



## PATIENT PRESENTING CLINICAL SIGNS

**CHUCKIE WHYTE**  
**SPECIES** History: Vomiting last few days. Owner saw eating mushrooms not sure as to type. Suspect mushroom toxicity and or obstruction. Patient given small amount of barium yesterday.

### SPECIES

Canine

### BREED

#### Urinary System

No images provided.

Pomeranian

### SEX

Neutered Male

### AGE

7 years

### WEIGHT

3.5 kg

The left kidney is normal in size (3.75 cm in length) with a normal shape, architecture and smooth peripheral margins. The cortex is isoechoic relative to the spleen. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

The right kidney is normal in size (3.21 cm in length) with a normal shape, architecture and smooth peripheral margins. The cortex is isoechoic relative to the spleen. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

#### Prostate

No images provided.

## INTERPRETED BY

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

#### Adrenal Glands

One still image is available for interpretation. The left adrenal gland is normal in size (0.44 cm at cranial pole) (0.49 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.

## IMAGING PERFORMED BY

Dr Belan

One still image is available for interpretation. The right adrenal gland is in normal size (0.44 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.

## HOSPITAL NAME

Calgary Holistic AC

#### Spleen

The spleen is normal in size (1.01 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.

## REFERRING VET

Dr Qi

#### Liver

The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative, or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed. The portal vein to caudal vena cava ratio is approximately 1: 1.

## INVOICE

13748

The gall bladder lumen is moderately distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

## DATE

7.19.23

#### Gastrointestinal

The gastric lumen is moderately fluid-distended and appears hypomotile. The gastric wall and pylorus are normal in thickness with a normal layering pattern. The proximal small intestine is moderately fluid-distended and hypomotile. There is an approximately 1-2.00 cm shadowing structure within the small



**PATIENT** intestinal lumen. The mesentery effacing the serosal surface in this region is hyperechoic. Distal to this area, the small intestinal lumen is empty. The ileocecolic junction and colonic wall are normal.

Chuckie Whyte

**SPECIES** *Pancreas*

The right limb of the pancreas is visible with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat and slightly mottled in appearance. The pancreatic duct is visible but not overtly dilated. There is no evidence of peripancreatic inflammation or effusion.

Canine

**BREED** *Free Abdomen*

There is questionable trace ascites. In one still image, a 0.47 x 0.22 mesenteric lymph node is visualized.

Pomeranian

**SEX** **ULTRASONOGRAPHIC FINDINGS**

Neutered Male

**Findings**

**AGE**

- Suspected small intestinal obstruction – possible foreign body. Functional ileus (i.e., secondary to gastroenteritis) is also possible but considered less likely. Adjacent peritonitis is present.

7 years

**WEIGHT**

- The prominent mesenteric lymph node is likely reactive.

3.5 kg

- Minor pancreatic remodeling in the right limb

**INTERPRETED BY**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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

- This patient had an exploratory surgery following the abdominal study.

