

<b>PATIENT</b>	<b>PRESENTING CLINICAL SIGNS</b>
Terra Wilson	History: acute onset lethargy, nonspecific pain, abnormal behavior and poor appetite.
<b>SPECIES</b>	Abnormal PE/Chem/CBC/UA Results: arrythmia ausculted, tense abdomen, otherwise NSF on PE ECG: occ strings of VPC's Abdominal rads: mass effect cranial abdomen w/ decreased serosal detail. AFAST: negative Bloodwork: SC: AST 1145, ALT 623, Creat 1,8, SDMA 23.6, BUN 52, Tbili 0.3, CPK 8362. All other UR CBC: WBC 22.3, Neut 18063, Mono 13348. All other UR. Thoracic rads: NSF - lungs clear; heart WNL.
Canine	
<b>BREED</b>	
Kelpie X	<b>ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN</b>
<b>SEX</b>	<b>Urinary System</b> 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 2 cm, are normal.
Female Spayed	<b>Left Kidney</b> The left kidney is normal in size (4.98 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.
<b>AGE</b>	<b>Right Kidney</b> (See "Other" category).
10 years	<b>Left Adrenal Gland</b> The left adrenal gland is normal in size (0.59 cm at cranial pole) (0.49 cm at caudal pole) (2.26 cm in length) 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.
<b>WEIGHT</b>	<b>Right Adrenal Gland</b> (See "Other" category).
41.3 lbs	<b>Spleen</b> The spleen is normal in size (1.41 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 appears normal.
<b>INTERPRETED BY</b>	<b>Liver</b> 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.
Andrea Nicastro, DVM, Diplomate ACVIM (Small Animal Internal Medicine)	<b>Gastrointestinal</b> The stomach and intestine are free of stasis and exhibit normal peristaltic activity. 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 small intestinal lumen is not dilated. The small intestinal wall is normal in thickness with a normal layering pattern and appropriate mural
<b>IMAGING PERFORMED BY</b>	<b>REFERRING VET</b>
Jessica Bailes	Justin Vaughn
<b>HOSPITAL NAME</b>	<b>INVOICE</b>
All Creatures Gr&Sm VC - Corvallis, OR	13005
<b>REFERRING VET</b>	<b>DATE</b>
Justin Vaughn	5.11.23



## PATIENT

Terra Wilson

detail. Discreet masses are not identified. The colonic wall is normal. There is no evidence of an obstructive pattern.

## SPECIES

Canine

### **Pancreas**

(See "Other" category).

### **Free Abdomen**

Trace free fluid is observed.

## BREED

Kelpie X

### **Lymph Node**

(See "Other" category).

## SEX

Female Spayed

### **Other**

A >7.00 cm irregular multi-lobulated heterogenous cavitated mass is observed in the mid- to right cranial abdomen. The mass appears to be invading into or arising from the caudal pole of the right kidney. In the remainder of the kidney, the margins are curvilinear with a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. The mesentery surrounding the mass is hyperechoic.

## AGE

10 years

## ULTRASONOGRAPHIC FINDINGS

### Primary Findings

## WEIGHT

41.3 lbs

- Large cavitated mass in the mid- to right cranial abdomen (the origin of which is unclear). It may be arising from right kidney, pancreas, right adrenal gland, lymph node, mesentery, other. There is right renal infiltration. Neoplasia (i.e., carcinoma) is suspected, with a lower possibility of a large cavitated abscess. Adjacent peritonitis is present.

## INTERPRETED BY

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

### Secondary Findings

- Bilateral chronic renal changes

## IMAGING PERFORMED BY

Jessica Bailes

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- To further evaluate the large abdominal mass, consider fine-needle aspiration for cytology +/- aerobic and anaerobic bile cultures, +/- an abdominal CT scan.

