



PATIENT

Ora Redmond

SPECIES

Canine

BREED

Lab

SEX

Female Spayed

AGE

11/06/2015

WEIGHT

31kg

PRESENTING CLINICAL SIGNS

Clinical Exam Findings: Over last few weeks Pt has experienced intermittent vomiting, decreased appetite, and some coughing/hacking. Pt has continued to act normal though. She was seen at pDVM and found to have elevated liver values and was given supportive care. Pt was seen at VEG today and TFERED for U/S due to worsening liver values. Pt is monitored in yard at home; O states there are no sago palms in yard and Pt is not known to get into things. Historically healthy.

Abnormal lab-work values:

ProCyte One (CBC) at 5:55 PM:

LYM: 0.53 K/ μ L (Low; Reference: 1.05-5.10 K/ μ L). A note indicates this is likely a stress leukogram. Platelet aggregates were detected.

Catalyst Dx (Blood Chemistry - Diluted) at 6:08 PM:

GLU: 55 mg/dL (Low; Reference: 70-143 mg/dL)

BUN: <5 mg/dL (Low; Reference: 7-27 mg/dL)

GLOB: 5.1 g/dL (High; Reference: 2.5-4.5 g/dL)

ALT: 1683 U/L (High; Reference: 10-125 U/L)

ALKP: 2128 U/L (High; Reference: 23-212 U/L)

GGT: 100 U/L (High; Reference: 0-11 U/L)

CHOL: 396 mg/dL (High; Reference: 110-320 mg/dL)

Current Medications: Cerenia, trazodone, Denamarin

Patient sedated with butorphanol for this study.

INTERPRETED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

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 and the proximal urethra, visible to a depth of 2 cm, are normal.

IMAGING PERFORMED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

The left kidney is normal in size (6.92 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.

HOSPITAL NAME

BluePearl MP ER

The right kidney is normal in size (6.87 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.

REFERRING VET

Schow

Adrenal Glands

The left adrenal gland is normal in size (0.60 cm at cranial pole) (0.63 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.

INVOICE

22840

The right adrenal gland is normal in size (1.22 cm at cranial pole) (0.58 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.

DATE

4-7-26



PATIENT

Ora Redmond

SPECIES

Canine

BREED

Lab

SEX

Female Spayed

AGE

11/06/2015

WEIGHT

31kg

INTERPRETED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

**IMAGING
PERFORMED BY**

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

HOSPITAL NAME

BluePearl MP ER

REFERRING VET

Schow

INVOICE

22840

DATE

4-7-26

Spleen

The spleen is prominent-in-size (2.83 cm in width at the level of the hilus) with smooth peripheral contours. The parenchyma is subtly mottled in appearance. At least two hyperechoic nodules are visualized (one measuring 1.63 cm in its longest dimension). Splenic vasculature is normal.

Liver

The liver is subjectively normal in size with normal peripheral contours. The parenchyma is hypoechoic relative to the spleen. Mid- to right-liver, a 3.46 cm hypoechoic area is visualized. The remaining parenchyma is homogenous. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion. The portal vein to caudal vena cava ratio is approximately 1: 1.

The gallbladder lumen is moderately distended. The wall is thin and smooth. Several polypoid-like lesions are arising from the mucosal surface, particularly near the gallbladder neck. A small amount of gravity-dependent echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is mildly fluid-distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The pyloric outflow tract is patent. The small intestinal lumen is segmentally fluid-distended. The small intestinal wall is normal in thickness with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The ileocecolic junction and colonic wall are normal. The colonic lumen contains liquid-appearing fecal material. There is no obvious 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

One- to two prominent periportal lymph node are visualized (one measuring 1.78 x 1.02 cm).

Free Abdomen

There is no obvious evidence of free fluid.

Other

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

ULTRASONOGRAPHIC FINDINGS

Primary Findings

- The hypoechoic area mid- to right-liver may represent a regenerative nodule, inflammatory focus, emerging tumor, imaging artifact, other. This lesion is unlikely solely responsible for the severe elevation in liver enzymes. Therefore, a microscopic hepatopathy (i.e., bacterial cholangiohepatitis, Leptospirosis, chronic active hepatitis, copper-associated hepatotoxicity, infiltrative neoplasia (less likely)) is also suspected.
- Gallbladder debris, non-mucocele. Polypoid-like lesions are also observed within the gallbladder. These are typically benign incidental findings in older patients but can be associated with cholecystitis.



