

**PATIENT PRESENTING CLINICAL SIGNS**

Mojo Gloriz History: Decreased appetite for several months. Unremarkable blood work. Lateral abdominal radiograph +/- mild splenomegaly.

**SPECIES** Medication: Omeprazole, RC GI

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

*Urinary System*

**BREED**

Maltese Mix

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

**SEX**

MN

The prostate is normal in size (0.50 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

**AGE**

4 years

The left kidney is normal size (4.22 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

**WEIGHT**

15.4 lbs

The right kidney is normal size (4.34 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

*Adrenal Glands*

**INTERPRETED BY**

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

The left adrenal gland is normal size (0.36 cm at cranial pole) (0.41 cm at caudal pole) (1.68 cm in length); normal shape; homogenous parenchyma. The glandular echogenicity and detail are unremarkable. Capsule, cortex, and medullary definition are normal. The phrenicoabdominal vein and surrounding vasculature are normal.

The right adrenal gland is normal size (0.52 cm at cranial pole) (0.34 cm at caudal pole) (1.97 cm in length); normal shape; 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**

Rebekah Jakum, CVT  
ARDMS/RVT

*Spleen*

**HOSPITAL NAME**

Annville Cleona VA

The spleen is normal in size (1.45 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. A 0.46 cm hypoechoic nodule is observed at the medial aspect. Splenic vasculature is normal.

**REFERRING VET**

Dr. Bardsley

*Liver*

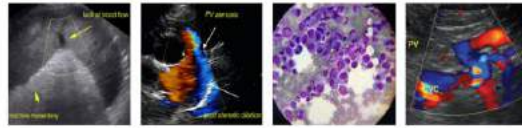
The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative, or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed. The 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.

**INVOICE**

11719kk

**DATE**

8.27.2021



**PATIENT** *Gastrointestinal*

Mojo Gloriz The stomach and intestine are free of stasis and exhibit normal peristaltic activity. 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 thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

**SPECIES**

Canine

*Pancreas*

**BREED**

Maltese Mix

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.

*Free Abdomen*

**SEX**

MN

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

**ULTRASONOGRAPHIC FINDINGS**

**AGE**

4 years

**Primary Findings:**

\*\*An obvious cause for the patient's clinical signs is not identified in this study. Considerations include microscopic gastrointestinal or pancreatic disease, underlying metabolic issue, occult neoplasia, and other.

**WEIGHT**

15.4 lbs

**Secondary Findings:**

- The hypoechoic splenic nodule trends towards the benign (i.e., focus of lymphoid hyperplasia or extramedullary hematopoiesis) with a lower potential for emerging neoplasia.

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(*Small Animal Internal  
Medicine*)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Consider the following diagnostics:
  - A fecal evaluation for ova/Giardia
  - A malabsorption panel including serum cobalamin, folate, PLI and TLI.
  - A resting cortisol level to screen for hypoadrenocorticism. If resting cortisol level is < 2.0 mcg/dL, an ACTH stimulation test is recommended.
  - Three-view thoracic radiographs are recommended to assess for occult neoplasia.
  - Consider testing for vector-borne disease (i.e., Lyme disease).
- Depending on the results of the above diagnostics, endoscopic or surgical gastrointestinal biopsies may be warranted.

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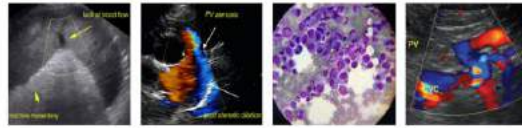
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**PATIENT**

Mojo Gloriz

**SPECIES**

Canine

**BREED**

Maltese Mix

**SEX**

MN

**AGE**

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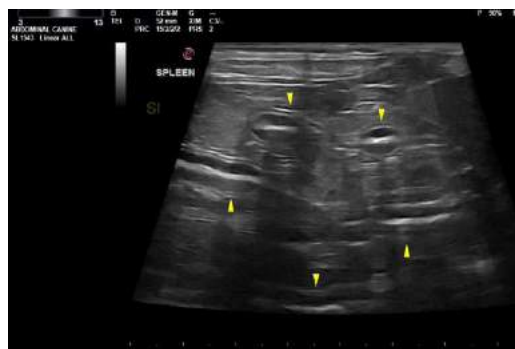
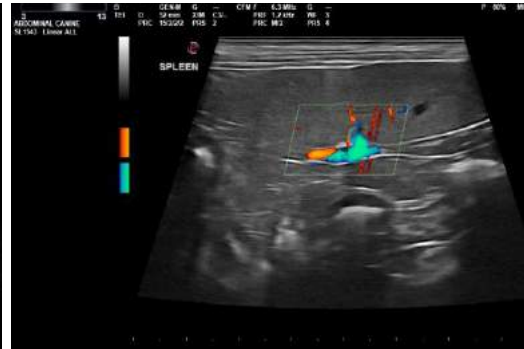
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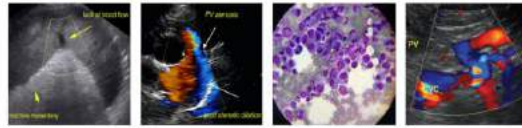
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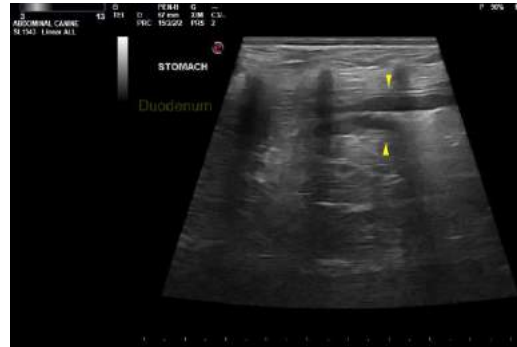
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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