



**PATIENT PRESENTING CLINICAL SIGNS**

Thompson Bennett The patient is anemic. Hematocrit of 16%. Lost 9 lbs. in recent months. 4DX negative. Chem panel unremarkable. Thoracic radiographs were unremarkable.

**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 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.

Mixed breed

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

Male, neutered

**AGE** The left kidney is normal size (6.10 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

9 Yrs.

**WEIGHT** The right kidney is normal size (7.25 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal to mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

10 lbs.

**INTERPRETED BY Adrenal Glands**

Andrea Nicastro, DVM, Diplomate ACVIM (Small Animal Internal Medicine) The left adrenal gland is normal size (0.74 cm at cranial pole) (0.68 cm at caudal pole) (2.27 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** The right adrenal gland is normal size (0.65 cm at cranial pole) (0.48 cm at caudal pole); 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.

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

*Spleen*

**HOSPITAL NAME** The spleen is normal to slightly prominent in size (2.08 cm in width at the level of the hilus). A 2.01 cm isoechoic slight swelling/bulge is observed at the caudomedial aspect. The remaining peripheral margins are curvilinear. The parenchyma is of appropriate echogenicity and echotexture. Splenic vasculature is normal with no evidence of thrombosis.

Cutler AH

**REFERRING VET Liver**

Dr. Cutler The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen and slightly 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 moderately distended. The wall is thin and smooth. A moderate amount of aggregated, echogenic, gravity-dependent sludge is observed within the lumen. The cystic and common bile ducts are normal/not seen.

**INVOICE**

14406

**DATE**  
1/3/22



**PATIENT**

Thompson Bennett

**SPECIES**

Canine

**BREED**

Mixed breed

**SEX**

Male, neutered

**AGE**

9 Yrs.

**WEIGHT**

10 lbs.

**Gastrointestinal**

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 segmentally dilated with gas and chyme. 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.

**Pancreas**

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**

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

**Other**

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

**INTERPRETED BY**

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

**ULTRASONOGRAPHIC FINDINGS**

**Primary Findings:**

- The significance of the slight splenic bulge at the caudomedial aspect is unclear but trends toward the benign (i.e., normal spleen, lymphoid hyperplasia or extramedullary hematopoiesis) with a lower possibility of emerging neoplasia.

**Secondary Findings:**

- Minor age-related hepatic and renal changes.

**IMAGING PERFORMED BY**

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

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- Repeat CBC with reticulocyte count and clinical pathology review.
- If the anemia is non-regenerative, consider a bone marrow aspirate. In the meantime, symptomatic care, including a blood transfusion and continuation of Doxycycline is recommended. Immunosuppressive therapy may also be warranted.
- Ideally, a comprehensive tick panel (send to NC State University Vector Borne Disease Lab) would also be performed.

