



PATIENT PRESENTING CLINICAL SIGNS

Molly Lanzaro -Presented for ADR, at follow up visit noted vomiting daily with abdominal contractions/retching after eating going on for about 2-3mos and she is eating Beneful

SPECIES -Baseline CBC/CHEM/UA unrevealing

Canine -Resting cortisol 3.4, CBC chemistry unremarkable, UPC 0.4, USG 1.023 inactive sediment, T4 2.2, 4DX negative, fecal negative for ova and Giardia

BREED -Offered food trial with rx diet (hypoallergenic or low fat)

Pitbull -Offered GI panel (o elected to with-hold for now)

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX *Urinary System*

Female, spayed The urinary bladder is minimally to mildly distended. The wall is of appropriate thickness for the level of repletion. The mucosal surface is slightly irregular. Luminal contents are mostly anechoic. The region of the trigone and the visible portion of the proximal urethra are normal.

AGE 3/1/2013 The left kidney is normal size (6.78 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT 69 lbs. The right kidney is normal size (7.07 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with mild loss of corticomedullary distinction. There is no evidence of pyelectasia, 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 (0.75 cm at cranial pole) (0.69 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.

IMAGING PERFORMED BY

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

The right adrenal gland is normal size (0.89 cm at cranial pole) (0.60 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.

HOSPITAL NAME

Coastal VC

Spleen

The spleen is normal in size (2.52 cm in width at the level of the hilus) with a normal capsular contour. The parenchyma is subtly mottled in appearance. No focal lesions are observed. Splenic vasculature is normal.

REFERRING VET

Dr. Finian/Dr. Black

Liver

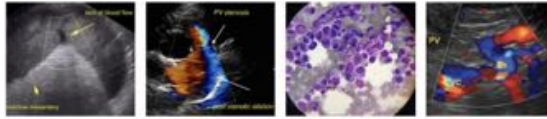
The liver is subjectively normal in size with normal curvilinear peripheral contours. The parenchyma is hypoechoic relative to the spleen. A 1.13 cm cyst is observed on the left side. In addition, a 1.90 cm irregular hyperechoic to slightly heterogeneous nodule is observed on the right. Vascular and biliary tracts are of normal volume with no evidence of congestion. 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

14756

DATE

3/21/23



PATIENT

Gastrointestinal

Molly Lanzaro

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 ileocecolic junction and colonic wall are normal. No obstructive disease is noted.

SPECIES

Canine

BREED

Pitbull

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.

SEX

Free Abdomen

Female, spayed

There is no obvious evidence of free fluid. A few prominent lymph nodes are observed at the aortic trifurcation, the largest measuring 2.40 cm in length. The nodes are normal in shape and echogenicity.

AGE

3/1/2013

Other

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

WEIGHT

69 lbs.

INTERPRETED BY

ULTRASONOGRAPHIC FINDINGS

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

Primary Findings:

- An obvious cause for the patient's clinical signs is not definitively identified in this study. Considerations include primary gastrointestinal disease (i.e., esophageal disease, food allergy/intolerance, inflammatory bowel disease, infectious/parasitic disease), mild pancreatitis, underlying metabolic issue, other.

**IMAGING
PERFORMED BY**

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

Secondary Findings:

- The right hepatic nodule may represent a benign process (i.e., nodular hyperplasia), granuloma or an emerging tumor.
- The prominent lymph nodes at the aortic trifurcation are most likely reactive with a lower possibility of emerging neoplasia.
- Mild bilateral, age-related renal changes.
- The splenic parenchymal changes are most consistent with a benign process such as lymphoid hyperplasia, extramedullary hematopoiesis, splenitis or antigenic stimulation with a low possibility of infiltrative neoplasia (i.e., lymphoma, mast cell neoplasia).

