



PATIENT

Causita Azabache

SPECIES

Canine

BREED

Pit Bull

SEX

Neutered Male

AGE

10 Years

WEIGHT

62 Pounds

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

**IMAGING
PERFORMED BY**

Dr. Mayra Sanchez

HOSPITAL NAME

Sunset AH

REFERRING VET

Dr. Mayra Sanchez

INVOICE

36096

DATE

3/10/22

PRESENTING CLINICAL SIGNS

Decreased energy and appetite over the weekend. Some improvement with GI protectants and gabapentin but then patient vomited multiple times. History of incompletely excised soft tissue sarcoma on carpus and multiple cutaneous MCTs
Abnormal PE/Chem/CBC/UA Results: PE: NSF CBC: elev. HCT Chem: ALT 170 Thoracic radiographs: No obvious masses seen

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The urinary bladder is not fully distended. However, the wall is smooth and regular. The urethra and trigone are not fully visualized, but there are no obvious abnormalities observed with regard to sediment, cystoliths, polyps, or a mass.

The left kidney is within normal limits in size for the patient's weight (approximately 5.5 cm). A medullary rim sign, with a mild loss of definition of the corticomedullary junction, are observed. Multiple diverticular mineralizations and small nephroliths measuring approximately 4.3 mm and 3.4 mm are visualized. Pyelectasia is absent, i.e., there are no signs of an obstruction. A very small cyst is present, which is not clinically significant. The surrounding mesentery is very mildly hyperechoic. Pyelonephritis cannot be excluded based on the latter finding.

The right kidney is within normal limits in size for the patient's weight (6.4 cm). The medullary rim sign is not as evident compared to the left kidney. A mild loss of definition of the corticomedullary junction is observed, as are mineralizations. There are no signs of pyelectasia. The surrounding mesentery is also mildly hyperechoic, i.e. pyelectasia remains a differential diagnosis.

Adrenal Glands

The left adrenal gland measures 0.53 cm x 1.82 cm. No abnormalities are noted with the gland's shape, overall architecture, echogenicity or echotexture. The portion of the caudal vena cava and renal vein observed do not show any abnormalities.

The right adrenal gland was not visualized.

Spleen

Although the spleen is within normal limits in echotexture and echogenicity, and the capsule is smooth, it appears smaller in size compared to what is normally expected for a dog of Causita's size.

Hypovolemia is therefore suspected. No abnormalities are observed with its vasculature (i.e., congestion and thrombi are not identified).

Liver

There are no obvious signs of hepatomegaly and its borders are smooth and sharp. The liver's echotexture is homogeneous and it is within normal limits in echogenicity, i.e. it is hypoechoic to the spleen and isoechoic to the kidneys. No abnormalities are observed with the hepatic vessels. The hepatic lymph nodes are unremarkable.

The gall bladder wall is within normal limits in thickness and echogenicity. A trivial amount of echogenic material is visualized within the lumen. There is no evidence of edema surrounding the gallbladder.