**IMAGING PERFORMED BY**

Dr Belan

**HOSPITAL NAME**

Calgary Holistic AC

**REFERRING VET**

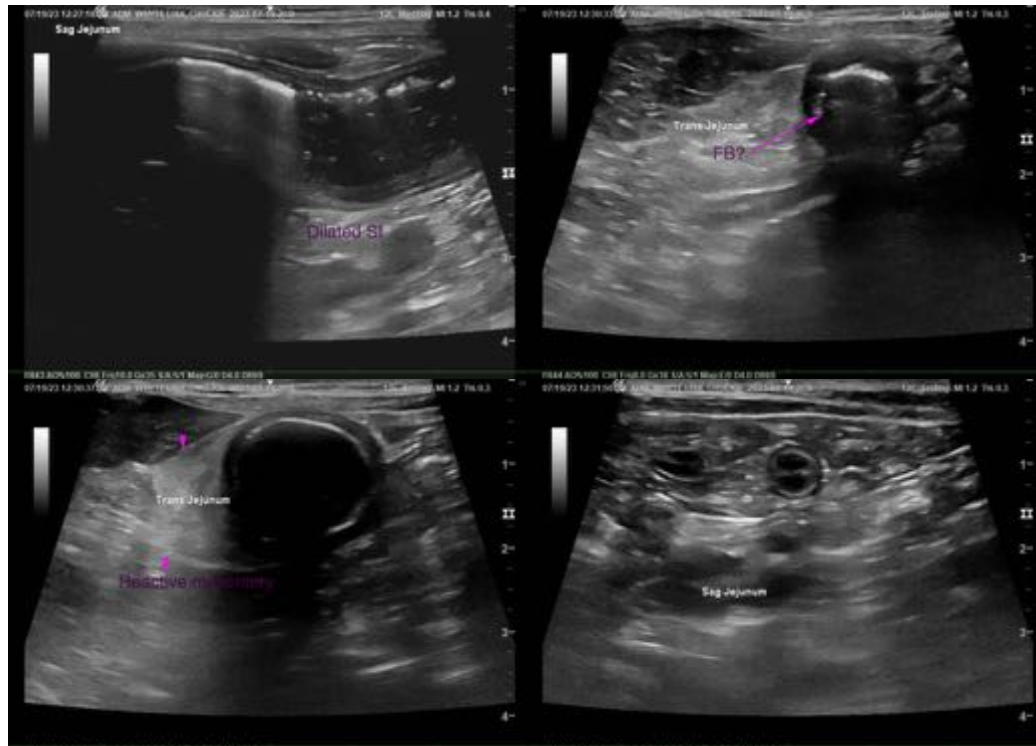
Dr Qi

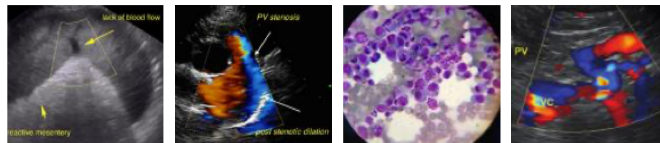
**INVOICE**

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**DATE**

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**PATIENT**

Chuckie Whyte

**SPECIES**

Canine

**BREED**

Pomeranian

**SEX**

Neutered Male

**AGE**

7 years

**WEIGHT**

3.5 kg

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**IMAGING  
PERFORMED BY**

Dr Belan

**HOSPITAL NAME**

Calgary Holistic AC

**REFERRING VET**

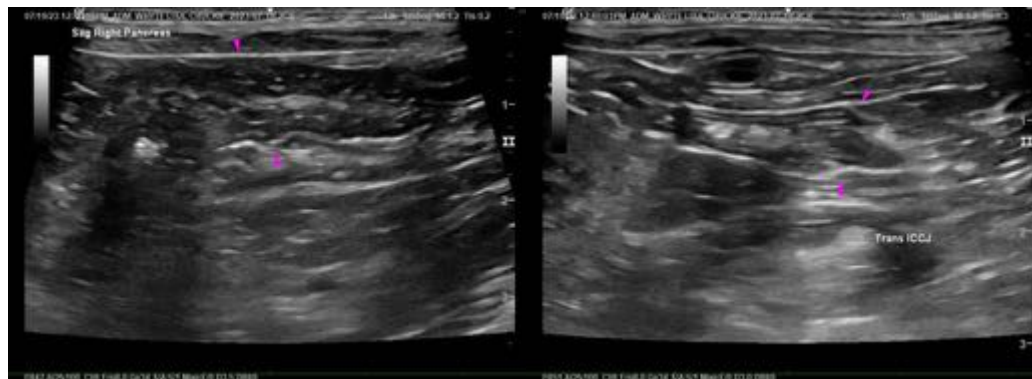
Dr Qi

**INVOICE**

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**DATE**

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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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