



PATIENT

Chiki Ibarra

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

11 Years

WEIGHT

6.5 Pounds

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Dr. Guiliani

HOSPITAL NAME

The Pet Hospital of
Stratford

REFERRING VET

Dr. Giuliani

INVOICE

44110

DATE

1/11/23

PRESENTING CLINICAL SIGNS

Unregulated diabetic, currently on 4.5 units vetsulin BID

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is moderately distended with anechoic urine. The Bladder wall is diffusely mildly thickened (0.49 cm), and the mucosa is mildly irregular. The trigone, ureteral papillae, and visible urethra (to a depth of 2cm) appear normal with no evidence of severe mucosal irregularities, masses or cystic calculi. Findings are most consistent with bacterial cystitis or lack of urine distension. Recommend urinalysis and culture.

The left kidney has a normal shape and size (3.47 cm) with corticomedullary rim sign and numerous small cortical cysts. Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

The right kidney has a normal shape and size (4.53 cm) with corticomedullary rim sign and numerous small cortical cysts. Overall echogenicity is normal with adequate corticomedullary distinction and a typical 1:3 cortex:medulla ratio. There is no evidence of focal perinephric inflammation or effusion. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter. Renal vasculature is normal.

Adrenal Glands

The left adrenal gland is normal in size measuring 0.47 cm at the caudal pole. It is observed in its normal position cranial to the left renal artery. It is normal in appearance (uniformly hypoechoic) and shape with no evidence of a mass effect.

The right adrenal gland is normal in size measuring 1.29 cm at the cranial pole, 0.51 cm at the caudal pole, and 1.88 cm in length. It is observed in its normal position between the cranial aspect of the right kidney and the caudal vena cava. The cranial pole appears slightly irregular but is likely within normal limits. There is no evidence of vascular invasion.

Spleen

The spleen is subjectively normal in size, echotexture is homogenous, and the splenic capsule is smooth with no irregularities. The blood flow through the hilus and splenic parenchyma appears normal. No focal parenchymal abnormalities are visualized.

Liver

The liver is subjectively normal in size with smooth peripheral margins. The parenchyma is hyperechoic and homogenous in echotexture. The visible portions of the vasculature and biliary tract appear normal. No focal nodules or cystic lesions are observed.

The gallbladder lumen is moderately distended. The wall of the gall bladder is not thickened and has a smooth mucosal surface. Luminal contents are mild and primarily anechoic. The cystic and common bile ducts are normal/not visible.

Gastrointestinal

The stomach is moderately dilated with fluid and irregular shadowing material most consistent with normal ingesta and gas. It measures at a normal thickness of <0.7cm with some variability due to the presence of rugal folds. The distinction of the gastric wall layering is adequate and there is no



PATIENT

Chiki Ibarra

impression of reduced peristaltic activity. On one image, there are two very discrete intraluminal structures most consistent with ingesta.

SPECIES

Canine

The visualized areas of duodenum, jejunum and ileum have a relatively uniform diameter with minimal fluid distension. Wall thickness is normal. Bowel loops follow a curvilinear path with distinct wall layering maintaining the typical 1:3 muscularis:mucosa layer ratio. Jejunum wall measures 0.28 cm. Duodenum wall measures 0.35 cm. Visualized peristalsis appears appropriate. There were no focal lesions consistent with obstruction or a mass effect observed.

BREED

Chihuahua

The ileocecal junction was visualized and exhibited normal intact wall layering and is subjectively of normal thickness. Sections of colon are visualized with formed fecal material and gas shadowing distally. There is no observed focal or generalized colon wall thickening or loss of layering.

SEX

Spayed Female

Pancreas

The pancreas is prominent and hypoechoic as compared to the surrounding isoechoic mesentery. There is no evidence of nodules or cystic lesions. There is no evidence of regional mesenteric inflammation or fluid.

AGE

11 Years

Free Abdomen

Evaluation of the peritoneal cavity did not reveal any evidence of effusion, or subjective lymphadenomegaly. The Medial iliac nodes appear normal and there was no evidence of a caudal aortic thrombus at the bifurcation. The omentum is of normal uniform echogenicity.

WEIGHT

6.5 Pounds

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

PRIMARY FINDINGS

- Thickened, irregular urinary bladder – The bladder mucosal changes could be consistent with cystitis or artifactual due to lack of adequate luminal distension. Bladder neoplasia cannot be ruled out but is considered unlikely in this patient.
- Medullary rim sign and small cortical cysts in both kidneys – Clinical significance uncertain, can be seen in normal patients and in cases of ethylene glycol toxicity, FIP, chronic interstitial nephritis, and leptospirosis.
- Prominent, hypoechoic pancreas – The pancreatic changes are most consistent with age-related parenchymal remodeling, potentially secondary to a prior inflammatory episode, early fibrosis or chronic pancreatitis.
- Shadowing ingesta and fluid within the gastric lumen – Findings are consistent with a recent meal.

