



## PATIENT PRESENTING CLINICAL SIGNS

**Jojo Yang** Jojo is a 2.5-year-old spayed female Australian Shepherd presented for evaluation of:

- Possible toxin exposure 3 days ago
- Recurrent urinary incontinence since August

### SPECIES

Canine

Urinary history:

- August (pre-spay): first episode of incontinence

### BREED

\* UA and culture normal

Austr Shepherd

\* January: second episode with dribbling and vulvar licking

\* This month: two episodes

\* one full bladder void (soaking fur)

\* one dribbling episode

### SEX

Female Spayed

Owner observations:

- Episodes often associated with high water intake

\* adding ~200 mL water to food twice daily

\* additional intake (e.g., frozen yogurt)

### AGE

2.5

Other history:

- Spayed November 2024

• Prior knee injury → surgery at UC Davis VMTH → fully recovered

### WEIGHT

22.8

Behavior:

- Fearful, mild fear aggression toward strangers

### INTERPRETED BY

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

Abnormal PE/Chem/CBC/UA Results: Normal PE normal CBC chem lytes UA

### IMAGING PERFORMED BY

Shen Li

#### 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 is normal.

### HOSPITAL NAME

Dr. Shen Li VS

The left kidney is normal in size (4.77 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.

### REFERRING VET

Shen Li

The right kidney is normal in size (5.07 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.

### INVOICE

#### Adrenal Glands

No images provided.

22885

#### Spleen

The spleen is normal in size (1.43 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.

### DATE

4-19-26



## PATIENT

Jojo Yang

## SPECIES

Canine

## BREED

Austr Shepherd

## SEX

Female Spayed

## AGE

2.5

## WEIGHT

22.8

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Shen Li

## HOSPITAL NAME

Dr. Shen Li VS

## REFERRING VET

Shen Li

## INVOICE

22885

## DATE

4-19-26

### **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.

The gallbladder is not definitively visualized in the available images.

### **Gastrointestinal**

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.

### **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.

### **Lymph Nodes**

The abdominal lymph nodes are normal/not visible.

### **Free Abdomen**

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

## **ULTRASONOGRAPHIC FINDINGS**

Structurally unremarkable abdomen. An obvious cause for the patient's clinical signs is not definitively identified in this study. Considerations include occult urinary tract infection, urethral sphincter mechanism incompetence, neurologic disease, other.

## **INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- A neurologic examination is recommended to assess for deficits.
- A urine culture and sensitivity is recommended to assess for occult infection. If there is no evidence of infection, consider empirical treatment for urethral sphincter mechanism incompetence. If clinical signs do not improve, further work-up may be indicated.



**PATIENT**

Jojo Yang

**SPECIES**

Canine

**BREED**

Austr Shepherd

**SEX**

Female Spayed

**AGE**

2.5

**WEIGHT**

22.8

**INTERPRETED BY**

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

**IMAGING  
PERFORMED BY**

Shen Li

**HOSPITAL NAME**

Dr. Shen Li VS

**REFERRING VET**

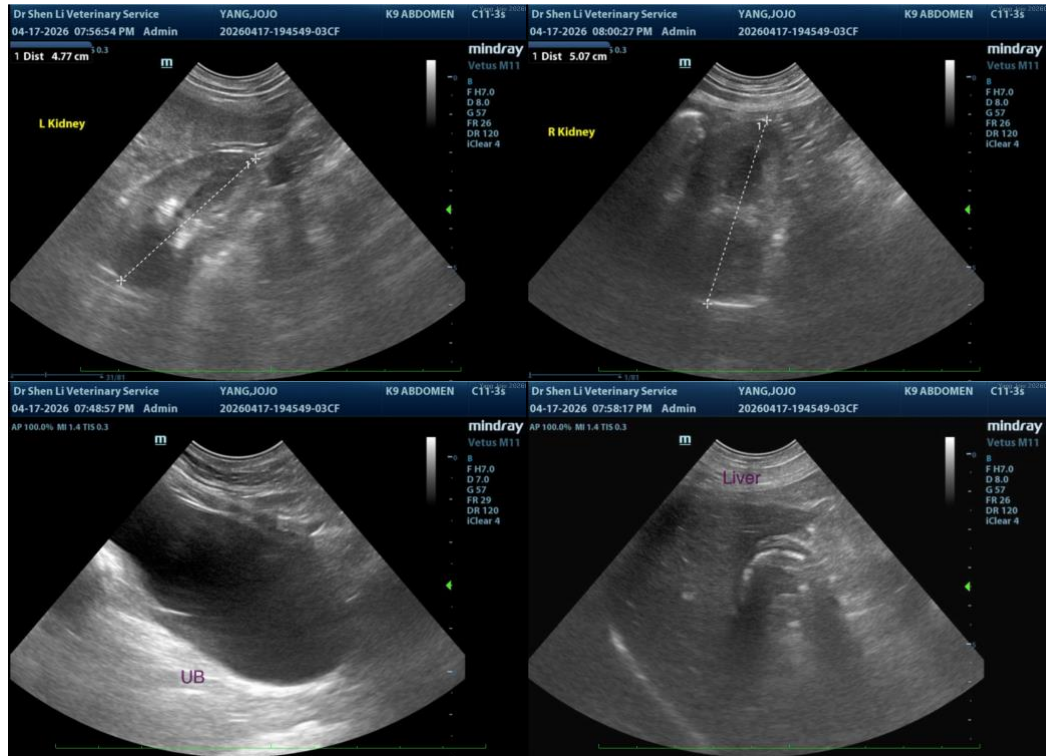
Shen Li

**INVOICE**

22885

**DATE**

4-19-26



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.

**Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)**  
[info@SonoPath.com](mailto:info@SonoPath.com)