



PATIENT PRESENTING CLINICAL SIGNS

Sophie Colavecchia

Stopped eating all of a sudden 2 weeks ago. Physical exam unremarkable except chronic dental disease. No V/D, urinating well and bm's normal. Will eat human food, but refuses to eat kibble or wet food, owner has tried multiple kinds. Abdominal Palpation- questionable discomfort mid cranial abdomen- not able to replicate. - No evidence of masses, fluid wave and lymph nodes WNL. meds: gabapentin, torb & dexdom sedation for scan

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: Blood Work from May 5th- Mild Lymphadenopathy 1 (1.1-5x10⁹/L). Mild Elevation ATL was noticed 124 (18-100 U/L)

BREED

Chihuahua X

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

Spayed Female

The urinary bladder is adequately distended with anechoic contents. The wall is smooth and regular. No abnormalities are present with the trigone or proximal urethra. A moderate amount of free floating sediment is present, however, there is no evidence of cystoliths, polyps or a mass.

Kidneys

AGE

9 Years

The **left** kidney measures 3.57 cm. The capsule is smooth. A thick hyperechoic band is observed along the medulla, traversing parallel to the corticomedullary junction, which accentuates the definition of the cortico-medullary junction. Punctate mineralizations of the diverticulae and pelvis are observed, in addition to very small nephroliths (acoustic shadowing), without signs of pyelectasia. Blood flow is adequate. The surrounding mesentery is not hyperechoic.

WEIGHT

12.4 Pounds

The **right** kidney measures 3.74 cm. The capsule is smooth. The cortex is isoechoic to the liver. A thick hyperechoic band is observed along the medulla, traversing parallel to the corticomedullary junction, which accentuates the definition of the cortico-medullary junction. A punctate mineralization is noted within the cortex along the anti-mesenteric border. The diverticulae are very mildly hyperechoic. Blood flow is adequate. The surrounding mesentery is not hyperechoic.

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

Aortic bifurcation/trifurcation

No abnormalities observed.

IMAGING PERFORMED BY

Kelly Reschny

Adrenal Glands

The **left** adrenal gland measures 0.42 cm at the cranial pole, 0.44 cm at the caudal pole and 1.44 cm in length. No abnormalities are noted with the gland's overall architecture, echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

HOSPITAL NAME

Southside Pet Hospital

The **right** adrenal gland measures 0.65 cm (enlarged) at the cranial pole and 0.41 cm at the caudal pole. An obvious mass is not observed. No abnormalities are noted with the gland's overall echogenicity or echotexture. The phrenico-abdominal vein and surrounding vasculature and mesentery are unremarkable.

REFERRING VET

Dr. Velez

Spleen

INVOICE

37670

The spleen is within normal limits in size, architecture, echotexture, and echogenicity. The capsule is smooth. No abnormalities are observed with its vasculature, i.e. congestion and thrombi are not identified.

DATE

5/17/22



PATIENT *Liver*

Sophie Colavecchia

Mild hepatomegaly may be present (depth up to 7.5 cm), however, size is better characterized at the time of the ultrasound or with radiographs. The liver's borders are smooth and sharp. It is diffusely homogeneous, however, it is hyperechoic, i.e. it is isoechoic to the spleen. No focal lesions are observed. No abnormalities are observed with the hepatic vessels visualized.

SPECIES

Canine

The gallbladder wall is mildly thicker than normal (2 mm) and mildly hyperechoic. A small amount of free floating and inspissated echogenic material (sludge) is present within the GB. Small nodules of inspissated sludge are observed. The portions of the cystic and/or common bile ducts observed are not dilated or tortuous, i.e. there are no signs of an obstruction. The mesentery surrounding the gallbladder is hyperechoic.

BREED

Chihuahua X

SEX

Spayed Female

A small amount of gas and a mild amount of fluid are present in the lumen of the stomach. The gastric wall is within normal limits in thickness and the wall layers are well defined, however, the submucosa is moderately thickened. A mild ileus is suspected and the mesentery surrounding the stomach is hyperechoic.

AGE

9 Years

The small intestinal wall thickness is within normal limits and the definition of the wall layers is preserved. Mild fogging of the intestines is present. Abnormally dilated loops of bowel are not observed.

WEIGHT

12.4 Pounds

The colonic wall is not thickened and mural detail is considered normal. Formed stools are present in the colon.

Pancreas

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

The **left limb** is very mildly hypoechoic compared to the surrounding mesentery. Overt signs of neoplasia are not noted.

