


**PATIENT PRESENTING CLINICAL SIGNS**

Ruby Bowyer

History: Acute onset of black tarry stools and lethargy. About to start on Prednisone, no meds prior. Tried Sulcrate but owner had difficulty giving today. Underlying cause of thrombocytopenia/anemia - neoplasia?

**SPECIES**

Canine

Abnormal PE/Chem/CBC/UA Results: Hematocrit 27%, regenerative anemia, elevated nucleated red blood cells, severe thrombocytopenia, mildly reduced albumin and globulin, 4DX negative.

Thoracic radiographs- no obvious neoplasia.

**BREED**

Vizsla

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**
**Urinary System**
**SEX**

Female, spayed

The urinary bladder is moderately distended. The wall is normal in thickness with a smooth mucosal surface. A small amount of echogenic debris/mineralized sand is observed within the lumen. The region of the trigone is normal.

**AGE**

10 Yrs.

The left kidney is normal size (6.57 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 hydronephrosis. Renal vasculature is normal.

**WEIGHT**

28 kg.

The right kidney is normal size (5.92 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 hydronephrosis. Renal vasculature is normal.

**INTERPRETED BY**

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

**Adrenal Glands**

The left adrenal gland is normal size (0.47 cm at cranial pole) (0.44 cm at caudal pole) (1.65 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 (1.15 cm at cranial pole) (0.63 cm at caudal pole) (1.95 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**

Soutside Pet Hospital

**Spleen**

The spleen is normal in size (2.73 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. Honda

**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 gallbladder is of normal contours and contains some dependent echogenic debris. The wall is normal in thickness. No choleliths are observed. The cystic and common bile ducts are normal.

**DATE**

4/19/22



**PATIENT**

***Gastrointestinal***

Ruby Bowyer

The gastric lumen is mildly distended with ingesta. The gastric wall is normal in thickness with a normal layering pattern. 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

***Pancreas***

**BREED**

Viszla

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**

Female, spayed

***Free Abdomen***

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

**AGE**

10 Yrs.

**ULTRASONOGRAPHIC FINDINGS**

- Urinary bladder debris/sand.
- Minor non-specific age-related renal changes.

**WEIGHT**

28 kg..

\*There is no obvious evidence of neoplasia in the chest.

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Diplomate ACVIM  
(*Small Animal Internal  
Medicine*)

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

- A comprehensive tick panel, including PCR and serology (submission to North Carolina State University's Vector Borne Disease Diagnostic Lab) is recommended.  
(<https://cvm.ncsu.edu/research/labs/clinical-sciences/vector-borne-disease/>)
- Consider initiation of treatment for Evan Syndrome along with supportive care and blood transfusions as needed.

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**PATIENT**

Ruby Bowyer

**SPECIES**

Canine

**BREED**

Viszla

**SEX**

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**AGE**

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

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