Gastrointestinal



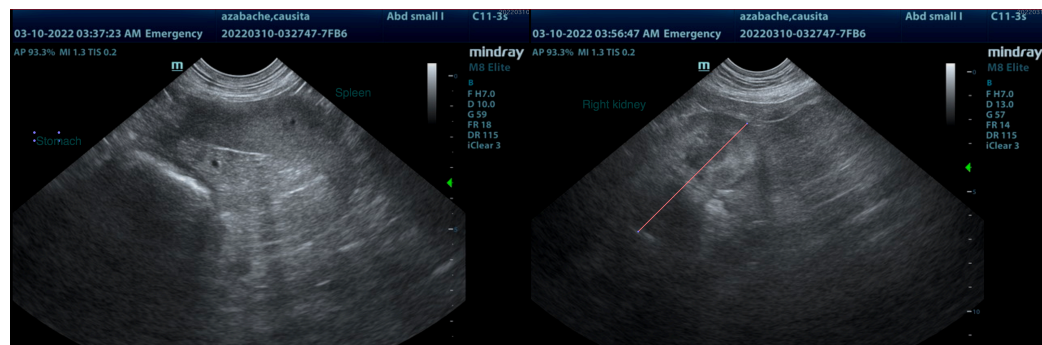
PATIENT	The gastric wall and pylorus are normal in thickness. There is no loss of definition of the normal architecture of the layers of the stomach wall. No obvious abnormalities are observed with its peristalsis.
Causita Azabache	
SPECIES	The small intestinal wall thickness is within normal limits and there is no evidence of dilation. The definition of the wall layers is preserved. The colonic wall is not thickened and mural detail is considered normal. There are no obvious signs of a mass, foreign body, infiltrative disease or an obstruction.
Canine	
BREED	Pancreas
Pit Bull	Both the left and right limbs of the pancreas are mildly to moderately coarse. Differential diagnoses include nodular hyperplasia and areas of fat and/or fibrosis due to age related changes and possible previous episodes of pancreatitis, respectively. There are no signs of active pancreatitis.
SEX	Other
Neutered Male	Lymph nodes: No abnormalities are observed.
AGE	Abdominal effusion is not visualized.
10 Years	ULTRASONOGRAPHIC FINDINGS
WEIGHT	<ul style="list-style-type: none"> • There are no obvious signs of neoplasia. • Although some of the changes observed with the kidneys may be age related, pyelonephritis cannot be excluded. • There are no obvious signs of pancreatitis.
62 Pounds	
INTERPRETED BY	INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS
Lisa Carioto, DVM, DVSc, Diplomate ACVIM	A urinalysis and culture and sensitivity are recommended to exclude possible pyelonephritis, which could explain Causita's lethargy.
IMAGING PERFORMED BY	A spec cPL may be indicated depending on the evolution of clinical signs, despite the lack of evidence of pancreatitis on today's ultrasound. The administration of maropitant and gabapentin may be considered to exclude nausea and pain, respectively.
Dr. Mayra Sanchez	A baseline cortisol may also be indicated depending on the evolution of Causita's clinical signs.
HOSPITAL NAME	Hydration status should be monitored, as he is hypovolemic based on his hematocrit and the size of his spleen. Hydration support with oral supplementation may be sufficient, providing vomiting is controlled.
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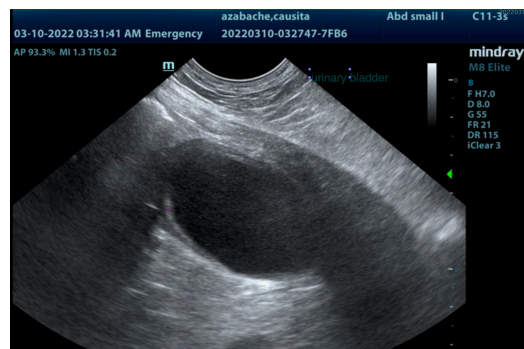
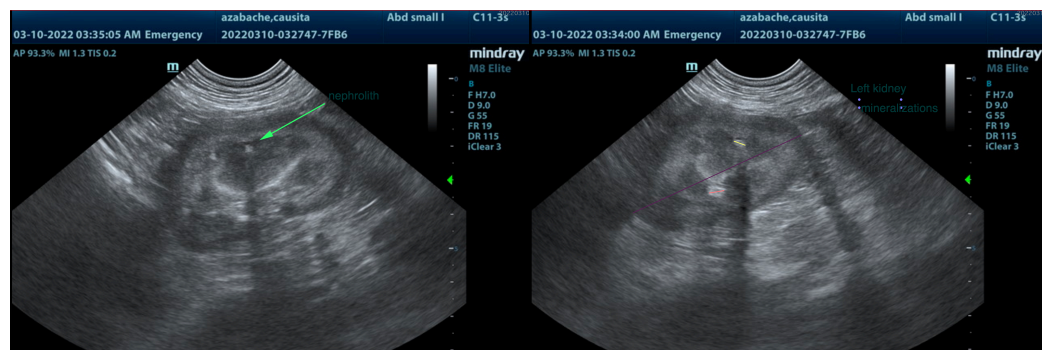
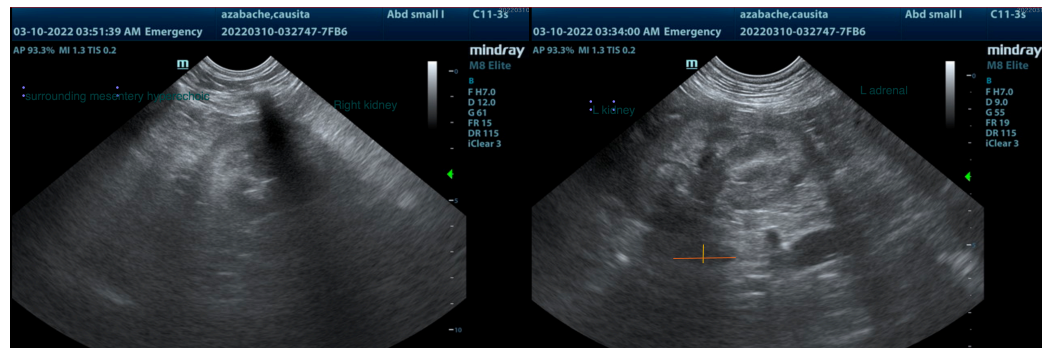
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Lisa Carioto, DVM, DVSc, Diplomate ACVIM

Lisa.Carioto@sonopath.com