



PATIENT	PRESENTING CLINICAL SIGNS
Roxie Petrowski	History: Abnormal labwork. Current Medications: Torb iv for scan.
SPECIES	Abnormal PE/Chem/CBC/UA Results: Crea 1.6; BUN 34; ALP 341; Amylase 1900; Lipase 350;
Canine	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
BREED	Urinary System
Labrador Retr	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 and the proximal urethra, visible to a depth of 2 cm, are normal.
SEX	The left kidney is not definitively visualized in the available images.
Female Spayed	The right kidney is mildly enlarged (9.08 cm in length) with smooth peripheral contours. The cortex is mildly-thickened with moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.
AGE	
13 years 1 mos	Adrenal Glands
WEIGHT	The left adrenal gland is enlarged (2.31 cm at cranial pole) (0.94 cm at caudal pole) (3.51 cm in length) and irregular with a mass effect. Hyperechoic areas are observed within the parenchyma. The mesentery effacing the serosal surface of the gland is hyperechoic.
Pending	
INTERPRETED BY	The right adrenal gland is normal in size (0.89 cm at cranial pole) (0.66 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.
Andrea Nicastro DVM Diplomate ACVIM (Sm Animal Internal Med)	
IMAGING PERFORMED BY	Spleen
Shari Reffi, CVT	The spleen is normal in size (2.17 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.
HOSPITAL NAME	Liver
Pet Stat Animal Urgent Care	The liver is subjectively enlarged with slightly swollen peripheral contours. The parenchyma is isoechoic- to hyperechoic relative to the spleen and diffusely homogeneous in appearance. No distinct focal lesions are observed. Vascular and biliary tracts are of normal volume with no evidence of congestion.
REFERRING VET	The gallbladder lumen is moderately distended. The wall is thin and smooth. A moderate amount of aggregated, echogenic, partially dependent sludge in a partially stellate pattern is observed within the lumen. The cystic and common bile ducts are normal/not seen.
Dr. Clause	Gastrointestinal
INVOICE	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.
22844	
DATE	Pancreas
4-30-26	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*

Roxie Petrowski

A 2.07 x 0.95 cm medial iliac lymph node is visualized.

SPECIES

Canine

Free Abdomen

There is no obvious evidence of free fluid.

BREED

Labrador Retr

Other

A brief echocardiogram reveals no evidence of pericardial effusion or obvious right atrial/auricular mass.

SEX

Female Spayed

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- Given the absence of a recognizable left kidney, left renal aplasia is suspected. The right renomegaly is likely secondary to compensatory hypertrophy. However, interstitial nephritis, pyelonephritis, or (less likely) emerging neoplasia, are considerations.
- Left adrenal mass. Neoplasia (i.e., adenocarcinoma, pheochromocytoma) is suspected, with a lower possibility of adenoma, nodular hyperplasia, adrenalitis or other pathology.
- The gallbladder changes are consistent with a developing mucocele.

AGE

13 years 1 mos

WEIGHT

Pending

Secondary Findings

- The diffuse hepatic changes are most consistent with vacuolar hepatopathy (i.e., endocrine, idiopathic) with a lower possibility of inflammatory disease, infiltrative neoplasia, or other hepatopathy.
- The prominent medial iliac lymph node is likely reactive with a lower possibility of emerging neoplasia.

INTERPRETED BY

Andrea Nicastro DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Shari Reffi, CVT

- Given the azotemia, consider the following:
 - Urinalysis with culture and sensitivity
 - UPC if proteinuria is present in the absence of infection
 - Baseline blood pressure measurement
 - +/- Leptospirosis testing particularly if the clinical suspicion for disease is high
 - Transition to a prescription renal diet (if the patient will tolerate it)
 - Serial monitoring of the patient's renal values to assess progression

HOSPITAL NAME

Pet Stat Animal
 Urgent Care

REFERRING VET

Dr. Clause

- Regarding the left adrenal mass, consider the following:
 - Baseline blood pressure measurement (as stated above)
 - Further testing for a functional tumor (i.e., low-dose dexamethasone suppression test, urine/blood catecholamine levels)
 - Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
 - +/- abdominal CT scan, particularly if a left adrenalectomy is a consideration

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- Given the gall bladder changes, Ursodeoxycholic acid (Ursodiol) is recommended. Serial sonographic monitoring (e.g., every 4-6 weeks) of the gall bladder is recommended to assess for progression to a fully formed mucocele. If progression occurs, a cholecystectomy may be warranted.



