



PATIENT

Chewy Dionisio

SPECIES

Canine

BREED

Poodle Mix

SEX

Male Neutered

AGE

11

WEIGHT

7.92 Kg

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

VCA Palmetto AH

REFERRING VET

Vivian Ghorzi

INVOICE

23078

DATE

5-29-26

PRESENTING CLINICAL SIGNS

Clinical Exam Findings:

- Chronic allergies, recurrent skin infections;
- Major elevation on ALK 500-800-1300 over the past 18 months;
- periodontal disease - work up for another dental;
- Seizures at the groomer (on levetiracetam);
- Overweight.

Abnormal lab-work values: ALKP 1300. Triglycerides 581 (not fasted). Lipemia and hemolysis on sample. Crystalluria (struvites). Total T4 0.5 (free T4 pending).
Current Medications: Levetiracetam, Apoquel, Simplicef (current skin flare up).

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 mostly anechoic. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 3.0 cm, are normal.

The prostate is normal in size (0.65 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

The left kidney is normal in size (4.51 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

The right kidney is normal in size (4.75 cm in length) with a normal shape, architecture and smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is enlarged (1.12 cm at cranial pole) (0.67 cm at caudal pole) with swollen peripheral contours. A 1.39 x 1.05 cm hyperechoic- to heterogenous nodule is observed at the cranial pole. Glandular echogenicity and detail at the caudal pole are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal in size (0.56 cm at cranial pole) (0.42 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.

Spleen

The spleen is normal in size (1.11 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.

Liver

The liver is subjectively enlarged with slightly swollen peripheral contours. The parenchyma is isoechoic relative to the spleen and diffusely homogeneous in appearance. No distinct focal lesions are observed. Vascular and biliary tracts are of normal volume with no evidence of congestion.



PATIENT

Chewy Dionisio

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

SPECIES

Canine

Gastrointestinal

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

BREED

Poodle Mix

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.

SEX

Male Neutered

Lymph Nodes

The abdominal lymph nodes are normal/not visible.

AGE

11

Free Abdomen

There is no obvious evidence of free fluid.

WEIGHT

7.92 Kg

Other

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

ULTRASONOGRAPHIC FINDINGS

INTERPRETED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

Primary Findings

- The diffuse hepatic changes are most consistent with vacuolar hepatopathy (i.e., endocrine, idiopathic) with a lower possibility of inflammatory disease, infiltrative neoplasia, or other hepatopathy.
- Gallbladder debris, non-mucocele
- Left adrenomegaly with a nodule at the cranial pole. The nodule could be consistent with focal nodular hyperplasia, adenoma, emerging adenocarcinoma, pheochromocytoma, other.

IMAGING PERFORMED BY

Andrea Nicastro DVM
Diplomate ACVIM
(Sm Animal Internal Med)

Secondary Findings

- Mild bilateral nonspecific age-related renal changes

HOSPITAL NAME

VCA Palmetto AH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Vivian Ghiorzi

- If an aggressive approach is desired, hepatic tissue sampling (i.e., aspirates or biopsies) can be considered. However, results may be of low yield. Alternatively, serial monitoring (i.e., every 3-4 months) of the patient's liver values is recommended. If liver values continue to increase, a repeat abdominal ultrasound +/- hepatic tissue sampling may be warranted.

INVOICE

23078

- Regarding the left adrenomegaly, consider further testing for functional adrenal tumor (i.e., low-dose dexamethasone suppression test, urine/blood catecholamine levels) particularly if the patient is symptomatic. A baseline blood pressure measurement is also recommended. Also consider a recheck ultrasound in 2-3 months to assess for growth of the lesion.

DATE

5-29-26



PATIENT

Chewy Dionisio

- Given the patient's age, three-view thoracic radiographs should also be considered to assess cardiopulmonary status.