## HOSPITAL NAME

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**PATIENT**

Terra Wilson

**SPECIES**

Canine

**BREED**

Kelpie X

**SEX**

Female Spayed

**AGE**

10 years

**WEIGHT**

41.3 lbs

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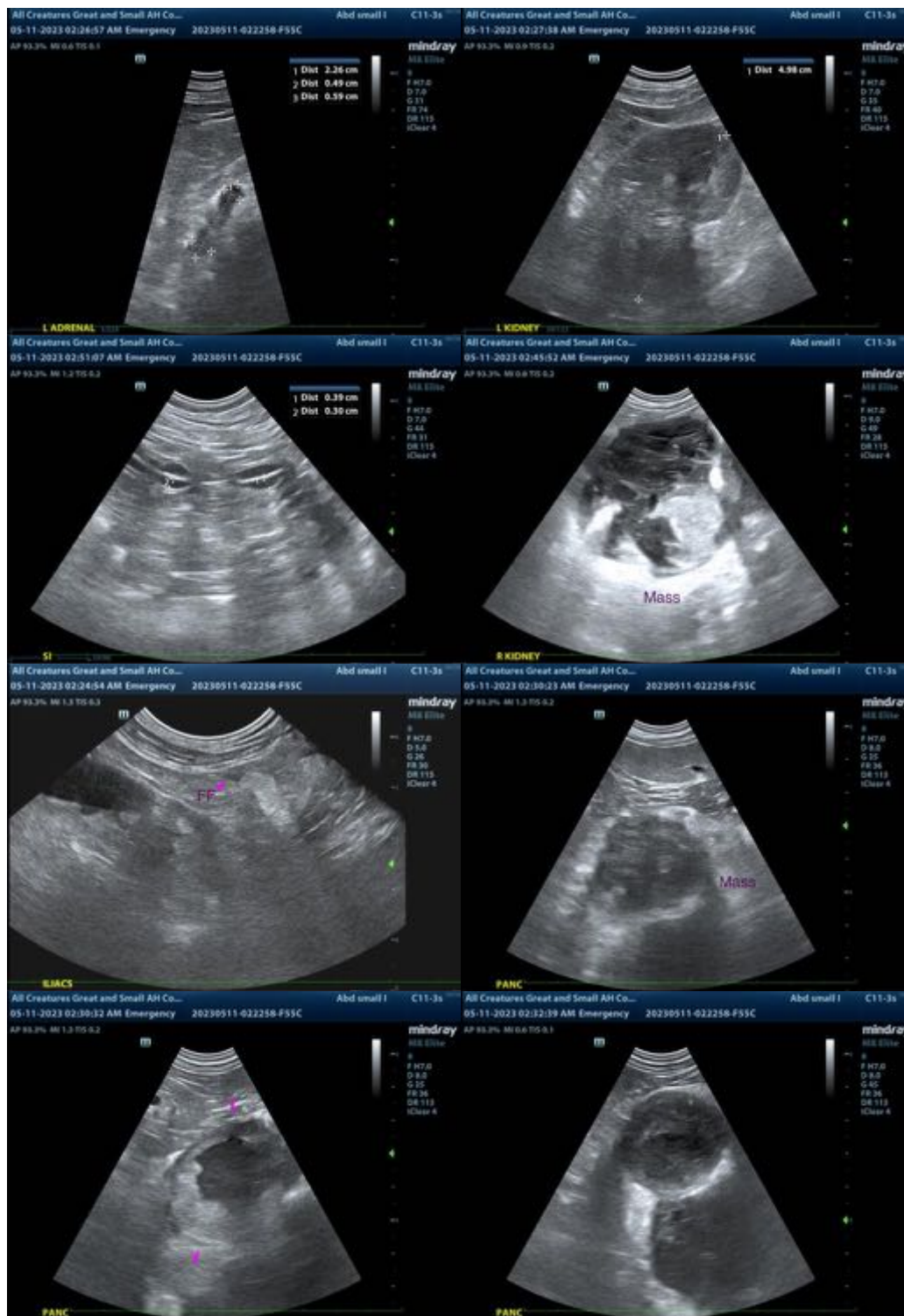
Justin Vaughn

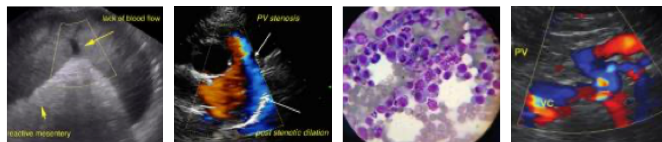
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**PATIENT**

Terra Wilson

**SPECIES**

Canine

**BREED**

Kelpie X

**SEX**

Female Spayed

**AGE**

10 years

**WEIGHT**

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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