



**PATIENT PRESENTING CLINICAL SIGNS**

Dax Szauter History: Severe elevation in TLI and spec cPLi in otherwise asymptomatic patient currently on phenobarbital-suspected epilepsy

**SPECIES**

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

*Urinary System*

**BREED**

Chihuahua/Terrier Mix

The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with mostly 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.

**SEX**

Male Neutered

The prostate is normal in size (0.94 cm in width) and shape. Parenchyma is homogenous. The prostatic urethra appears normal without evidence of dilation or obstruction.

**AGE**

2 Years

The left kidney is normal size (5.65 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.

**WEIGHT**

18 lbs.

The right kidney is normal size (5.22 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.

*Adrenal Glands*

**INTERPRETED BY**

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

The left adrenal gland is normal size (0.50 cm at cranial pole) (0.58 cm at caudal pole) (2.04 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**

Kelly Reshny, RVT

The right adrenal gland is normal size (0.89 cm at cranial pole) (0.45 cm at caudal pole) (2.18 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**

Southside AC

*Spleen*

The spleen is normal in size (1.72 cm in width at the level of the hilus) with a normal capsular contour. There is appropriate echogenicity and echotexture. The parenchyma has a coarse echotexture. No focal lesions are observed. Splenic vasculature is normal.

**REFERRING VET**

Dr. Jones

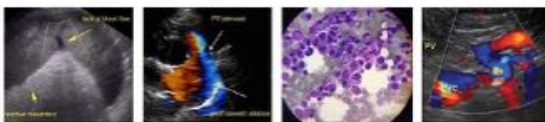
*Liver*

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. A scant amount of echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

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**PATIENT**

*Gastrointestinal*

Dax Szauter

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 colonic wall is normal. No obstructive disease is noted.

**SPECIES**

Canine

*Pancreas*

**BREED**

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.

Chihuahua/Terrier Mix

**SEX**

*Free Abdomen*

Male Neutered

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. A few prominent jejunal lymph nodes are visualized.

**AGE**

2 Years

**ULTRASONOGRAPHIC FINDINGS**

**WEIGHT**

18 lbs.

- The abdominal lymphadenopathy most likely represents reactive change and/or immunologic immaturity.
- There was no visible evidence of pancreatitis. However, microscopic inflammation cannot be excluded.

**INTERPRETED BY**

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

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

- Given the elevated TLI, consider transitioning to a prescription low-fat diet.
- Given the urinalysis abnormalities, consider sending a urine sample to an outside lab for a full urinalysis +/- UPC. If glucosuria is persistent, further evaluation for Fanconi's Syndrome may be warranted.

**IMAGING PERFORMED BY**

Kelly Reshny, RVT

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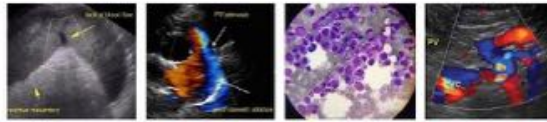
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**PATIENT**

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**SPECIES**

Canine

**BREED**

Chihuahua/Terrier Mix

**SEX**

Male Neutered

**AGE**

2 Years

**WEIGHT**

18 lbs.