**HOSPITAL NAME**

Cutler AH

**REFERRING VET**

Dr. Cutler

**INVOICE**

14406

**DATE**

1/3/22



**PATIENT**

Thompson Bennett

**SPECIES**

Canine

**BREED**

Mixed breed

**SEX**

Male, neutered

**AGE**

9 Yrs.

**WEIGHT**

10 lbs.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

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

**HOSPITAL NAME**

Cutler AH

**REFERRING VET**

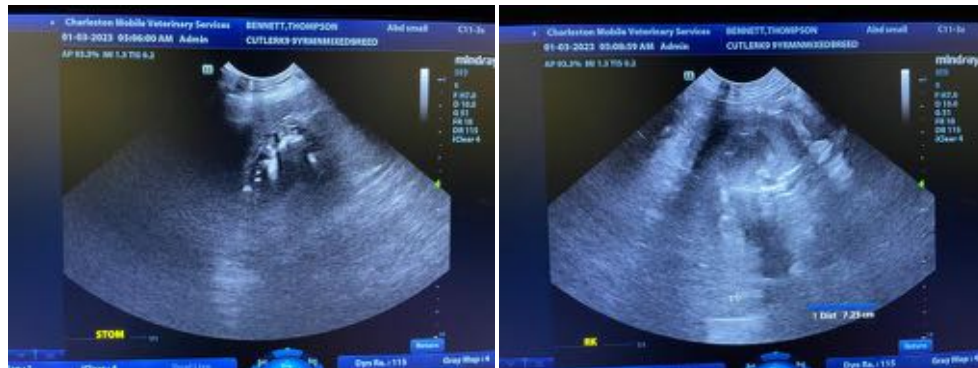
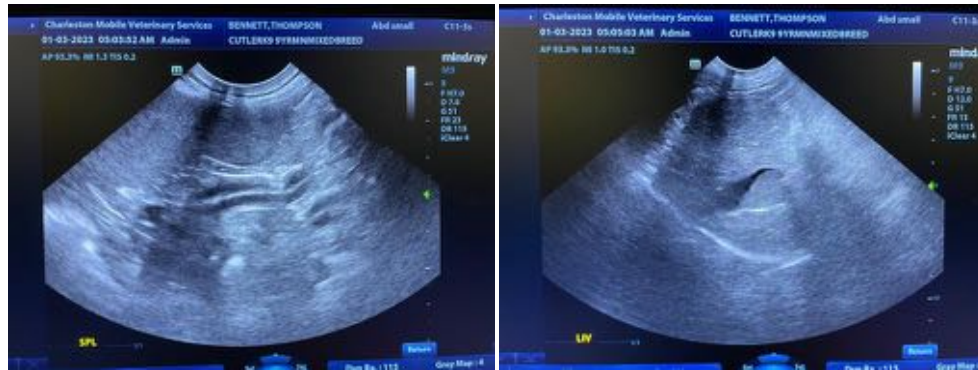
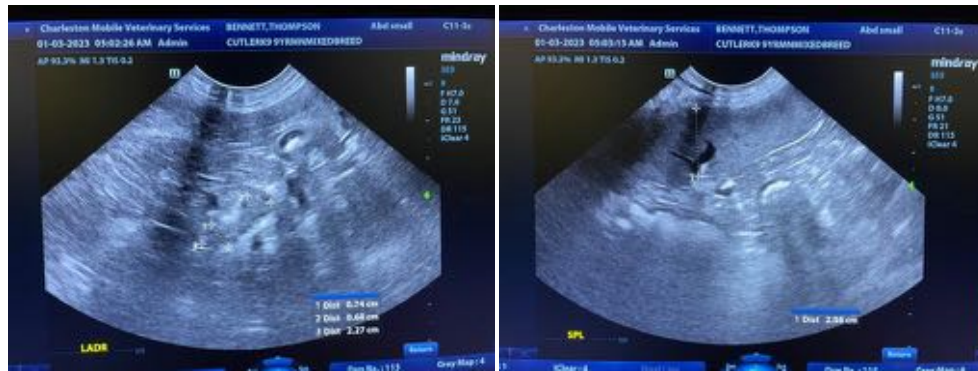
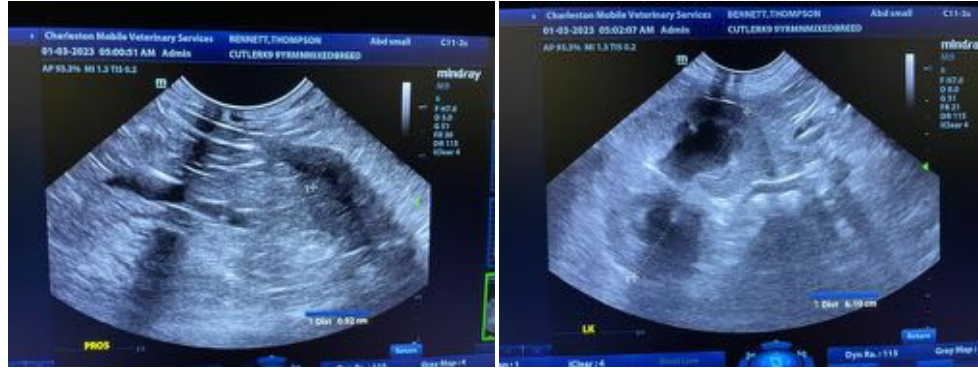
Dr. Cutler

**INVOICE**

14406

**DATE**

1/3/22





**PATIENT**

Thompson Bennett

**SPECIES**

Canine

**BREED**

Mixed breed

**SEX**

Male, neutered

**AGE**

9 Yrs.

**WEIGHT**

10 lbs.

**INTERPRETED BY**

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

**IMAGING PERFORMED BY**

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

**HOSPITAL NAME**

Cutler AH

**REFERRING VET**

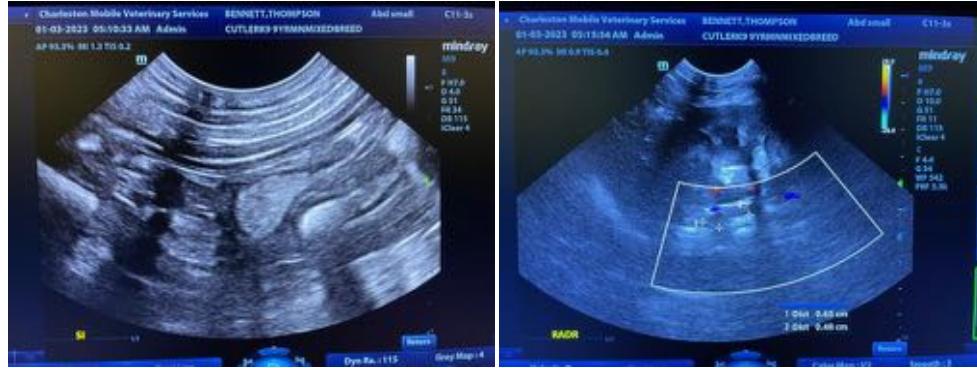
Dr. Cutler

**INVOICE**

14406

**DATE**

1/3/22



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)  
[info@SonoPath.com](mailto:info@SonoPath.com)