HOSPITAL NAME

Coastal VC

REFERRING VET

Dr. Finian/Dr. Black

INVOICE

14756

DATE

3/21/23



PATIENT

Molly Lanzaro

SPECIES

Canine

BREED

Pitbull

SEX

Female, spayed

AGE

3/1/2013

WEIGHT

69 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

Coastal VC

REFERRING VET

Dr. Finian/Dr. Black

INVOICE

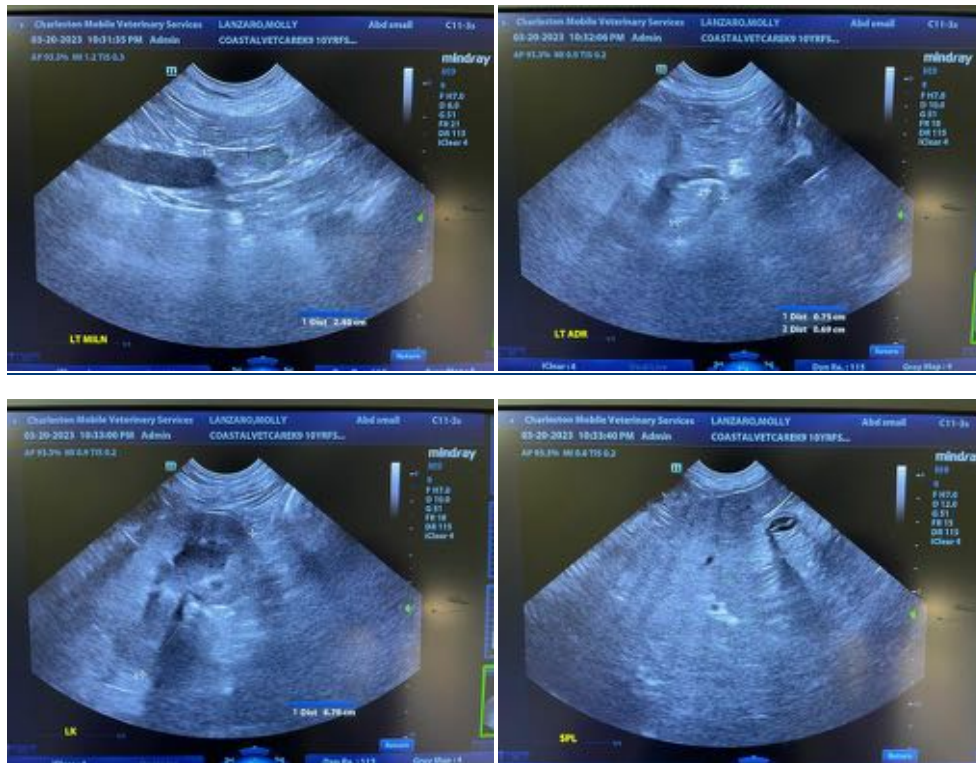
14756

DATE

3/21/23

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for occult esophageal disease.
- Consider a malabsorption panel including serum cobalamin, folate, TLI and PLI to assess for maldigestion/malabsorption and pancreatic disease.
- A 2-4 week limited antigen or hydrolyzed protein diet trial is also recommended.
- Ultimately, endoscopic or surgical GI biopsies may be necessary to get a definitive diagnosis.
- While awaiting test results, symptomatic care is recommended. A probiotic may also prove beneficial.
- Regarding the right hepatic nodule, consider a recheck ultrasound in 1-2 months to assess for growth.





