SEX**

Female Spayed

**Free Abdomen**

Trace free fluid is observed.

**AGE**

9 years 9 mos

**Other**

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

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

73.2 lbs

**Primary Findings**

- Segmental bowel wall thickening/mass effect with suspected disruption of the serosal surface. Neoplasia (i. lymphoma, adenocarcinoma, other) is strongly suspected, with a lower possibility of a focal inflammatory process. Adjacent peritonitis is present.

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**Secondary Findings**

- The hypoechoic splenic nodule trends toward the benign (i.e., focus of lymphoid hyperplasia or similar). However, an emerging tumor cannot be excluded.
- Mildly enlarged, slightly irregular right adrenal gland

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**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**HOSPITAL NAME**

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- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- Consider fine-needle aspiration of the thickened bowel segment (assuming normal clotting status). A 25-gauge needle should be used. If the cytology results are inconclusive, surgical biopsies may be necessary to get a definitive diagnosis. Depending on the results, consultation with a board-certified oncologist may be indicated.

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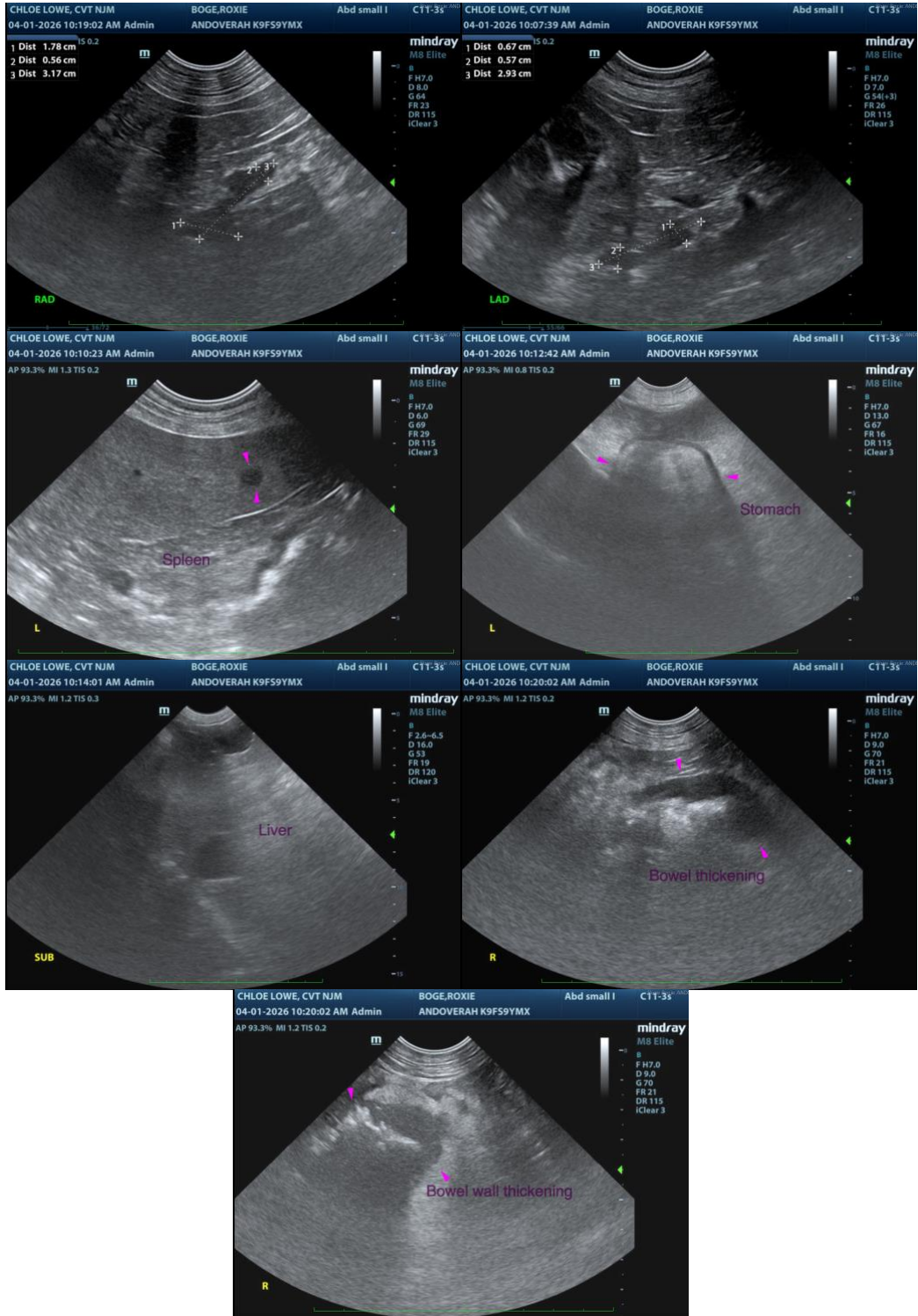
Dr. Lawlor

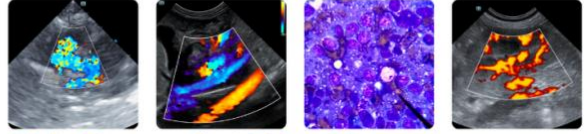
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**PATIENT**

Roxie Boge

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**

Mix

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