PATIENT

Roxie Petrowski

SPECIES

Canine

BREED

Labrador Retr

SEX

Female Spayed

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13 years 1 mos

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IMAGING PERFORMED BY

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HOSPITAL NAME

Pet Stat Animal
 Urgent Care

REFERRING VET

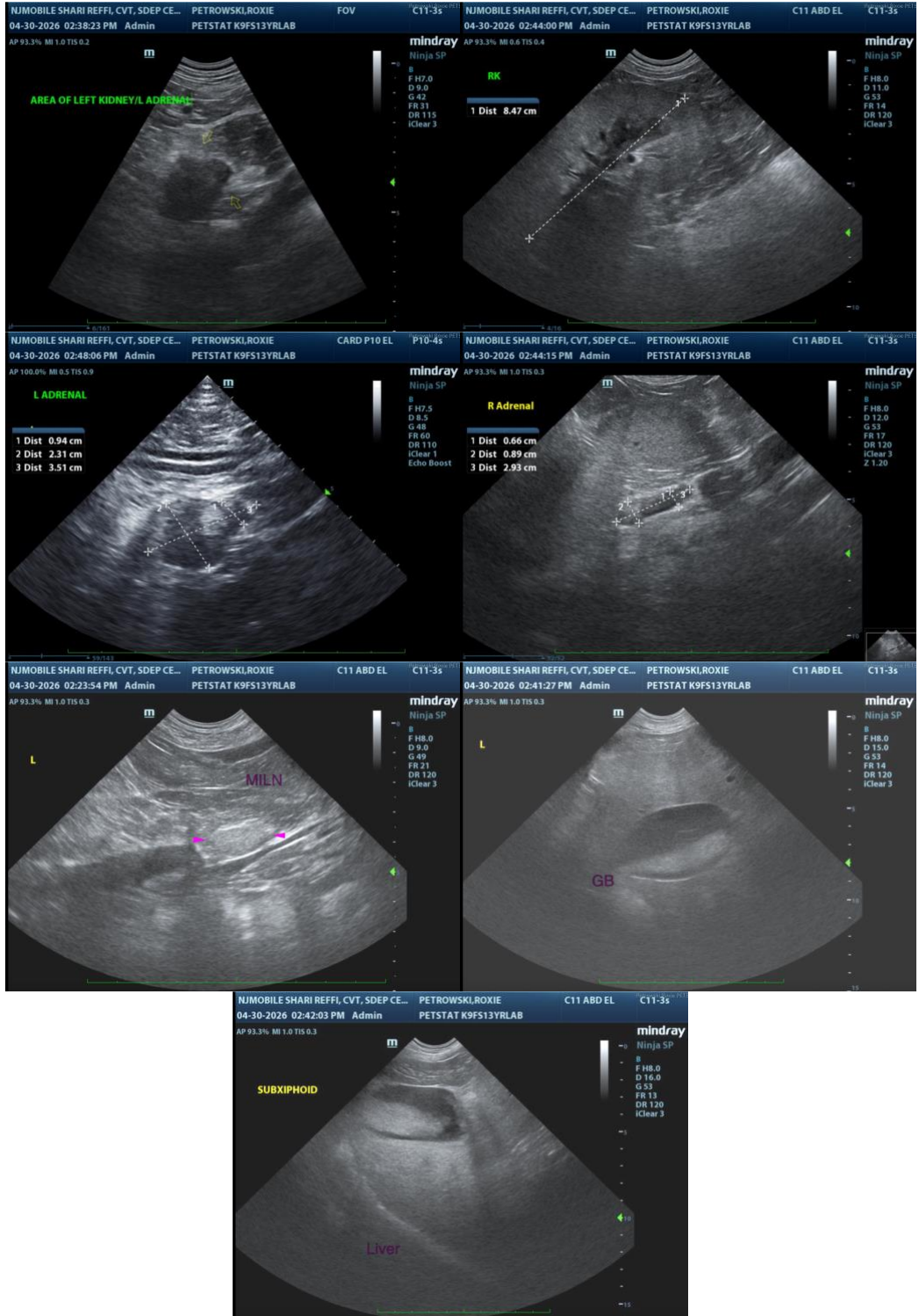
Dr. Clause

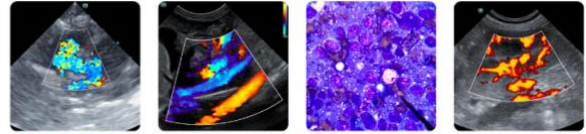
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PATIENT

Roxie Petrowski

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.

SPECIES

Canine

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.

BREED

Labrador Retr

Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com

SEX

Female Spayed

AGE

13 years 1 mos

WEIGHT

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