SPECIES

Canine

BREED

Poodle Mix

SEX

Male Neutered

AGE

11

WEIGHT

7.92 Kg

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

VCA Palmetto AH

REFERRING VET

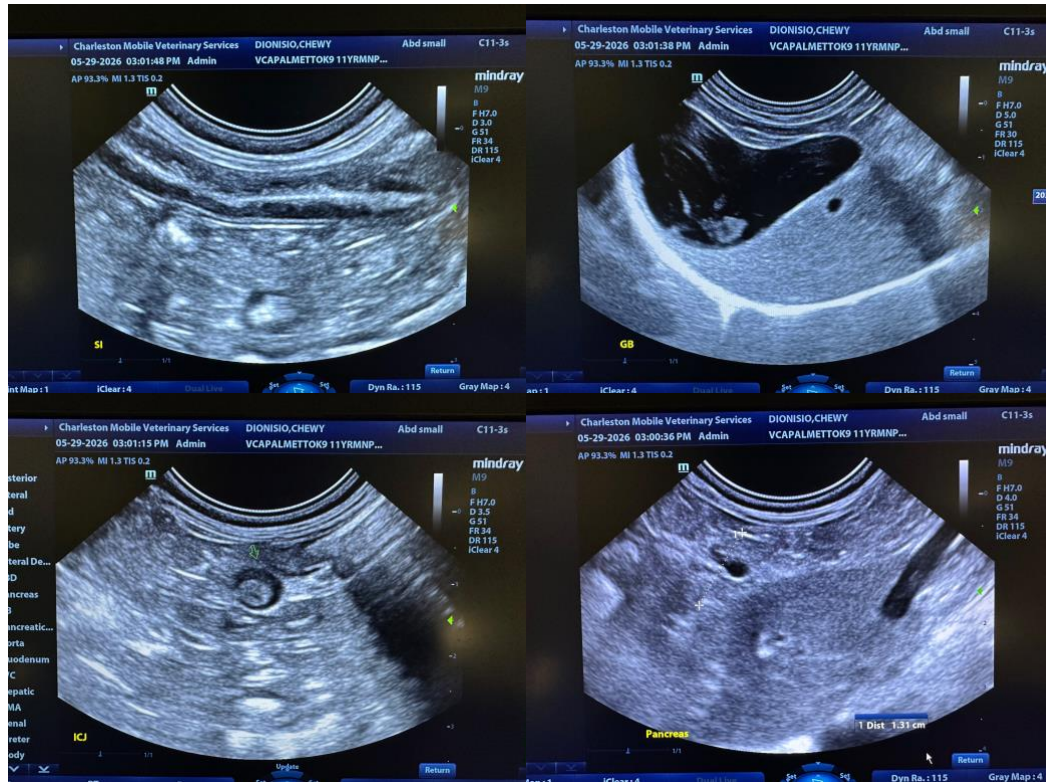
Vivian Ghorzi

INVOICE

23078

DATE

5-29-26





PATIENT

Chewy Dionisio

SPECIES

Canine

BREED

Poodle Mix

SEX

Male Neutered

AGE

11

WEIGHT

7.92 Kg

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

VCA Palmetto AH