The **right limb** is not visualized.

Signs of active pancreatitis or neoplasia are not appreciated.

IMAGING PERFORMED BY

Kelly Reschny

Other

Lymph nodes

No abnormalities are observed

HOSPITAL NAME

Southside Pet Hospital

Abdominal effusion is not visualized.

ULTRASONOGRAPHIC FINDINGS

REFERRING VET

Dr. Velez

- A mild ileus of the stomach is suspected, in addition to thickening of the submucosa of the stomach, and mild fogging of the intestines. The mesentery surrounding the stomach is hyperechoic. A foreign body is not visualized.

INVOICE

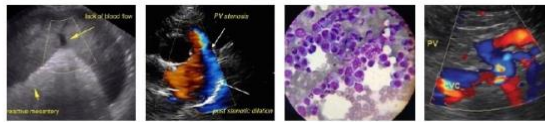
37670

- The hepatomegaly and diffuse hyperechogenicity of the liver may occur secondary to a vacuolar hepatopathy, however, underlying cholestasis, and suppurative cholangitis/cholangiohepatitis are also likely responsible.

DATE

5/17/22

- Gallbladder sludge; most likely clinically insignificant, however, gastroesophageal reflux disease (GERD), may occur in some patients. Obtaining a history regarding signs of GERD from the client is suggested.



PATIENT

Sophie Colavecchia

SPECIES

Canine

BREED

Chihuahua X

SEX

Spayed Female

AGE

9 Years

WEIGHT

12.4 Pounds

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

IMAGING PERFORMED BY

Kelly Reschny

HOSPITAL NAME

Southside Pet Hospital

REFERRING VET

Dr. Velez

INVOICE

37670

DATE

5/17/22

- Cholecystitis is suspected.
- The intestinal abnormalities are very subtle and may be due to inflammation secondary to suspected suppurative cholangitis/cholangiohepatitis and cholecystitis.
- The cranial pole of the right gland is slightly “plump” and mildly enlarged. There is no evidence of a nodule or a mass. This finding is considered incidental and is likely clinically insignificant, however, other possibilities include adrenal hyperplasia due to stress, chronic illness or development of a benign adenoma.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

10-14 day trial with famotidine or omeprazole (0.7-1 mg/kg PO q12h), especially if signs of GERD present.

Deworm, and any other pets in the household, with fenbendazole, 50 mg/kg by mouth once a day for 3 days and repeat 3 weeks later (even if patient receives monthly heartworm prevention).

Diet trial (veterinary prescription brand hypoallergenic, hydrolyzed or novel protein) for a minimum of 14 days

Differential diagnoses include cholecystitis, cholangitis/cholangiohepatitis, and secondary ascending bacterial infections. Although indiscriminate use of antibiotics is not recommended, consider broad-spectrum antibiotic with reassessment of liver enzymes, including GGT, in a few weeks, while *still receiving* the antibiotics.

If an improvement is observed, continue antibiotic for an additional two weeks.

If the liver enzymes are still elevated, fine needle aspirates of the liver may be considered. A coagulation profile is suggested prior to the procedure, in addition to at least one or two doses of vitamin K (0.5 mg/kg SQ q8-12h)

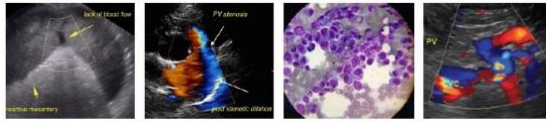
Serum cobalamin, folate, TLI, +/- spec cPL may be performed depending on the response to the above treatment suggestions.

Endoscopy and biopsies of the upper and lower GI tract diet, if no response to deworming and diet trials.

An arterial blood pressure is suggested.

A re-evaluation of the adrenal glands may be considered in 3-6 months. Once Sophie is feeling better, a urine protein: creatinine ratio is suggested.

*Analgesia to treat abdominal pain is suggested, in addition to possible nausea.



