



PATIENT PRESENTING CLINICAL SIGNS

Dallas Fletcher History: Chronic vomiting for . Will vomit 1-2x /day. Brown tinge to vomitus Normal appetite, decreased energy level
Abnormal PE/Chem/CBC/UA Results: CBC: MCV (60.2), MCHC (38.7), RETIC (118), Mild neutrophilia (11.75), PLT (578) Electrolytes, Chem: Mild elevation in Na (164), K (5.9), Na/K (28) CaOxDi present in urine--- 21-50/HPF

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

BREED *Urinary System*

Shih Tzu Mix The urinary bladder and visible portion of the pelvic urethra are normal for the degree of luminal distension. The urine is anechoic with no evidence of debris. Cystic calculi and discrete masses are not observed. The region of the trigone and the visible portion of the proximal urethra are normal.

SEX

Male, neutered The prostate is normal in size (0.58 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

AGE

6 Yrs. The left kidney is normal size (3.62 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. At least 2 small foci of mineralization are visualized. There is no evidence of pyelectasia, infarcts or hydroureter. Renal vasculature is normal.

WEIGHT

5.4 kg. The right kidney is normal size (3.77 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 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 (0.33 cm at cranial pole) (0.36 cm at caudal pole) (1.42 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

Crystal Hill

The right adrenal gland is normal size (0.44 cm at cranial pole) (0.30 cm at caudal pole) (1.11 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.

HOSPITAL NAME

Beatties Burlington PH

Spleen

The spleen is normal in size (0.87 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.

REFERRING VET

Dr. Ruggieri

Liver

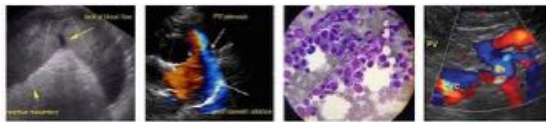
The liver is subjectively normal in size with normal contours and structure. There is appropriate echogenicity and echotexture. No overt structural evidence of inflammatory, infiltrative or regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion.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

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PATIENT

Gastrointestinal

Dallas Fletcher

The gastric lumen is mildly fluid distended. The gastric wall is diffusely thickened (up to 0.94 cm) with apparent retention of the normal layering pattern. The mesentery effacing the serosal surface is mildly hyperechoic. The pyloric outflow tract is patent. The small intestinal lumen is segmentally dilated with 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.

SPECIES

Canine

BREED

Shih Tzu Mix

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

Male, neutered

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. A 0.91 cm lymph node is observed in the cranial abdomen.

AGE

6 Yrs.

ULTRASONOGRAPHIC FINDINGS

WEIGHT

5.4 kg.

- The gastric wall changes are most consistent with an inflammatory process with potential for emerging neoplasia. Regional peritonitis is present.
- The prominent cranial abdominal lymph node is likely reactive.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Three-view thoracic radiographs are recommended to assess for occult esophageal disease.
- Ultimately, endoscopic or surgical gastrointestinal biopsies would be necessary to get a definitive diagnosis.
- Other diagnostic considerations include a malabsorption panel and a fecal evaluation for ova and giardia.
- A resting cortisol level can also be considered to rule out atypical hypoadrenocorticism.

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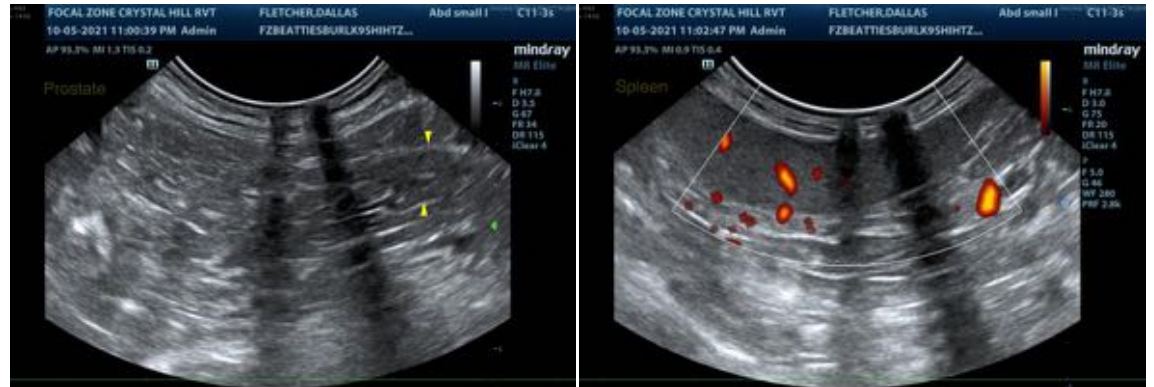
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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