



PATIENT PRESENTING CLINICAL SIGNS

Trooper Monnig History: has a cutaneous mast cell tumor on the ventrum. This is a Met check ultrasound.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SPECIES

Canine

Urinary System

The urinary bladder bladder is moderately distended. The wall in the region of the apex is mildly thickened (up to 0.71 cm) and irregular. The wall tapers to a normal thickness as it extends towards the cystourethral junction. Luminal contents are mostly anechoic. No cystic calculi are observed. The region of the trigone and the proximal urethra, visible to a depth of 2-3 cm, are normal.

BREED

Labrador Retr

The prostate is normal in size (1.21 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

SEX

Neutered Male

The left kidney is normal in size (6.06 cm in length) with an irregular shape. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. Mild to moderate pyelectasia is present (0.39 cm in the longitudinal plane). There are questionable cortical infarcts. There is no evidence of nephroliths or hydroureter. Renal vasculature is normal.

AGE

9 years

The right kidney is normal in size (6.70 cm in length) with an irregular shape. There is a normal 1:3 cortex to medulla ratio with moderate loss of corticomedullary distinction. Mild to moderate pyelectasia is present (0.40 cm in the longitudinal plane). There are questionable cortical infarcts. There is no evidence of nephroliths or hydroureter. Renal vasculature is normal.

WEIGHT

80.9 lbs

Adrenal Glands

The left adrenal gland is normal in size (0.71 cm at cranial pole) (0.67 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.

INTERPRETED BY

Andrea Nicastro, DVM,
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Animal Internal Medicine)

The right adrenal gland is in normal size (0.78 cm at cranial pole) (0.77 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.

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Spleen

The spleen is normal in size (2.23 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 with minor changes consistent with age-related remodeling. No focal lesions are observed. Hepatic vasculature and biliary tracts are of normal volume with no evidence of congestion.

REFERRING VET

Dr. Nolan Harris

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

INVOICE

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Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is mildly distended with ingesta. 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

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PATIENT Trooper Monnig
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.

Pancreas

SPECIES

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.

Canine

Free Abdomen

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

BREED

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Other

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

SEX

ULTRASONOGRAPHIC FINDINGS

Neutered Male

Findings

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- Bilateral chronic renal changes with pyelectasia and possible cortical infarcts
- The urinary bladder wall changes are most consistent with cystitis. Correlation with the patient's clinical history and urinalysis findings is recommended.
- The hepatic changes are most consistent with age-related parenchymal remodeling. More insidious hepatic pathology is considered less likely, Correlation with the patient's liver values is recommended.

*There is no obvious evidence of metastatic disease in the abdomen.

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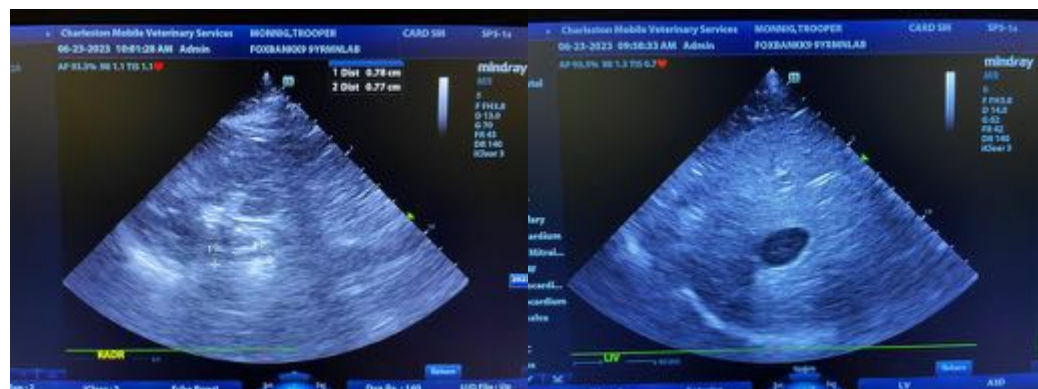
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for pulmonary metastases.
- Baseline lab work, including a CBC, chemistry panel, urinalysis +/- culture and sensitivity is also recommended prior to mast cell tumor removal.
- Depending on histopathology results, consultation with a board-certified oncologist may be warranted.