PATIENT

Ora Redmond

SPECIES

Canine

BREED

Lab

SEX

Female Spayed

AGE

11/06/2015

WEIGHT

31kg

INTERPRETED BY

Andrea Nicastro DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

IMAGING PERFORMED BY

Andrea Nicastro DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

HOSPITAL NAME

BluePearl MP ER

REFERRING VET

Schow

INVOICE

22840

DATE

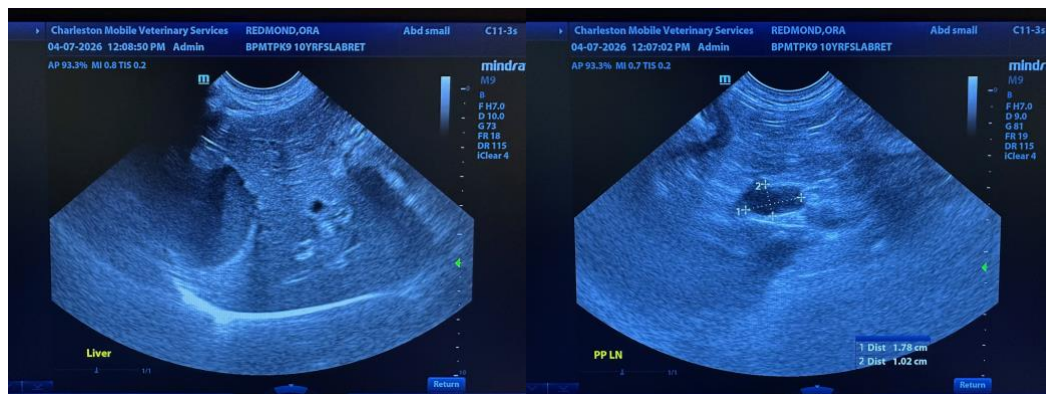
4-7-26

Secondary Findings

- The splenic parenchymal changes are most consistent with a benign process such as lymphoid hyperplasia, extramedullary hematopoiesis, splenitis or antigenic stimulation with a lower possibility of infiltrative neoplasia (i.e., lymphoma, mast cell neoplasia).
- The periportal lymphadenopathy could be consistent with reactive change, or less likely, emerging neoplasia.
- Mild retained gastric fluid
- Diarrheic stool

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- A thorough history of possible toxin ingestion (i.e., sago palm, xylitol) is recommended (if not already performed).
- Leptospirosis testing (i.e., blood and urine PCR, serology) is recommended.
- Consider liver biopsies (i.e., laparoscopic or surgical) with aerobic and anaerobic bile cultures and hepatic copper quantitation.
- If a conservative approach is desired, consider empirical treatment for bacterial cholangiohepatitis/ Leptospirosis (amoxicillin-clavulanic acid, Denamarin, Ursodiol). If no improvement in the liver values is seen within 7-10 days of initiating therapy, antibiotics should be discontinued, and hepatic tissue sampling reconsidered. If liver values improve, continue therapy for at least 4-6 weeks and 1 week beyond normalization of the liver values.





