



## PATIENT

Roxy Hald

## SPECIES

Canine

## BREED

Shiba Inu

## SEX

Spayed Female

## AGE

13.5 years

## WEIGHT

28.4 lbs

## INTERPRETED BY

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

## IMAGING PERFORMED BY

Loetitia Saint-Jacques,  
RVT LVT

## HOSPITAL NAME

Truckee Meadows VH

## REFERRING VET

Dr. Rachel Kuester

## INVOICE

10934

## DATE

5/19/22

## PRESENTING CLINICAL SIGNS

History: Simparica Trio 1 T PO q30d Hill's k/d Procedure: Ultrasound Current Problem List: History of elevated CREA, normal on recent labs, on Hill's k/d Chronic, slight left head tilt since 9/2021 Suspected vestibular episode 4/2022 Chronic ALP elevation since 9/2021 (mild, in the 300's) that recently increased dramatically to 1500's during vestibular event in April and is now in 1200's Hx of CCLR with surgery Presenting Complaint: Renal Profile + ALP Renal values WNL SDMA 7.3 ALP 1224 Markedly elevated ALP, Hx of mild to moderate elevation (in the 300's) jumped up to 1500 at AEC in April. Still markedly elevated DDx: primary hepatopathy, endocrine disease s/a Cushing's disease, other adrenal disease, neoplasia Pertinent Diagnostic Results: 5/10/22 Renal Profile + ALP Renal values WNL SDMA 7.3 ALP 1224 4/11/22 - labs with Animal Emergency Center ALP 1582 12/6/21 CREA 1.8 ALP 366 9/3/21 CREA 2.1 ALP 300

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. The region of the trigone and the visible portion of the proximal urethra are normal.

The left kidney presented normal size (4.58 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to moderate loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

The right kidney presented normal size (4.17 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio mild loss of corticomedullary distinction. A 0.41 cm nonobstructive nephrolith is visualized. There is no evidence of pyelectasia, infarcts or hydronephrosis.

### Adrenal Glands

The left adrenal gland is normal size (0.55 cm at cranial pole) (0.58 cm at caudal pole); 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 (0.49 cm at cranial pole) (0.64 cm at caudal pole) (1.79 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 (1.60 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.



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### *Liver*

The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and subtly heterogenous in appearance with a few small, irregular, hyperechoic nodules, as well as a few small, ill-defined hypoechoic areas. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion.

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The gall bladder lumen is moderately distended. The wall is thin and smooth. A small amount of echogenic debris is observed within the lumen, some of which is partially dependent and some of which is suspended. The cystic and common bile ducts are normal.

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Spayed Female

### *Gastrointestinal*

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 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 or overt infiltrative disease is noted.

## AGE

13.5 years

### *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.

## WEIGHT

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### *Free Abdomen*

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

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### *Other*

A brief echocardiogram reveals no evidence of pericardial effusion.

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## ULTRASONOGRAPHIC FINDINGS

### Primary Findings

- The diffuse hepatic changes are non-specific and could be consistent with vacuolar hepatopathy, regenerative nodular hyperplasia, and/or age-related remodeling. Inflammatory and infiltrative disease are considered less likely.

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### Secondary Findings

- Bilateral, chronic age-related renal changes with a right nonobstructive nephrolith

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## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Serial monitoring (i.e, every 3-4 months) of the patient's liver values is recommended. If values continue to increase, a repeat abdomen ultrasound +/- a more advanced hepatic work-up (i.e., tissue sampling) may be warranted.

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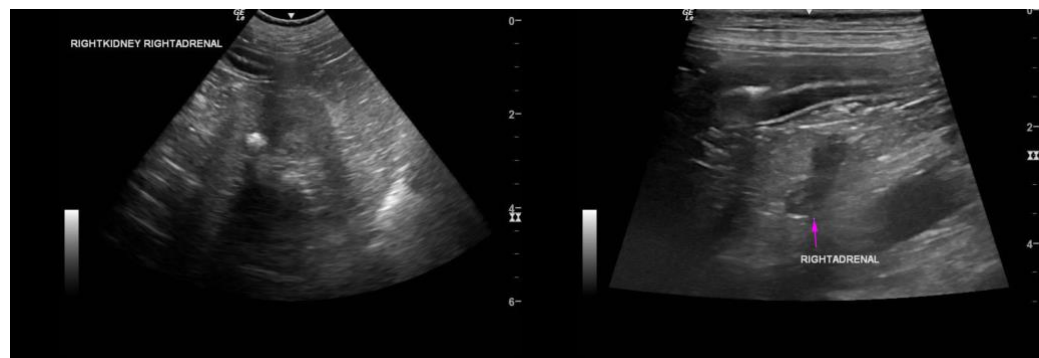
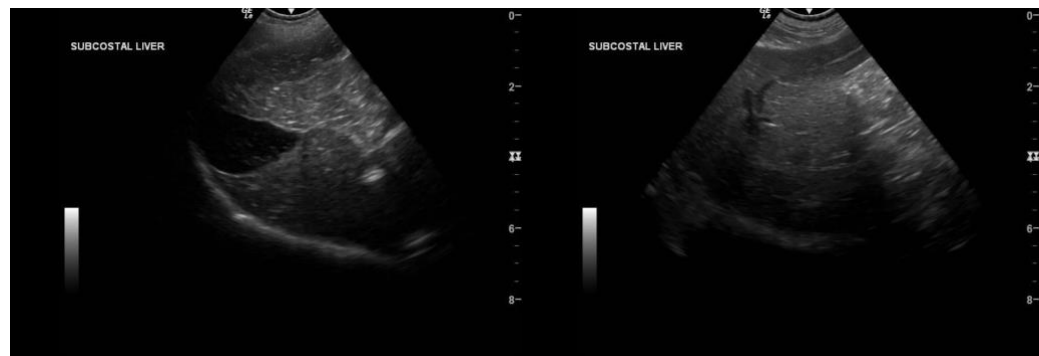
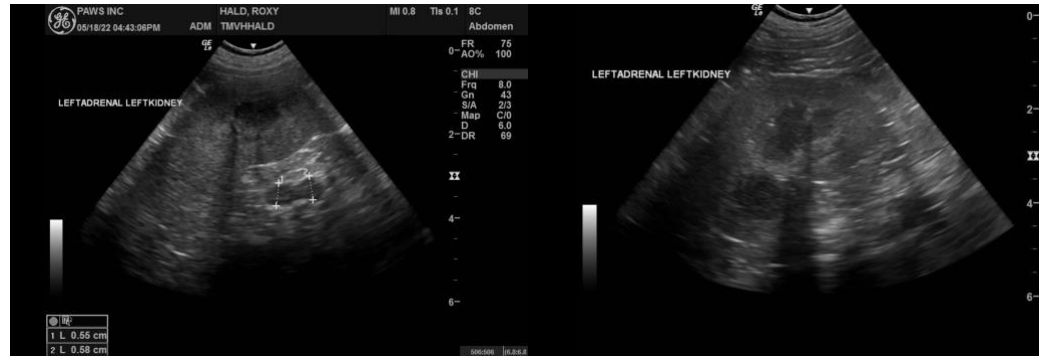
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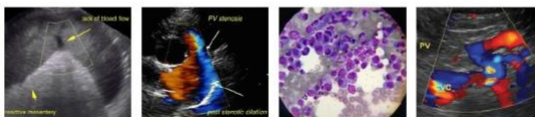
5/19/22



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



Portable Animal Wellness Sonography, Inc.

IMAGING PERFORMED BY  
pawsonography@gmail.com 530-786-8340

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