



**PATIENT PRESENTING CLINICAL SIGNS**

Daisy Prinslow History: Possible enlarged lymph nodes

**SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**Canine Urinary System**

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 is normal.

**BREED**

Golden Retriever

The left kidney is normal in size (6.06 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.

**SEX**

Intact Female

The right kidney is normal in size (6.93 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.

**AGE**

8 years

**Adrenal Glands**

The left adrenal gland is normal in size (0.45 cm at cranial pole) (0.46 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.

**WEIGHT**

35 lbs

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

**INTERPRETED BY**

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

**Spleen**

The spleen is normal in size (1.95 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.

**IMAGING PERFORMED BY**

C. Gardner

**Liver**

The liver is normal to prominent in size with normal curvilinear 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.

**HOSPITAL NAME**

Wilvet Salem

The gall bladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal/not seen.

**REFERRING VET**

Dr. C. Ebert

**Gastrointestinal**

The gastric lumen is mildly distended with soft, shadowing ingesta. The gastric wall is normal in thickness with a normal layering pattern. 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 colonic wall is normal. There is no evidence of an obstructive pattern.

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**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.

**DATE**

6.23.23



## PATIENT

Daisy Prinslow

## Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. A 2.93 x 0.89 cm medial iliac lymph node is visualized. The nodes are normal in shape and echogenicity.

## SPECIES

Canine

## ULTRASONOGRAPHIC FINDINGS

### Findings

## BREED

Golden Retriever

- The hepatic changes may be a normal variant for this patient or may be secondary to vacuolar hepatopathy (i.e., idiopathic/endocrine), or less likely, inflammatory disease, hepatotoxicosis, infiltrative neoplasia or other hepatopathy.

## SEX

Intact Female

- The shadowing material in the gastric lumen may represent normal ingesta and/or foreign material (i.e., grass, other). It appears nonobstructive at this time.

- The prominent medial iliac lymph node is likely reactive, with a lower possibility of emerging neoplasia.

## AGE

8 years

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- If peripheral lymph nodes are enlarged, consider fine-needle aspiration.
- Thoracic radiographs should also be considered, along with baseline lab work, including a CBC, chemistry panel, urinalysis and T4 to assess overall metabolic function.

## WEIGHT

35 lbs

## INTERPRETED BY

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ACVIM (Small Animal  
Internal Medicine)

## IMAGING PERFORMED BY

C. Gardner

## HOSPITAL NAME

Wilvet Salem

## REFERRING VET

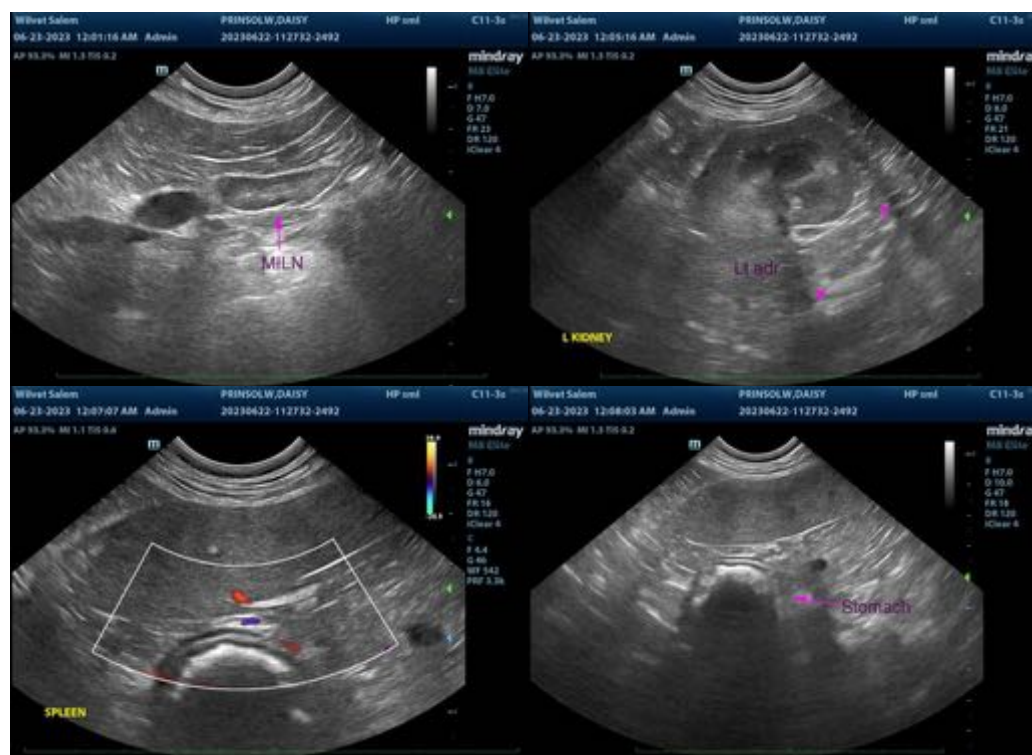
Dr. C. Ebert

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## DATE

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**PATIENT**

Daisy Prinslow

**SPECIES**

Canine

**BREED**

Golden Retriever



**SEX**

Intact Female

**AGE**

8 years

**WEIGHT**

35 lbs

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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](mailto:info@SonoPath.com)