



## PATIENT PRESENTING CLINICAL SIGNS

Xena Moncheck

History: Patient presenting for lethargy the past 48 hours. Vomiting started last night. Not eating but drinking water.

## SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: PE: Dull mentation, dehydrated, weight loss Bloodwork and Urine Attached WBC - 19.45 Neutrophils - 11.74 Lymphocytes - 5.49 Monocytes - 1.35 Chemistry: Glu - 72 SDMA - 42 Crea - 6.5 BUN - 67 Phos - 11.7 CA - 12.9 Globulins - 4.6 Amyl- 1812 NA - 137 (L) K- 8.7 (H) Cl - 102 (L) T4- Normal Snap 4DX: Negative x 4 X-rays were unremarkable Urinalysis - Cysto SG: 1.024 Protein: 100 Bilirubin: 3+ Bld: 50

## BREED

German Shepherd

## SEX

Female Spayed

\*\*This study was limited to the urinary system. There is a potential for pathology in organs that were not visualized.

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### AGE

6

### Urinary System

The left kidney is normal in size (8.37 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.

### WEIGHT

55 lbs

The right kidney is normal in size (8.88 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  
(Small Animal Internal  
Medicine)

### Adrenal Glands

The region of the adrenal glands is evaluated. No obvious pathology is observed in this region.

## IMAGING PERFORMED BY

Keisha Smitley, CVT

## ULTRASONOGRAPHIC FINDINGS

- Sonographically normal-appearing kidneys.
- Adrenal glands not visualized.

## HOSPITAL NAME

Geary Veterinary Svc

\*Given the patient's clinical history, hypoadrenocorticism or acute renal failure are considerations.

## REFERRING VET

Curtis Geary, VMD

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- If the ACTH stimulation test is not consistent with hypoadrenocorticism, further work-up could include the following:

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5-22-26

1. Urine culture and sensitivity
2. UPC if proteinuria is present in the absence of infection
3. Leptospirosis testing (i.e., blood and urine PCR, serology)
4. Baseline blood pressure measurement

- While awaiting test results, aggressive approach is desired supportive care is recommended.



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**SEX**

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**AGE**

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**WEIGHT**

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**INTERPRETED BY**

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**IMAGING  
PERFORMED BY**

Keisha Smitley, CVT

**HOSPITAL NAME**

Geary Veterinary Svc

**REFERRING VET**

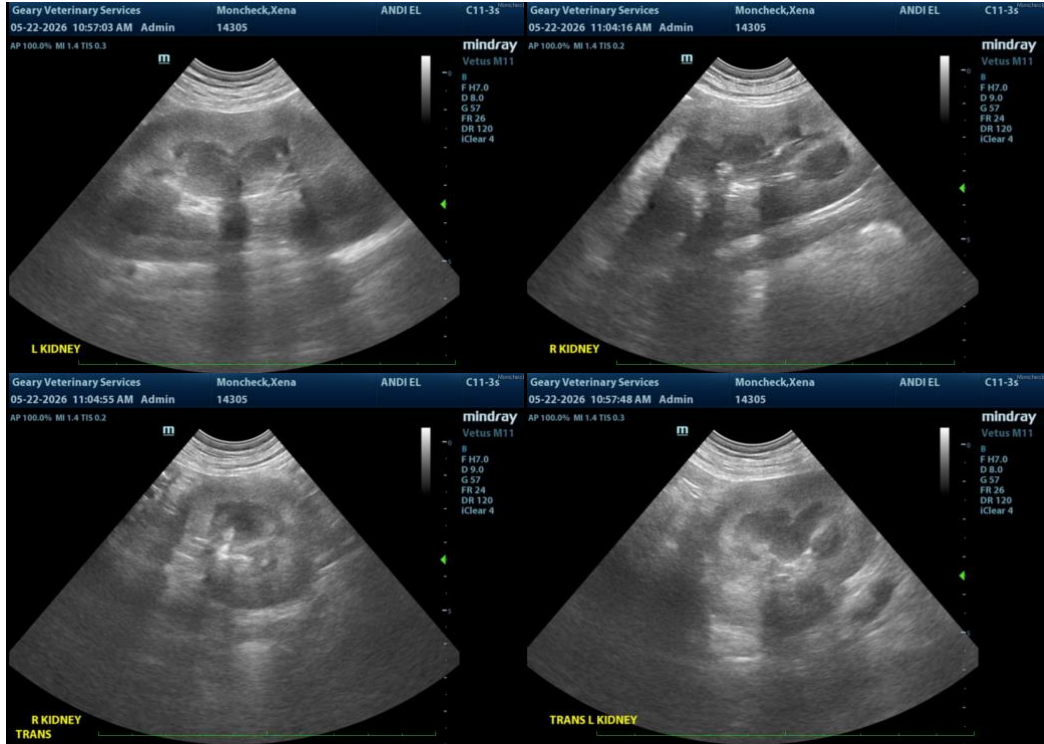
Curtis Geary, VMD

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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)**  
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