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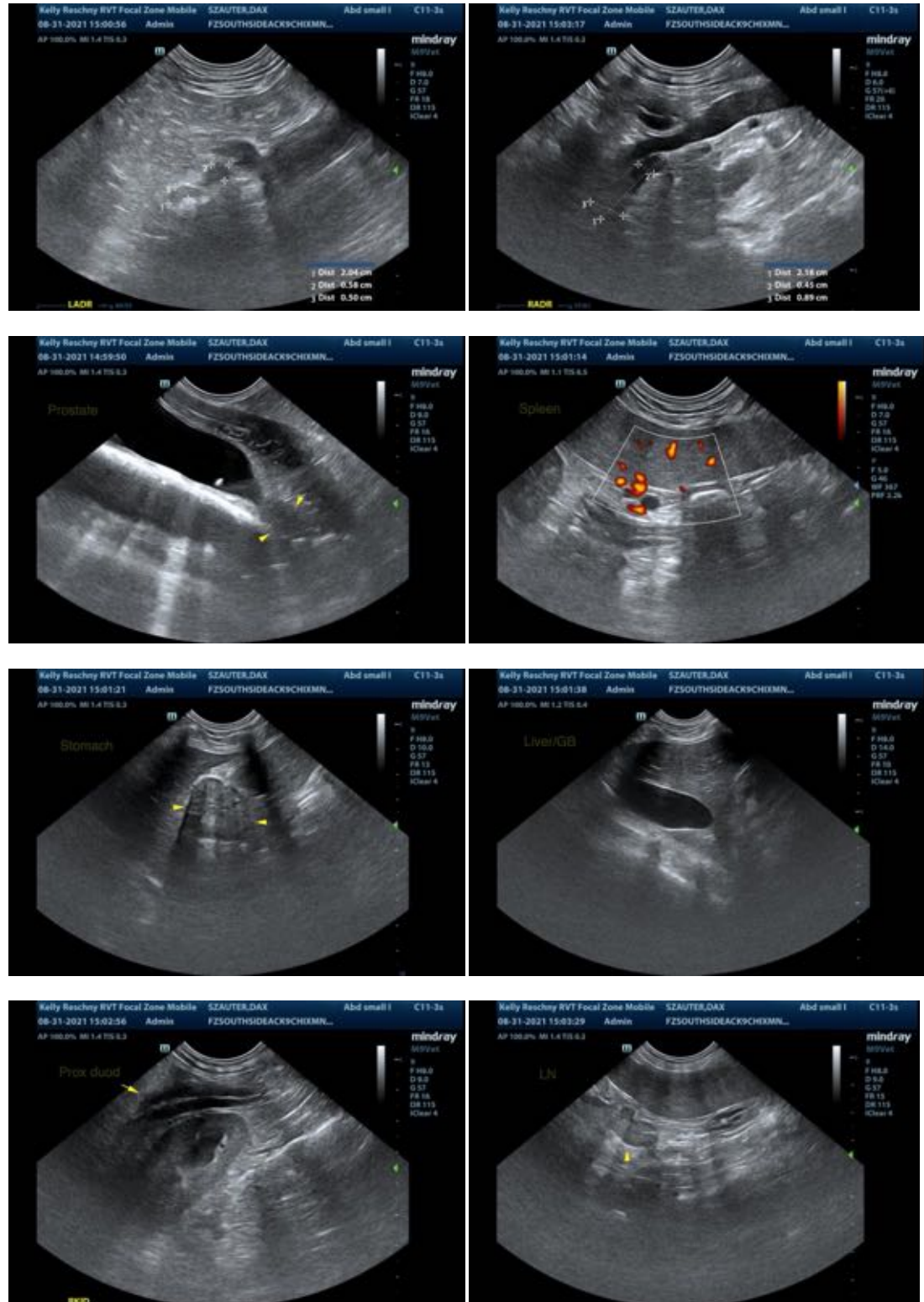
Southside AC

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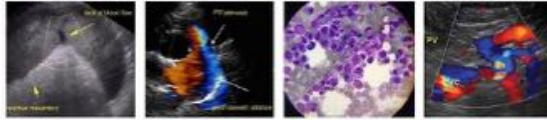
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The information and recommendations provided are based on the images presented by the referring



**PATIENT**

Dax Szauter

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.

**SPECIES**

Canine

Andrea Nicastro, DVM, Diplomate ACVIM (*Small Animal Internal Medicine*)  
Andrea.nicastro@sonopath.com

**BREED**

Chihuahua/Terrier Mix

**SEX**

Male Neutered

**AGE**

2 Years

**WEIGHT**

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