



PATIENT

Sasha Chernysheva

PRESENTING CLINICAL SIGNS

History: Survey abdomen- Pet scanned at outside facility and was told "slightly enlarged adrenals"
Abnormal PE/Chem/CBC/UA Results: Ca 11.9 UA: C/S no growth SG: 1.026

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Japanese Chin

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

SEX

Female, spayed

The left kidney is normal in size (3.98 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. A few non-obstructive nephroliths are visualized. Mild pyelectasia is present (0.29 cm in the transverse plane). There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

AGE

9 Yrs.

The right kidney is normal size (3.87 cm in length) with a normal shape, smooth peripheral margins and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. Several nephroliths are visualized. Trace pyelectasia is present. There is no evidence of infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

8.7 lbs.

Adrenal Glands

INTERPRETED BY

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

The left adrenal gland is enlarged at the caudal pole and normal at the cranial pole (0.48 cm at cranial pole) (1.05 cm at caudal pole) (2.16 cm in length). A 1.30 x 0.69 cm slightly heterogeneous nodule is observed at the caudal aspect. The glandular echogenicity and detail at the cranial aspect are unremarkable. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.76 cm at cranial pole) (0.44 cm at caudal pole) (1.43 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.

IMAGING PERFORMED BY

Jessica Miller

Spleen

HOSPITAL NAME

Whippany VH

The spleen is normal in size (0.96 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

REFERRING VET

Dr. Smith

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 amount of aggregated echogenic mostly gravity-dependent debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

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Gastrointestinal

DATE

4/19/22



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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.

SPECIES

Canine

Pancreas

The right limb is visible/prominent with minimal deviation from the normal peripheral contours. The parenchyma is hypoechoic and slightly mottled relative to surrounding omental fat. No distinct focal lesions are observed. The pancreatic duct is visible but not overtly dilated (0.20 cm in diameter).

BREED

Japanese Chin

Free Abdomen

SEX

Female, spayed

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

AGE

9 Yrs.

ULTRASONOGRAPHIC FINDINGS

Primary Findings:

- Left adrenal nodule. Differentials include benign nodular hyperplasia, adenoma, adenocarcinoma, pheochromocytoma, other.

WEIGHT

8.7 lbs.

Secondary Findings:

- Bilateral, age-related renal changes with non-obstructive nephrolithiasis and mild pyelectasia.
- Age-related pancreatic remodeling. Low-grade pancreatitis is also possible. Correlation with clinical findings is recommended.

INTERPRETED BY

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(*Small Animal Internal
Medicine*)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider further testing for a functional left adrenal tumor (i.e., low-dose dexamethasone suppression test and urine catecholamine levels). A baseline blood pressure measurement can also be considered. If a more conservative approach is desired, consider a recheck ultrasound in 2-3 months to assess for progression of the nodule.
- Given the mildly elevated total calcium, an ionized calcium +/- PTH/PTHrP is recommended.
- Thoracic radiographs can also be considered to evaluate cardiopulmonary status, particularly in light of the left adrenal nodule.

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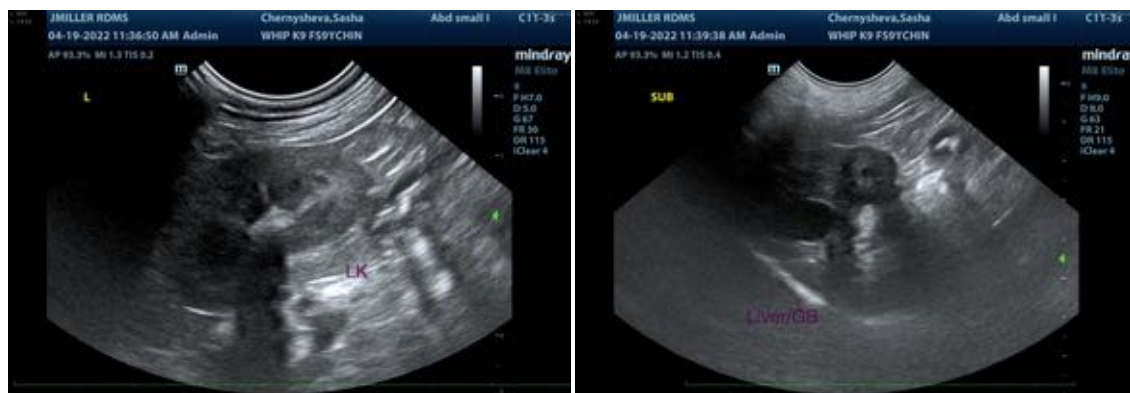
Dr. Smith

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The information and recommendations provided are based on the images presented by the referring



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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.

SPECIES

Canine

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

Andrea.nicastro@sonopath.com

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