PATIENT

Molly Lanzaro

SPECIES

Canine

BREED

Pitbull

SEX

Female, spayed

AGE

3/1/2013

WEIGHT

69 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

Coastal VC

REFERRING VET

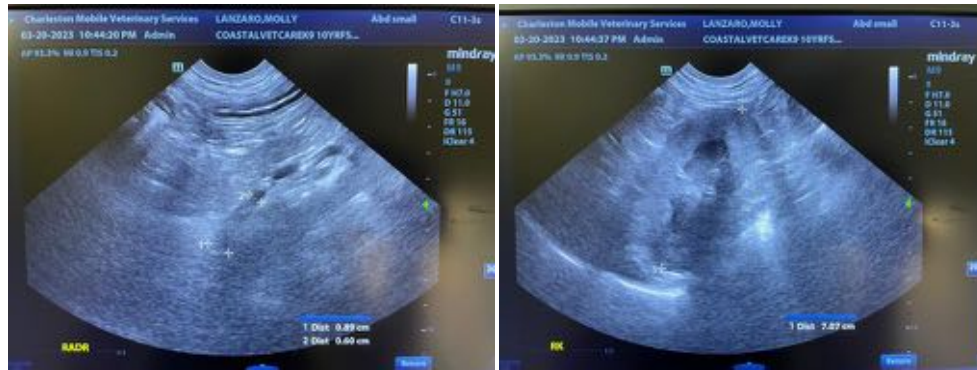
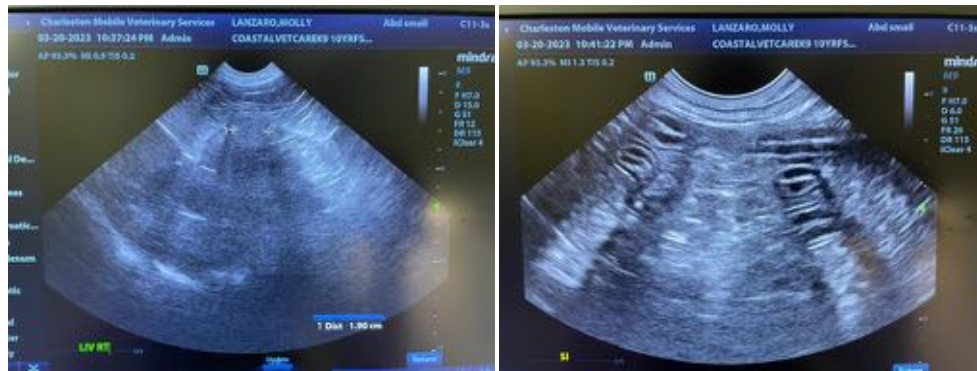
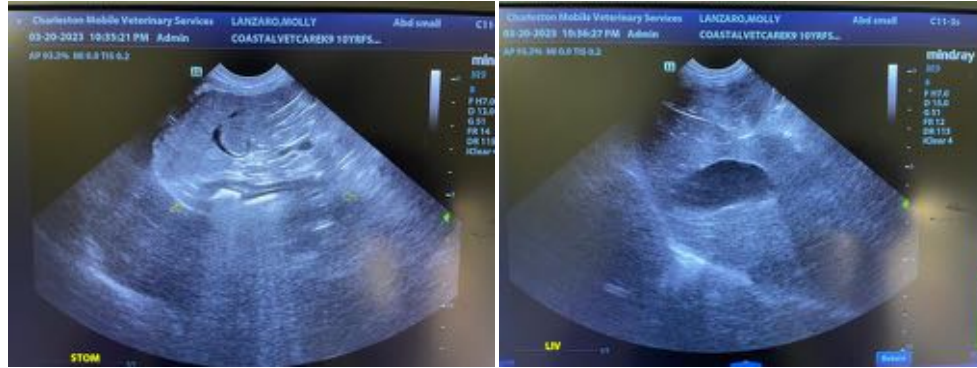
Dr. Finian/Dr. Black

INVOICE

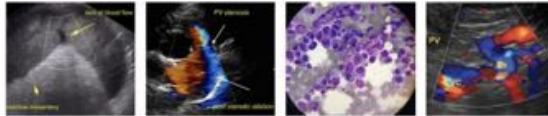
14756

DATE

3/21/23



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



PATIENT

Molly Lanzaro

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.

SPECIES

Canine

Andrea Nicastro, MPH, DVM, Diplomate DACVIM (Small Animal Internal Medicine)
info@SonoPath.com

BREED

Pitbull

SEX

Female, spayed

AGE

3/1/2013

WEIGHT

69 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

Coastal VC

REFERRING VET

Dr. Finian/Dr. Black

INVOICE

14756

DATE

3/21/23