



PATIENT PRESENTING CLINICAL SIGNS

- Harley Scerbo
- BCS 3/9
 - Vomiting/Anorexia/Lethargic
- SPECIES**
- History of seizures

Canine Current Medications: Zonisamide, Keppra, K+Br (Torb sedation for scan)
 Abnormal PE/Chem/CBC/UA Results: Amylase-2359; Lipase-5228; WBC-23k

BREED

Mix

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX The urinary bladder wall is normal in thickness, and 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 5.0 cm, are normal.

Neutered Male

AGE

7

The prostate is normal in size (0.72 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

WEIGHT

85 lbs

The left kidney is normal in size (7.76 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.

INTERPRETED BY

Andrea Nicastro DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

The right kidney is normal in size (7.78 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.

IMAGING PERFORMED BY

Shari Reffi, CVT

Adrenal Glands

The left adrenal gland is normal in size (0.60 cm at cranial pole) (0.68 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.

HOSPITAL NAME

All Creatures Gr&Sm
 VC (Denville)

The right adrenal gland is normal in size (0.83 cm at cranial pole) (0.78 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.

REFERRING VET

Dr. Ashmore

Spleen

The spleen is prominent in size (2.85 cm in width at the level of the hilus) with smooth peripheral contours. There is appropriate echogenicity and echotexture. A few, small, myelolipomas are observed in the region of the hilus. Splenic vasculature is normal.

INVOICE

22794

Liver

The liver is subjectively normal in size within normal peripheral contours. The parenchyma is hypoechoic relative to the spleen. One- to two, small, ill-defined hyperechoic nodules are observed on the left side. The remaining parenchyma is homogenous. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

DATE

4-6-26

The gallbladder lumen is moderately distended. The wall is thin and smooth. A small amount of suspended echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.



PATIENT *Gastrointestinal*

Harley Scerbo

The gastric lumen is not distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The duodenum is mildly fluid-distended. The duodenal wall is diffusely thickened (up to 0.67 cm) with retention of the normal layering pattern. The remaining small intestinal segments are normal in thickness with a normal layering pattern and appropriate mural detail. Discrete masses are not identified. The colonic wall is normal. There is no obvious evidence of an obstructive pattern.

SPECIES

Canine

BREED *Pancreas*

Mix

The right limb is enlarged, with irregular peripheral contours. The parenchyma is hypoechoic relative to surrounding omental fat, and heterogeneous in appearance. The pancreatic duct is not overtly dilated. The mesentery effacing the serosal surface is hyperechoic to saponified.

SEX

Neutered Male

Lymph nodes

The abdominal lymph nodes are normal/not visible.

AGE *Free Abdomen*

7

There is no obvious evidence of free fluid.

WEIGHT

85 lbs

Other

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

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY *Primary Findings*

Andrea Nicastro DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

- The pancreatic changes in the right limb are most consistent with moderate to severe pancreatitis. Adjacent peritonitis (+/- saponification of fat) is present.
- The duodenal wall thickening is likely due to duodenitis secondary to pancreatitis.

IMAGING PERFORMED BY

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Secondary Findings

- The mild splenomegaly may be a normal variant for this larger-breed patient. Other considerations include lymphoid hyperplasia, extramedullary hematopoiesis, splenitis, antigenic stimulation, or less likely, emerging neoplasia).

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Ashmore

- Supportive care for pancreatitis is recommended including IV fluid therapy, gastric protectants, antiemetics, pain medication as needed, +/- fresh frozen plasma, +/- fuzapladiib.
- Three-view thoracic radiographs are recommended to assess cardiopulmonary status, as pancreatitis can cause systemic effects.

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- Serial monitoring of the patient's organ functions is recommended to assess for deterioration.
- Also consider daily sonographic monitoring of pancreas to assess progression.