IMAGING PERFORMED BY

Dr. Guiliani

HOSPITAL NAME

The Pet Hospital of
Stratford

REFERRING VET

Dr. Giuliani

SECONDARY FINDINGS

- Slightly irregular cranial pole to the right adrenal – This is likely within normal limits, but continued monitoring is warranted.

INVOICE

44110

DATE

1/11/23

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

No obvious source for insulin resistance is identified. The bladder wall does appear irregular and somewhat thickened, although the urinary bladder is not fully distended. Recommend a urinalysis and culture, looking for a UTI.

The pancreas is somewhat prominent but does not appear overtly inflamed. These findings are most consistent with either very mild chronic inflammation or previous episodes of inflammation.



PATIENT

Chiki Ibarra

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

11 Years

WEIGHT

6.5 Pounds

The changes in the liver are most consistent with a diabetic hepatopathy.

The cranial pole of the right adrenal gland appears somewhat prominent and irregular. Consider a recheck ultrasound in approximately 8 weeks to reevaluate this region and make sure that it is not changing significantly.

Additionally, a blood pressure evaluation is warranted.

Below is a list of possible causes for insulin resistance to consider:

- UTI
- Dietary indiscretion/intolerance
- Pancreatitis
- Hyperthyroidism/hypothyroidism
- Exogenous steroids (including topical eye meds)
- Cushing's
- Acromegaly
- Owner compliance
- Insulin quality issues
- Antibodies to insulin
- Underlying Neoplasia
- Diffuse liver disease

