



PATIENT PRESENTING CLINICAL SIGNS

Huzi Lin History: Huzi is a 6yo neutered male Husky presented for recheck following prior weight loss and diarrhea.

SPECIES Owner reports:
 • Marked improvement after starting Tylosin (Tylan/Talacin) within 2 days
 • Remained stable after discontinuation
 • Stool now normal
 • Appetite good

BREED

Siberian Husky Additional updates:
 • Lower lip infection resolved after prior clipping
 • Mild left ear issue → improving with cleaning

SEX

Neutered Male New concern:
 • Occasional brief episodes of wobbliness / loss of balance
 * very short duration (seconds)
 * occurs when excited, typically at night in hallway
 * no progression noted

AGE

6

WEIGHT

66

Abnormal PE/Chem/CBC/UA Results: Mild elevated ALT 146. Hx of mild elevated alt resolved without intervention. Neu 2.65K (L)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

INTERPRETED BY

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

Urinary System

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

The prostate is normal in size (1.32 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

IMAGING PERFORMED BY

Shen Li

The left kidney is normal in size (6.42 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.

HOSPITAL NAME

Dr. Shen Li VS

The right kidney is normal in size (6.84 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.

REFERRING VET

Shen Li

Adrenal Glands

INVOICE

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The left adrenal gland is normal in size (0.55 cm at cranial pole) (0.58 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.

DATE

4-19-26

The region of the right adrenal gland is evaluated. No obvious pathology is observed in this region.

Spleen

The spleen is prominent in size (2.58 cm in width at the level of the hilus) with smooth peripheral



PATIENT contours. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

Huzi Lin

Liver

SPECIES

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.

Canine

BREED

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.

Siberian Husky

Gastrointestinal

SEX

The gastric lumen is not distended. The gastric wall is normal in thickness with a normal layering pattern. 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 colonic wall is normal. There is no evidence of an obstructive pattern.

Neutered Male

AGE

Pancreas

6

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.

WEIGHT

Lymph Nodes

66

The abdominal lymph nodes are normal/not visible.

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Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion.

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Medicine)

ULTRASONOGRAPHIC FINDINGS

The mild splenomegaly may be secondary to lymphoid hyperplasia, extramedullary hematopoiesis, splenitis, antigenic stimulation, or less likely, infiltrative neoplasia.

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**An obvious cause for the patient's wobbliness/loss of balance is not definitively identified in this study. Considerations include orthopedic or neurologic disease, cardiopulmonary disease, underlying metabolic issue, other

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Dr. Shen Li VS

- Orthopedic and neurologic examinations are recommended if not already performed.
- Consider three-view thoracic radiographs to assess cardiopulmonary status.
- Consider pre- and postprandial serum bile acids to assess hepatic function.
- A baseline blood pressure measurement is also recommended.
- Depending on the results of the above diagnostics, further work-up may be indicated.

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PATIENT

Huzi Lin

SPECIES

Canine

BREED

Siberian Husky

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Neutered Male

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HOSPITAL NAME

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REFERRING VET

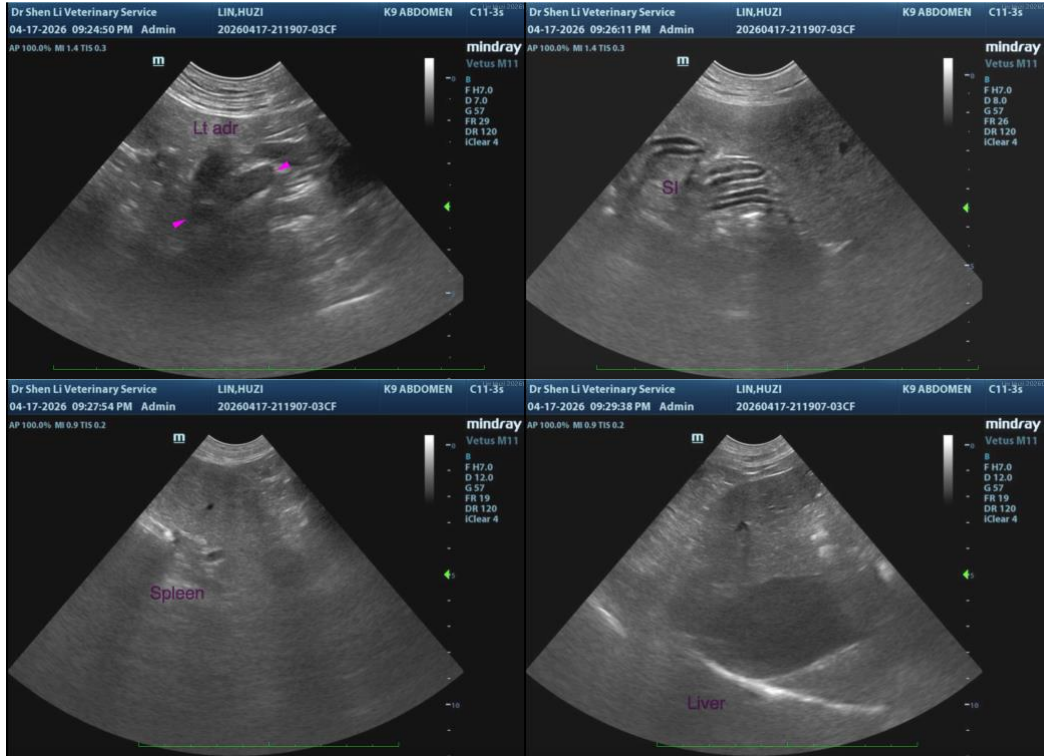
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DATE

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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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