PATIENT

Sophie Colavecchia

SPECIES

Canine

BREED

Chihuahua X

SEX

Spayed Female

AGE

9 Years

WEIGHT

12.4 Pounds

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

Southside Pet Hospital

REFERRING VET

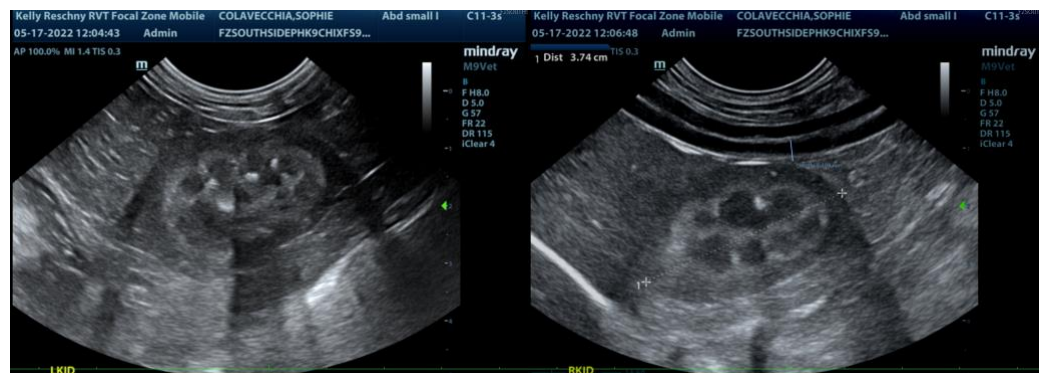
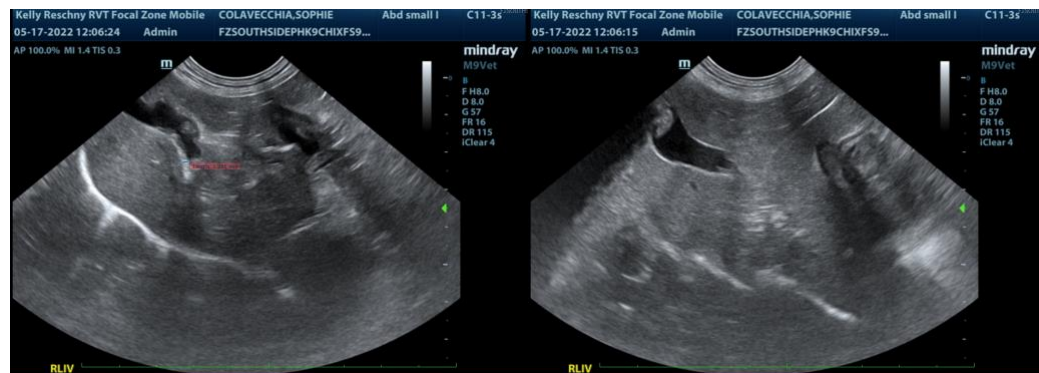
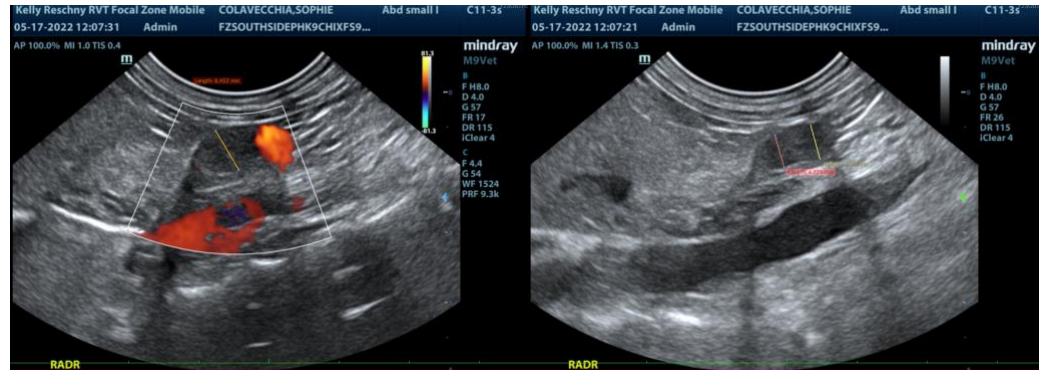
Dr. Velez

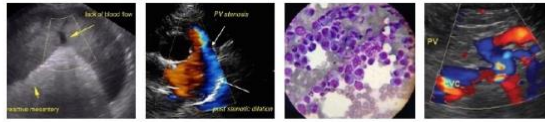
INVOICE

37670

DATE

5/17/22





PATIENT

Sophie Colavecchia

SPECIES

Canine

BREED

Chihuahua X

SEX

Spayed Female

AGE

9 Years

WEIGHT

12.4 Pounds

INTERPRETED BY

Lisa Carioto, DVM,
DVSc, Diplomate
ACVIM

**IMAGING
PERFORMED BY**

Kelly Reschny

HOSPITAL NAME

Southside Pet Hospital

REFERRING VET

Dr. Velez

INVOICE

37670

DATE

5/17/22



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