



PATIENT

Rio Taylor

PRESENTING CLINICAL SIGNS

History: 3-4 month history of bloated belly. The owner first thought it was weight gain but then became concerned with increased girth. She also noted he has a great appetite. No vomiting or diarrhea.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: PE: Dry harsh coat, Elevated weight, small, soft testicles, Bloodwork declined by owner.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED

Red Heeler

Urinary System

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder is distended. A small amount of suspended, echogenic debris is observed within the lumen. 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

Male

The prostate is normal in size (1.62 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

AGE

5 Years 8 Months

The left kidney is normal size (7.23 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. Mild pyelectasia is present (0.32 cm in the longitudinal plane). There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

81.8 lbs.

The right kidney is normal size (7.54 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. Trace pyelectasia is present. There is no evidence of nephroliths, infarcts or hydroureter. Renal vasculature is normal.

INTERPRETED BY

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

Adrenal Glands

The left adrenal gland is normal size (0.86 cm at cranial pole) (0.77 cm at caudal pole) (3.80 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

Dr. Anderson

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

Spleen

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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. No focal lesions are observed. Splenic vasculature is normal.

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Liver

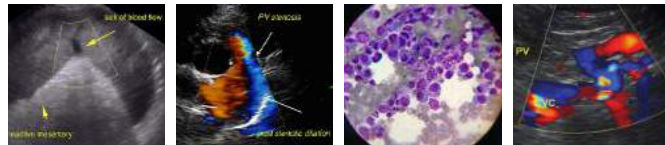
The liver is subjectively prominent in size with slightly swollen peripheral contours. The parenchyma is hypoechoic relative to the spleen and subtly mottled in appearance. No distinct focal lesions are observed. Hepatic vasculature and intrahepatic biliary tracts are of normal volume with no evidence of congestion. The gall bladder lumen is mildly distended. The wall is thin and smooth. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

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Gastrointestinal

Rio Taylor

The gastric lumen is gas-distended. The gastric wall is normal in thickness with a normal layering pattern. 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

Red Heeler

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

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

Male

Other:

AGE

A brief echocardiogram reveals no evidence of pericardial effusion.

5 Years 8 Months

ULTRASONOGRAPHIC FINDINGS

WEIGHT

81.8 lbs.

Primary Findings:

- Non-specific diffuse hepatopathy. Differentials include regenerative nodular hyperplasia, vacuolar hepatopathy, age-related remodeling, inflammatory/immune-mediated disease, and infiltrative neoplasia (less likely), other hepatopathy. Correlation with the patient's lab work is recommended.

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Secondary Findings:

- The bilateral pyelectasia may represent pyelonephritis, PU/PD (if applicable), age-related remodeling, and other. Correlation with clinical findings is recommended.

**IMAGING
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

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1. Baseline lab work including a CBC chemistry panel, urinalysis, T4/Free T4 by Equilibrium Dialysis is recommended.
2. Consider obtaining additional sonographic images of the right adrenal area. Sedation may be necessary depending on the patient's temperament.
3. Further testing should be based on the results of the above diagnostics.

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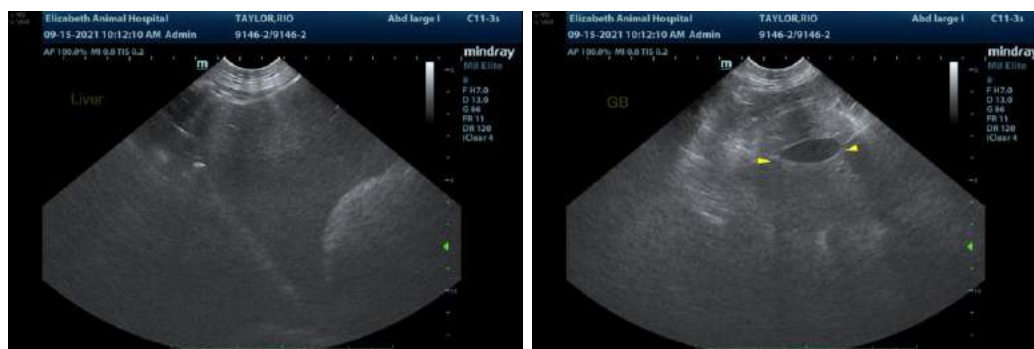
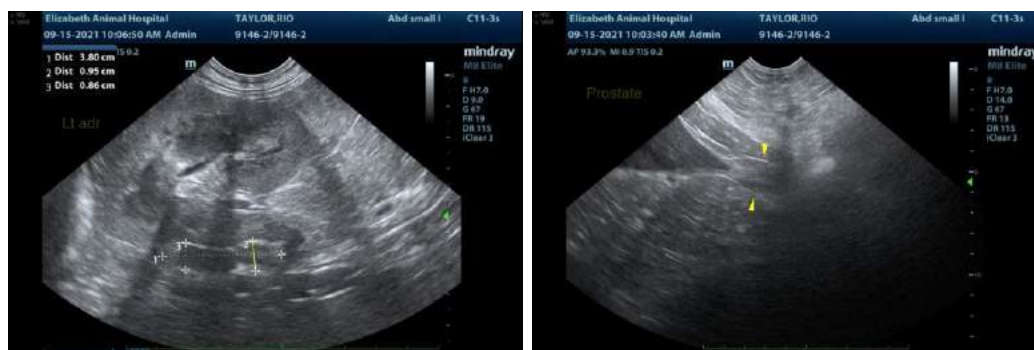
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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

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SEX

Male

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