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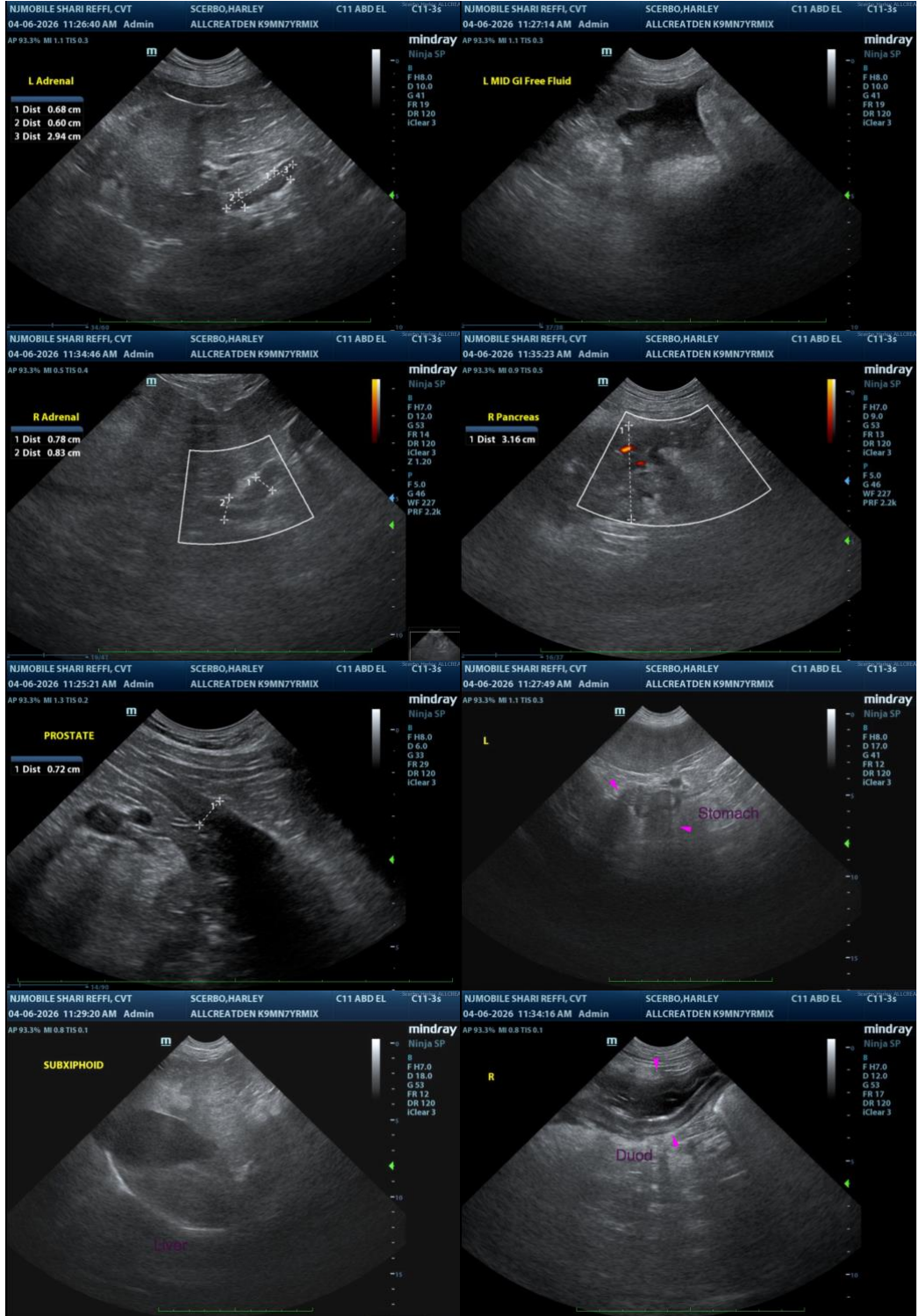
Dr. Ashmore

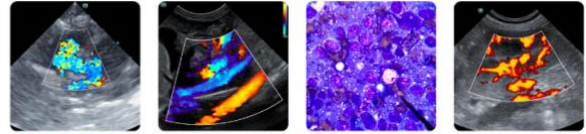
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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