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

IMAGING PERFORMED BY

Dr. Guiliani

HOSPITAL NAME

The Pet Hospital of
Stratford

REFERRING VET

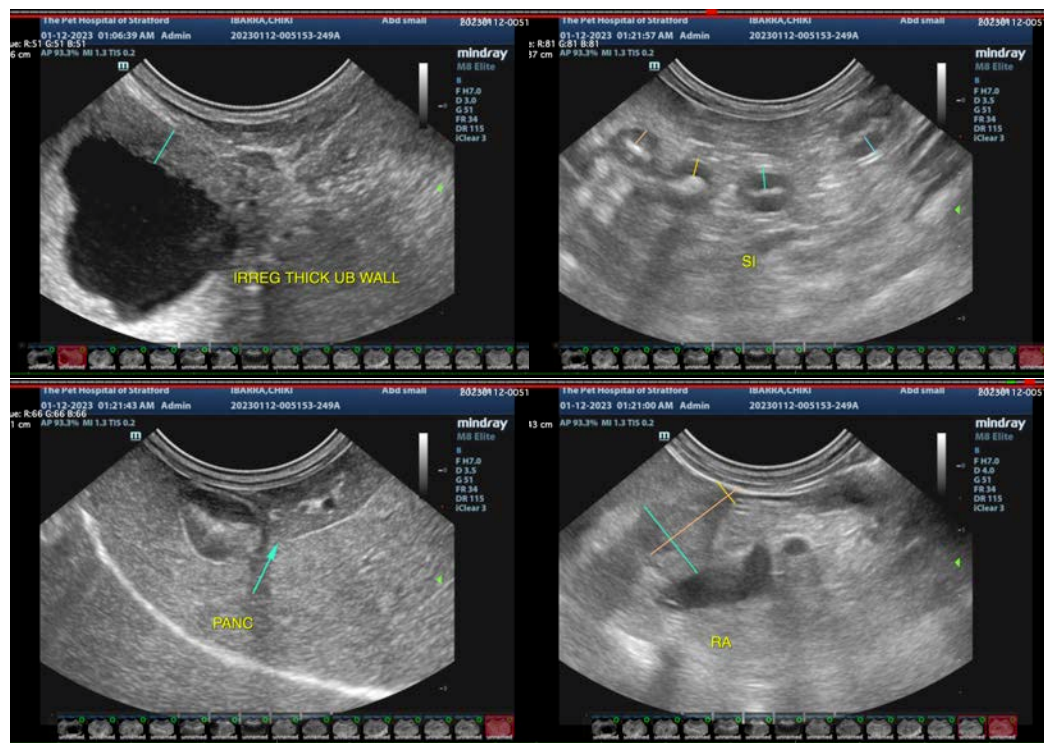
Dr. Giuliani

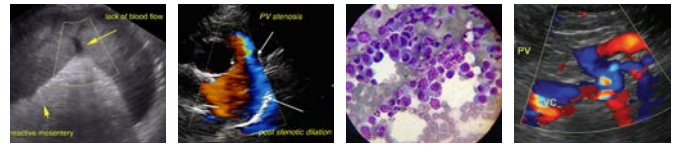
INVOICE

44110

DATE

1/11/23





PATIENT

Chiki Ibarra

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

11 Years

WEIGHT

6.5 Pounds

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Dr. Guiliani

HOSPITAL NAME

The Pet Hospital of
Stratford

REFERRING VET

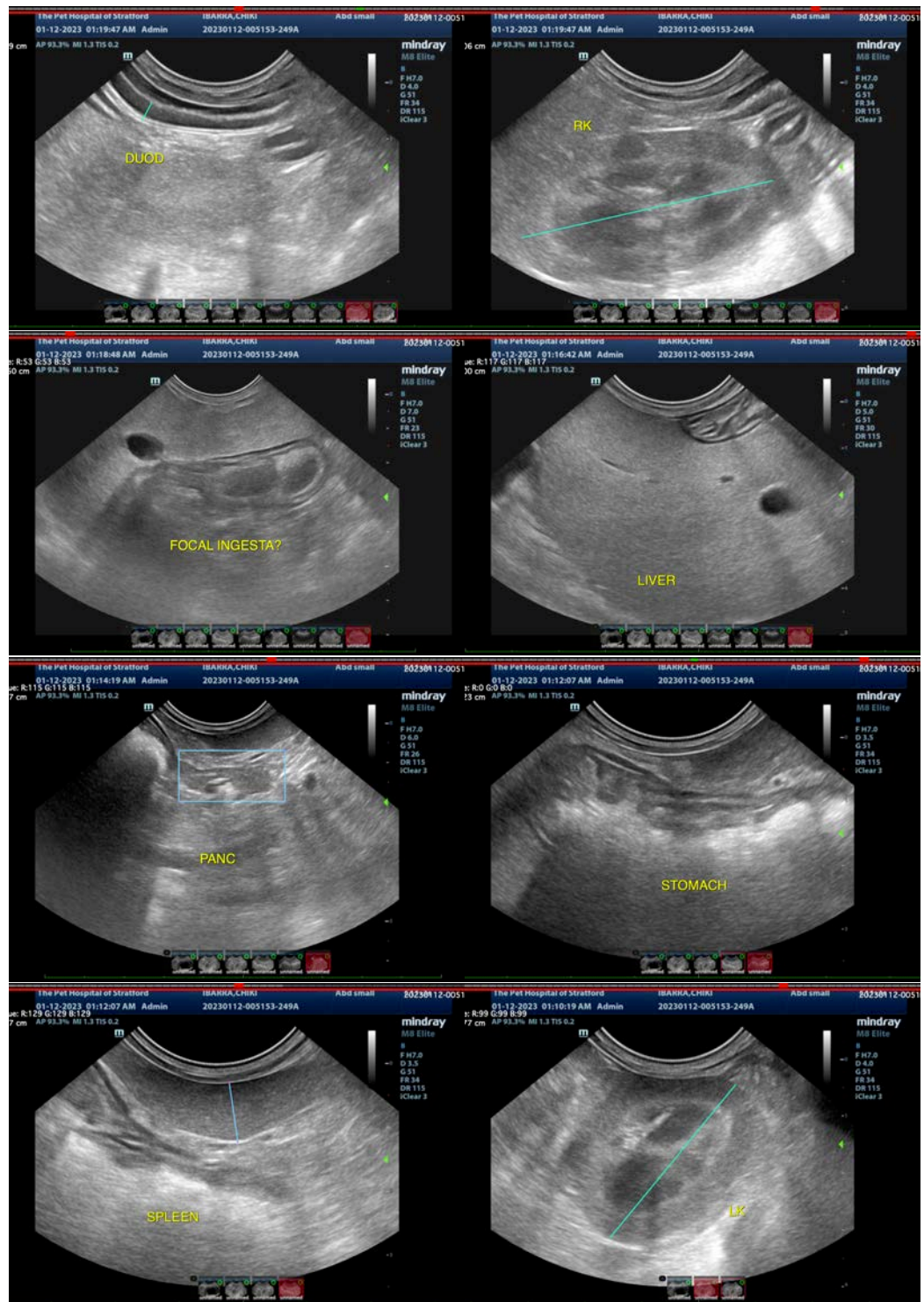
Dr. Giuliani

INVOICE

44110

DATE

1/11/23





PATIENT

Chiki Ibarra

SPECIES

Canine

BREED

Chihuahua

SEX

Spayed Female

AGE

11 Years

WEIGHT

6.5 Pounds

INTERPRETED BY

Kathleen Sennello DVM,
MS, Diplomate ACVIM
(Small Animal Internal
Medicine)

**IMAGING
PERFORMED BY**

Dr. Guiliani

HOSPITAL NAME

The Pet Hospital of
Stratford

REFERRING VET

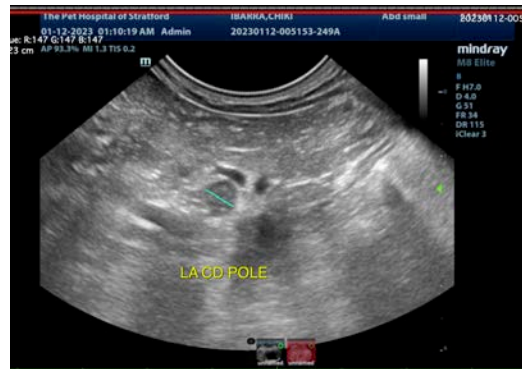
Dr. Giuliani

INVOICE

44110

DATE

1/11/23



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 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.

Kathleen Sennello DVM,MS, Diplomate ACVIM (Small animal Internal Medicine)

kathleen.sennello@sonopath.com