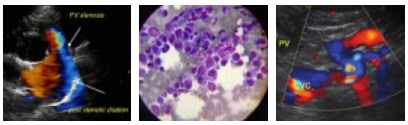
IMAGING PERFORMED BY

IntraPet.com



SonoPath
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DATE

4/26/22

PATIENT

Sadie Carven

SPECIES

Canine

BREED

Australian shepherd

SEX

Female, spayed

AGE

12/11/2011

WEIGHT

50.8 lbs.

INTERPRETED BY

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

HOSPITAL NAME

Hickory VH

REFERRING VET

Dr. Snyder

INVOICE

13279

PRESENTING CLINICAL SIGNS

Slowing down last 6 months- BW showed hypothyroidism and hypercalcemia 12 Ca+. Repeat Ca+ 12. Survey rads NSF.

Current Medications: Thyroxine, Welactin, Dasuquin last month.
Lab Results: Hypercalcemia 12, hypothyroidism.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not required to complete full diagnostic ultrasound.
Stat Report: Not requested.

Imaging Performed By: Andi Parkinson, RDMS.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

No images provided.

The left kidney is normal size (6.19 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild to moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. A small cortical cyst is observed at the lateral aspect. At least one pinpoint hyperechoic to mineralized focus is observed.

The right kidney is normal size (6.69 cm in length); normal shape and architecture with 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.

Adrenal Glands

The left adrenal gland is normal size (0.50 cm at cranial pole) (0.72 cm at caudal pole) (2.02 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.

The right adrenal gland is normal size (0.83 cm at cranial pole) (0.65 cm at caudal pole) (2.75 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.

Spleen

The spleen is normal in size (2.22 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

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. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is mildly distended with fluid. The gastric wall thickness is difficult to evaluate due to rugal folds. The pyloric wall is normal in thickness. The pyloric outflow tract appears 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.

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.

Free Abdomen

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

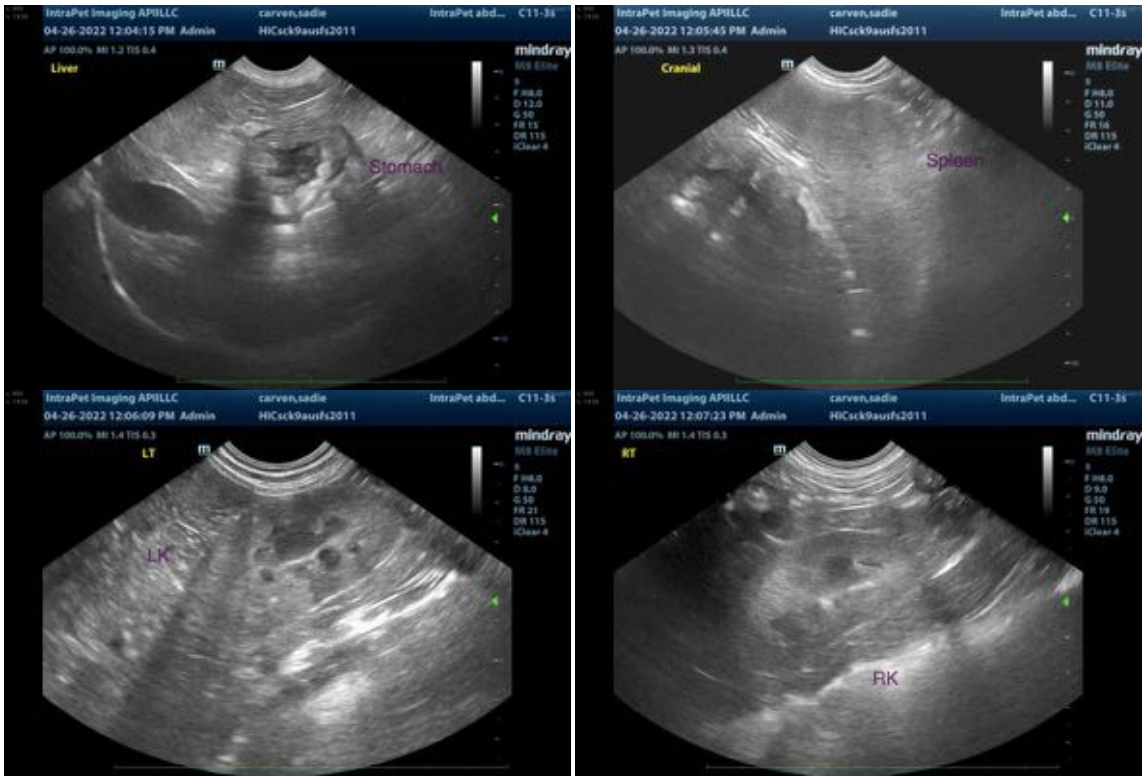
ULTRASONOGRAPHIC FINDINGS

- Bilateral age-related renal changes with dystrophic mineralization.

*An obvious cause for the patient's hypercalcemia is not identified in the study. Considerations include occult neoplasia, primary hyperparathyroidism, fungal disease, other.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Given the presence of hypercalcemia, a thorough rectal examination is recommended to assess for anal gland masses.
- Three-view thoracic radiographs are also recommended to assess for neoplasia in the chest.
- A PTH/PTHrP and ionized calcium levels (Michigan State University Veterinary Diagnostic Laboratory) is recommended. https://cvm.msu.edu/vdl/laboratory-sections/endocrinology



The information and recommendations provided are based on the images presented by the referring veterinarian. 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, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)
Andrea.nicastro@sonopath.com