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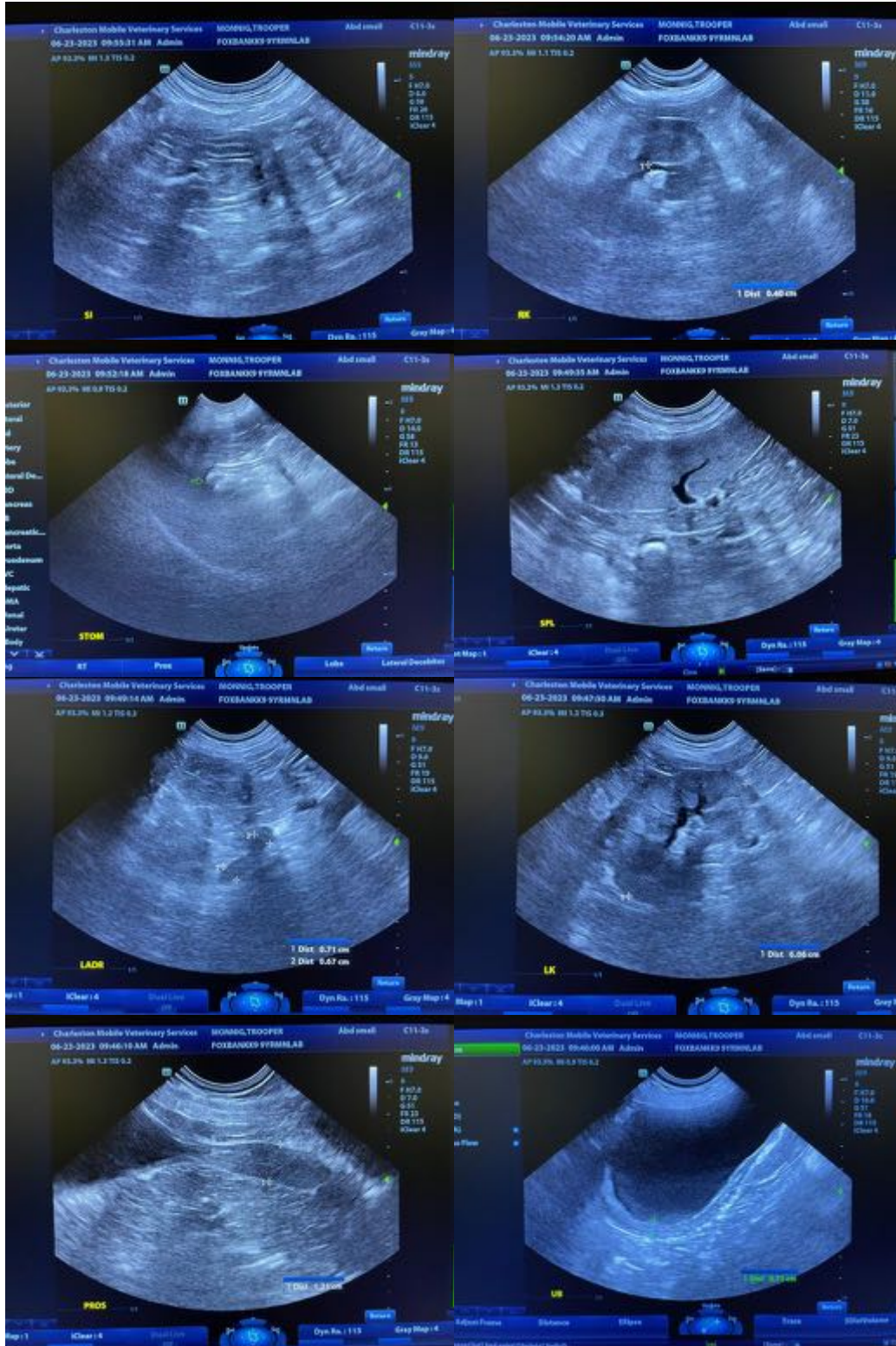
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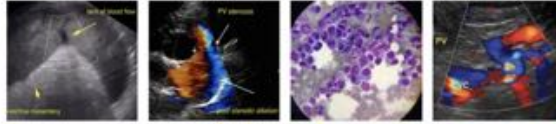
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The information and recommendations provided are based on the images presented by the referring



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veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

Trooper Monnig

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.

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