



PATIENT PRESENTING CLINICAL SIGNS

Zoey Nissel History: possible fb, V/D

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine

Urinary System

BREED

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.

Coton de Tolear

SEX

The left kidney is normal in size (3.76 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. A thin, ill-defined hyperechoic medullary band is observed at the corticomedullary junction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Female Spayed

AGE

11 years

The right kidney is normal in size (4.37 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. A thin, ill-defined hyperechoic medullary band is observed at the corticomedullary junction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

12.9 lbs

INTERPRETED BY

Adrenal Glands

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

The left adrenal gland is normal in size (0.63 cm at cranial pole) (0.51 cm at caudal pole) (1.94 cm in length) 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

Jenn

The right adrenal gland is in normal size (0.40 cm at cranial pole) (0.41 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

Spleen

Rockaway AH

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. Several ill-defined myelolipomas are observed in the region of the hilus. Splenic vasculature is normal.

REFERRING VET

Liver

Dr Bednar

The liver is subjectively normal 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.

INVOICE

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

14192

Gastrointestinal

DATE

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is mildly fluid-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 colonic wall is normal. There is no evidence of an obstructive pattern.

8.21.23



PATIENT *Pancreas*

Zoey Nissel 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.

SPECIES *Free Abdomen*

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

BREED **ULTRASONOGRAPHIC FINDINGS**

Coton de Tolear

SEX

Primary Findings

Female Spayed

- An obvious cause for the patient's clinical signs is not definitively identified in this study. Considerations include acute gastroenteritis, infectious/parasitic disease, dietary indiscretion, dysbiosis, inflammatory bowel disease, underlying metabolic issue, other.

AGE

Secondary Findings

11 years

WEIGHT

- Minor bilateral chronic renal changes
- Suspected benign diffuse hepatopathy. The top differential is vacuolar hepatopathy (i.e., idiopathic/endocrine). However, inflammatory disease, infiltrative neoplasia or other hepatopathy cannot be completely excluded. Correlation with the patient's liver values is recommended.

12.9 lbs

INTERPRETED BY

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

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

IMAGING PERFORMED BY

Jenn

- Baseline lab work, including a CBC, chemistry panel, urinalysis and T4 is recommended to assess overall metabolic function.
- Consider a fecal evaluation for ova and Giardia, along with prophylactic deworming with Fenbendazole.
- Symptomatic care for acute gastroenteritis is recommended, along with initiation of a probiotic with a high colony count, +/- fiber supplement (i.e., psyllium).
- If the patient's clinical signs recur and/or are chronic in nature, consider a more comprehensive GI work-up (i.e., Texas GI panel including serum cobalamin and folate, TLI, PLI and resting cortisol level), limited antigen diet trial, +/- GI biopsies).

HOSPITAL NAME

Rockaway AH

REFERRING VET

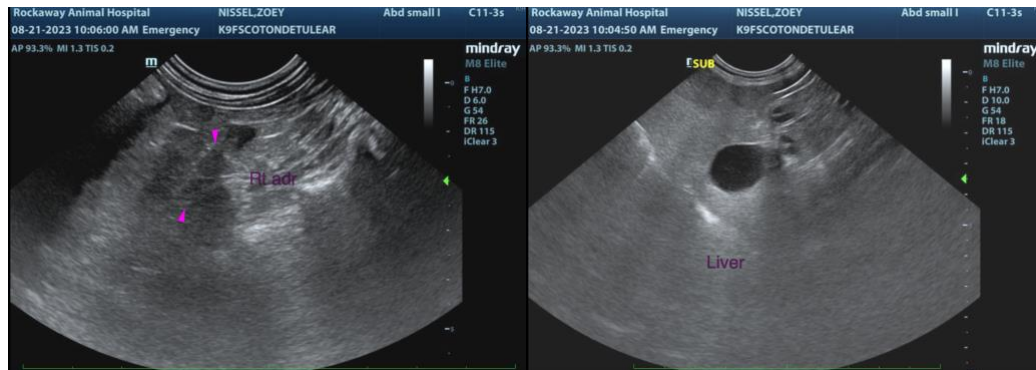
Dr Bednar

INVOICE

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PATIENT

Zoey Nissel

SPECIES

Canine

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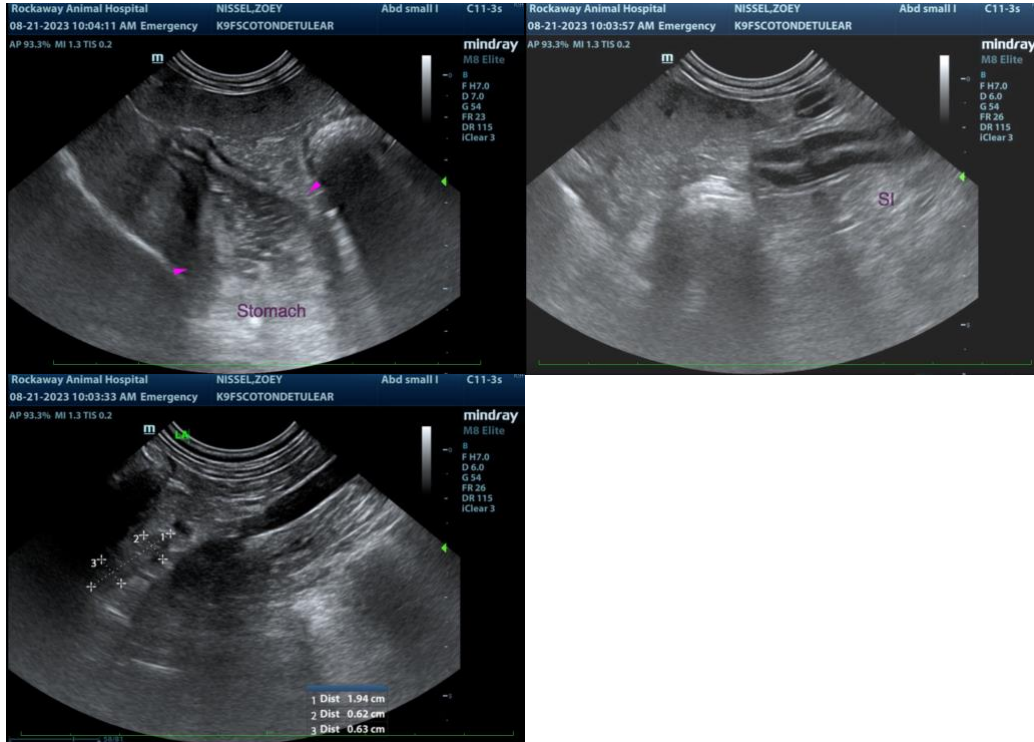
Dr Bednar

INVOICE

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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.

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