REFERRING VET

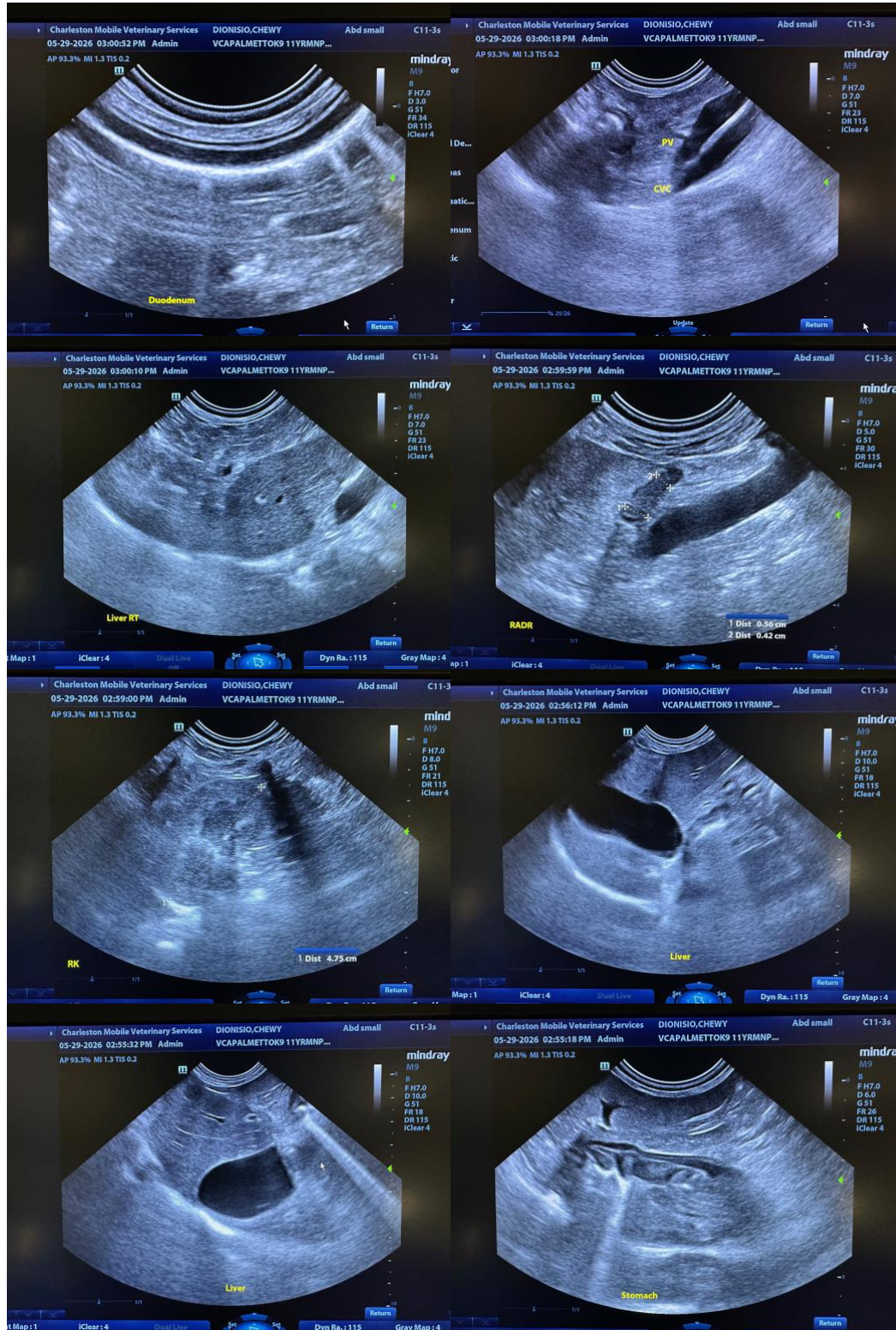
Vivian Ghorzi

INVOICE

23078

DATE

5-29-26





PATIENT

Chewy Dionisio

SPECIES

Canine

BREED

Poodle Mix

SEX

Male Neutered

AGE

11

WEIGHT

7.92 Kg

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

VCA Palmetto AH

REFERRING VET

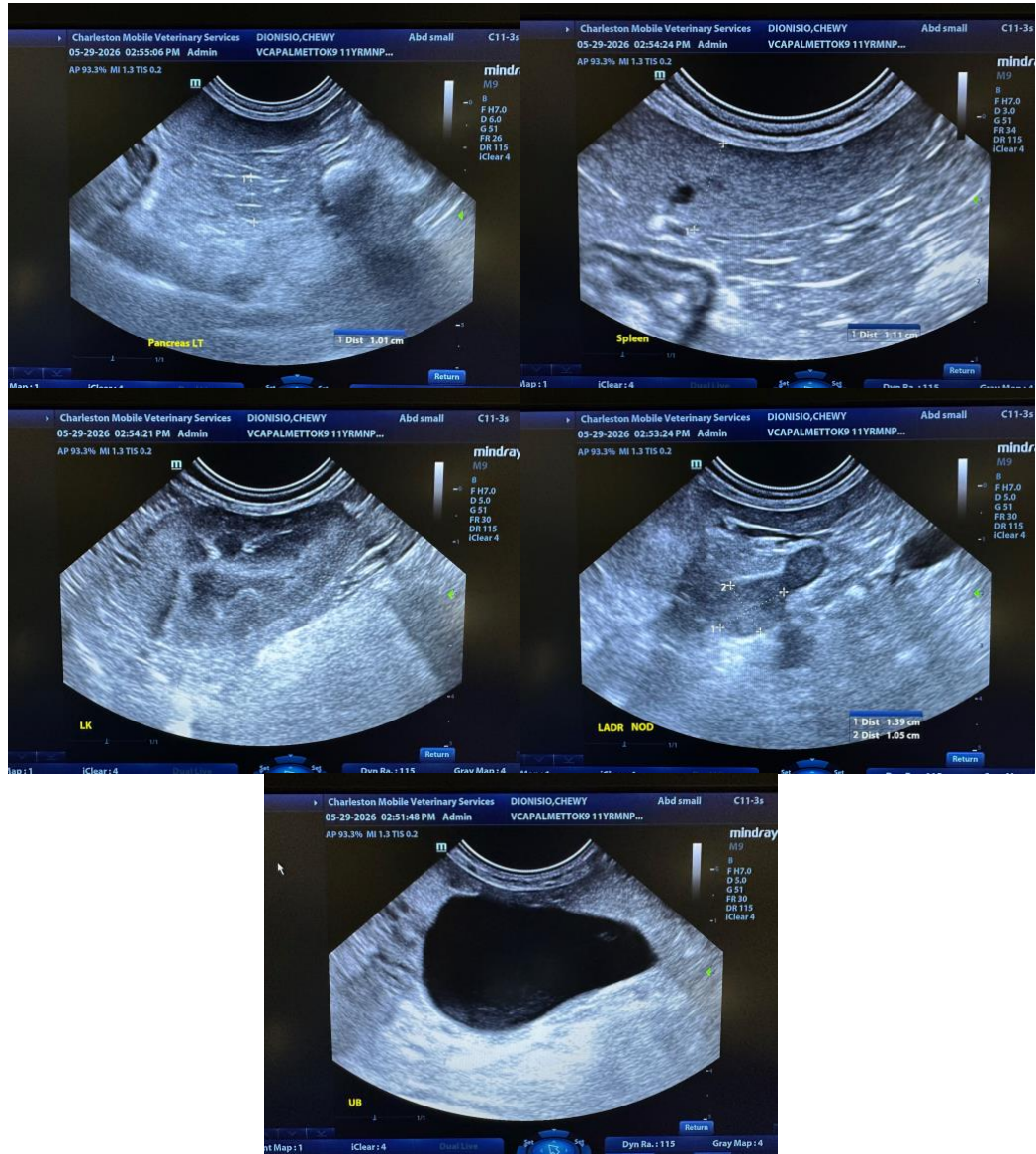
Vivian Ghorzi

INVOICE

23078

DATE

5-29-26



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