PATIENT

Ora Redmond

SPECIES

Canine

BREED

Lab

SEX

Female Spayed

AGE

11/06/2015

WEIGHT

31kg

INTERPRETED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

IMAGING PERFORMED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

HOSPITAL NAME

BluePearl MP ER

REFERRING VET

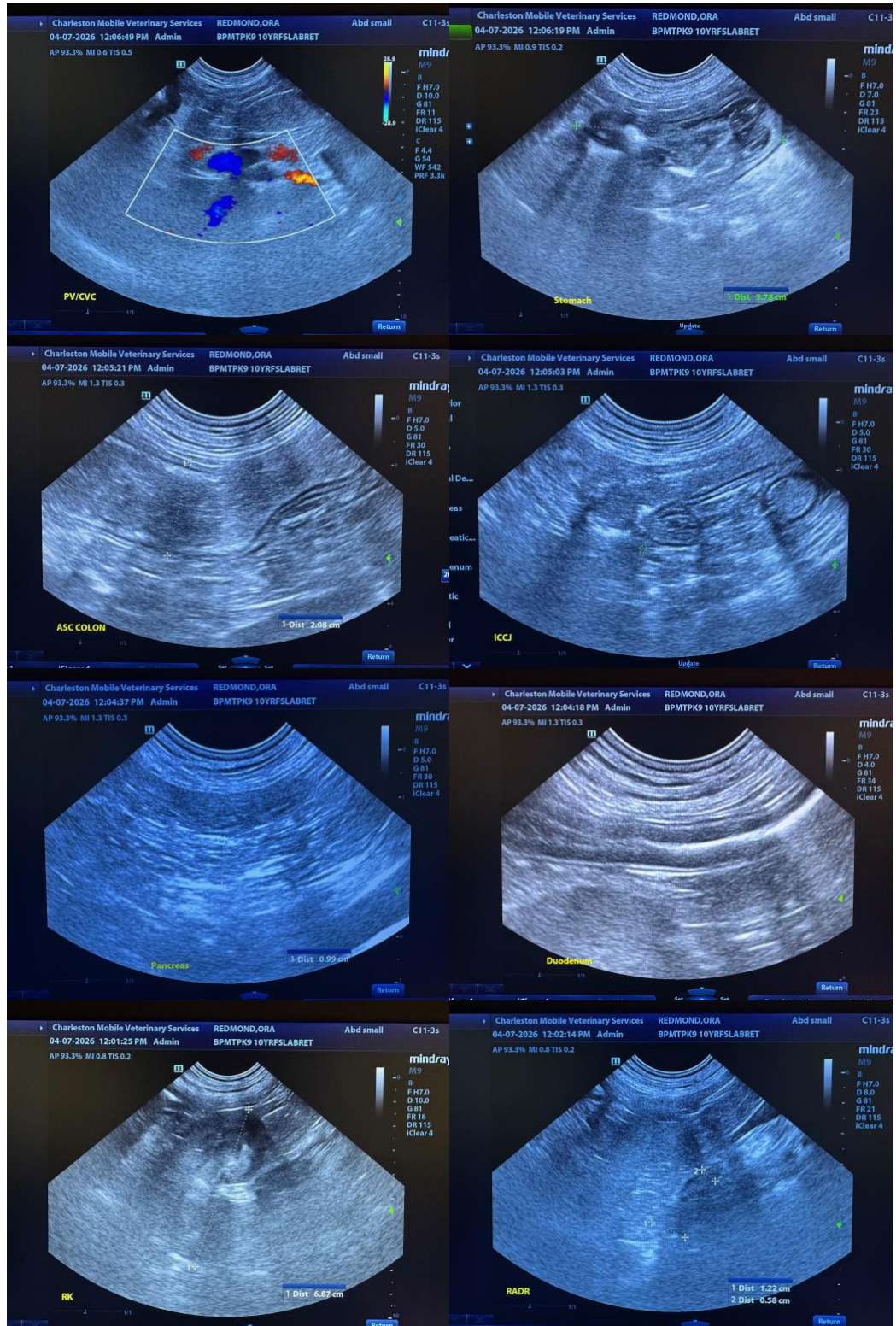
Schow

INVOICE

22840

DATE

4-7-26





PATIENT

Ora Redmond

SPECIES

Canine

BREED

Lab

SEX

Female Spayed

AGE

11/06/2015

WEIGHT

31kg

INTERPRETED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

IMAGING PERFORMED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

