



## PATIENT PRESENTING CLINICAL SIGNS

**Ruby Davis** History: Started on Tuesday found her downstairs in a deep sleep. Startled and confused upon waking. Since then she has been panting more often, not eating much, slow to moving or getting around, loss of balance and coughing.

## SPECIES

**Canine** Abnormal PE/Chem/CBC/UA Results: Borderline anemia. Increased HR, RR. Concerns with bleeding mass. Radiology currently not functional.

## BREED

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

**Labrador Retr**

### 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.

## SEX

**Female Spayed**

## AGE

**12**

The left kidney is normal in size (6.88 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 hydronephrosis.

## WEIGHT

**77.9**

The right kidney is normal in size (6.71 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 hydronephrosis.

## INTERPRETED BY

### Adrenal Glands

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

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

### Spleen

The spleen is overall normal in size (1.60 cm in width at the level of the hilus) with slightly irregular peripheral contours. The parenchyma is diffusely mottled with numerous, varying-sized, ill-defined hypoechoic nodules throughout the organ (one measuring 1.2 x 1.0 cm). Splenic vasculature is normal with no evidence of thrombosis.

## IMAGING PERFORMED BY

### Liver

The liver is normal- to prominent-in-size, with smooth peripheral contours. The parenchyma is isoechoic relative to the spleen and mildly heterogeneous in appearance, with a few, small, ill-defined hyperechoic nodules. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

**Amanda Hockenbrock**

## HOSPITAL NAME

**Lewisburg VH**

## REFERRING VET

**Dr. Jason Brehm**

The gallbladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal/not seen.

### Gastrointestinal

The gastric lumen is mildly distended with ingesta and chyme. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is segmentally dilated with gas and chyme. 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.

## INVOICE

**22887**

## DATE

**4-20-26**

### 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.



**PATIENT**

**Lymph Nodes**

The abdominal lymph nodes are normal/not visible.

Ruby Davis

**SPECIES**

**Free Abdomen**

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

Canine

**ULTRASONOGRAPHIC FINDINGS**

**BREED**

- The splenic changes could be consistent with infiltrative neoplasia (i.e., round cell tumor). Alternatively, a benign process (i.e., lymphoid hyperplasia, extramedullary hematopoiesis, splenitis, antigenic stimulation) is possible.

Labrador Retr

**SEX**

- The hepatic changes are nonspecific and could be secondary to inflammatory disease (i.e., cholangiohepatitis, chronic hepatitis), Leptospirosis, hepatotoxicosis, infiltrative neoplasia (i.e., lymphoma), vacuolar hepatopathy, regenerative nodular hyperplasia, other hepatopathy, or some combination thereof. Correlation with the patient's liver values is recommended.

Female Spayed

**AGE**

- Gallbladder debris, non-mucocele

12

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

**WEIGHT**

- Orthopedic and neurologic examinations are recommended, if not already performed.
- A minimum database (including a CBC, chemistry panel, urinalysis, and T4) is recommended if not already performed.
- Three-view thoracic radiographs should also be considered to assess cardiopulmonary status.
- Consider fine-needle aspiration of the spleen (assuming normal clotting status). A 25-gauge needle should be used.
- A baseline blood pressure measurement should also be considered to assess for systemic hypertension.
- Depending on the results of the above diagnostics, further work-up (i.e., neurology consultation) may be indicated.

77.9

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**PATIENT**

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**SEX**

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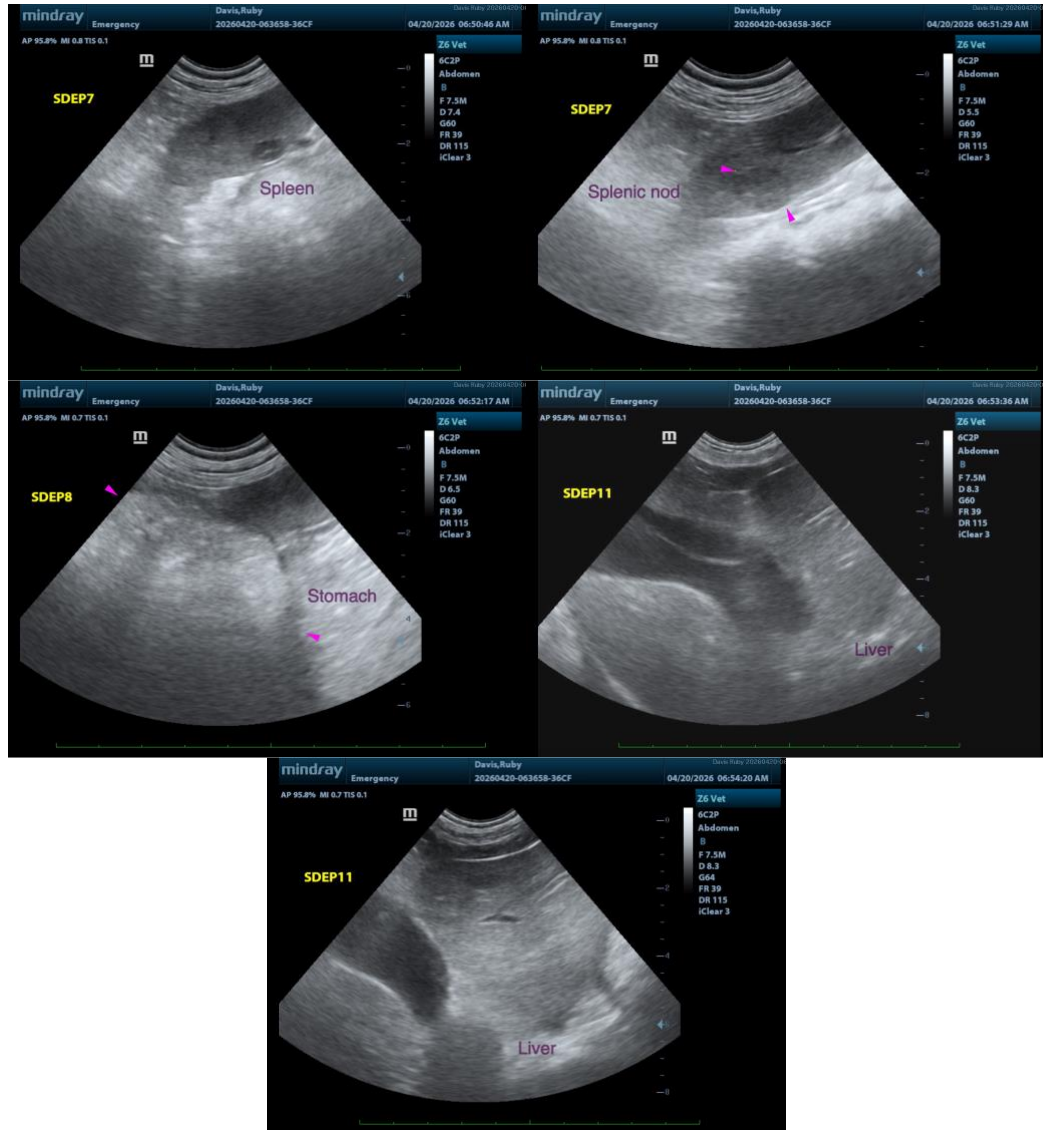
Dr. Jason Brehm

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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.

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