HOSPITAL NAME

BluePearl MP ER

REFERRING VET

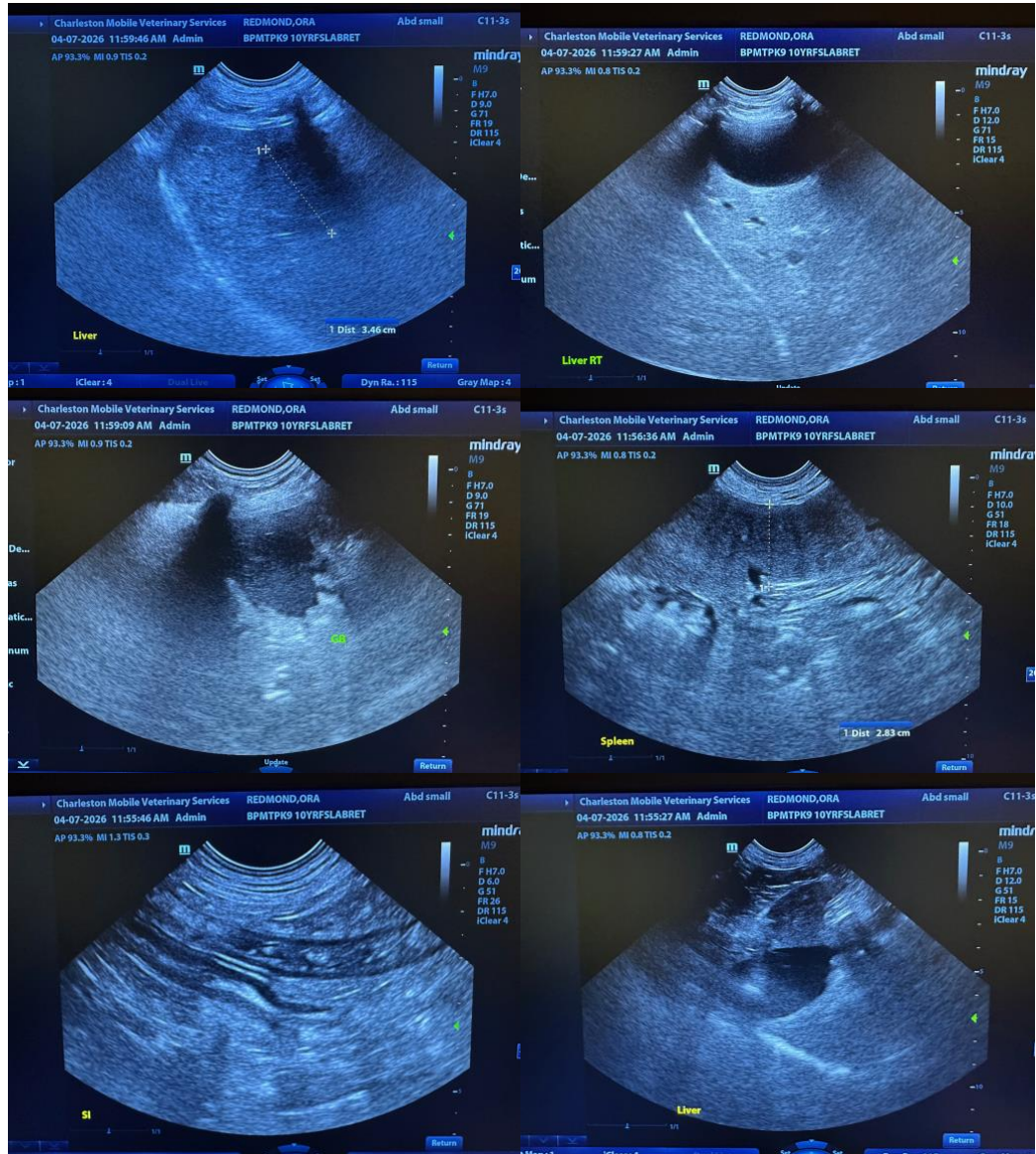
Schow

INVOICE

22840

DATE

4-7-26





PATIENT

Ora Redmond

SPECIES

Canine

BREED

Lab

SEX

Female Spayed

AGE

11/06/2015

WEIGHT

31kg

INTERPRETED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

IMAGING PERFORMED BY

Andrea Nicastrò DVM
 Diplomate ACVIM
 (Sm Animal Internal Med)

HOSPITAL NAME

BluePearl MP ER

REFERRING VET

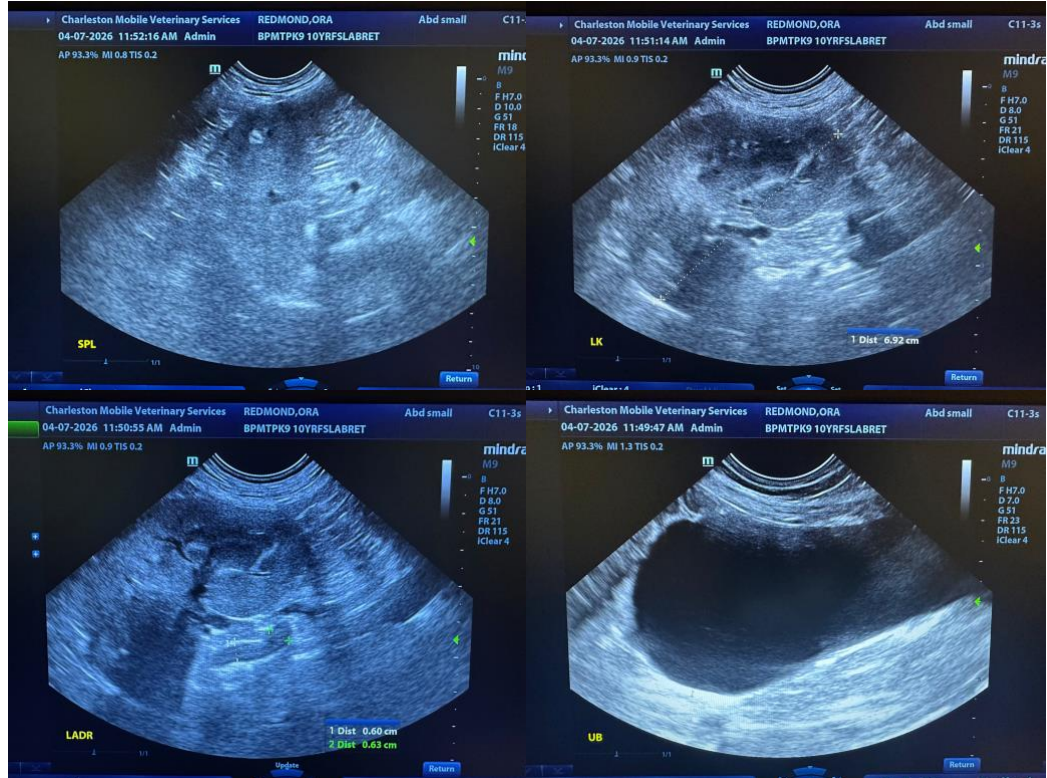
Schow

INVOICE

22840

DATE

4-7-26



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