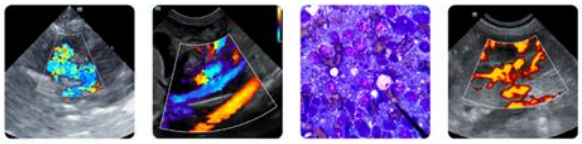




**PATIENT**

Peanut Esposito

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

FS

**AGE**

14yr

**WEIGHT**

7.6

**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

**IMAGING PERFORMED BY**

Dr. Camille Petrizzo

**HOSPITAL NAME**

Greater Staten Island Veterinary Srerrvice

**REFERRING VET**

Dr. Camille Petrizzo

**INVOICE**
22463

**DATE**
04/12/2026

## PRESENTING CLINICAL SIGNS

presented for seizures- Hx of DM for 7-8 years- prev well managed on vetsulin. no apparent overdose noted
On presentation BG was 50.
Hx of abscess removal on neck ~ 4-6 weeks ago
Abnormal PE/Chem/CBC/UA Results: CBC Mono 1.36 (H), Chemlytes: Glu 23 (L), K 6.4 (H), Fructosamine 152 (Low) UA (Cystocentesis): Prot 3+ , Blood 3+, Glu 2+, WBC 2/hpf, RBC 15/hpf
Urine Culture: Pending

## ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

### *Urinary System*

The urinary bladder was mildly distended in size with normal tone. The trigone, cystourethral junction, and visible pelvic urethra to a depth of 3 cm exhibited normal thickness and tone. Anechoic urine was present in the lumen with no evidence of urine/lumen sediment, mineral, or calculi. The ureteral papillae were normal. The ureters were not visible which is normal. No evidence of inflammatory or neoplastic changes was noted.

Normal size and margination were present in the kidneys. A normal 1:3 cortex / medulla ratio was maintained. The medulla and cortices were uniform in texture with some increased echogenicity and mild loss of corticomedullary symmetry and definition expected for the age of the patient. No evidence of pelvic dilation was present. Bilateral small cortical cysts were present. The left kidney measured 3.7 cm in length. The right kidney measured 4.0 cm in length.

The area of the aortic trifurcation was free of pathology.

### *Adrenal Glands*

Both adrenal glands were asymmetrically enlarged exhibiting mild non-homogenous, non-mineralized parenchyma. Adrenomegaly more prominent in the left adrenal gland. The left adrenal gland measured 0.92 cm width at the caudal pole. The right adrenal gland measured 0.61 cm width at the caudal pole.

### *Spleen*

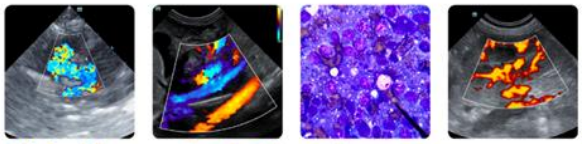
The spleen exhibited a finely textured and homogenous parenchyma which was hyperechoic to the liver and renal cortical parenchyma. The capsule was smooth and regular without apparent expansion. The splenic vasculature at the hilus was normal in volume with no evidence of congestion or thrombosis. Acute to chronic inflammatory, neoplastic, or benign parenchyma changes were not noted.

### *Liver/Gallbladder*

The liver was subjectively normal in size, structure, and contour. The liver parenchyma was mildly nonuniform and hypoechoic to the spleen with a moderate coarse echotexture and subjective mild to benign parenchymal remodeling. No visualized masses or nodules were present. The hepatic and portal vasculature were normal in appearance without signs of congestion.

The gallbladder was non-distended in size with thin walls and mild non-organized debris. The cystic and common bile ducts were normal.

### *Gastrointestinal*





**PATIENT**

Peanut Esposito

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

FS

**AGE**

14yr

**WEIGHT**

7.6

**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

**IMAGING PERFORMED BY**

Dr. Camille Petrizzo

**HOSPITAL NAME**

Greater Staten Island Veterinary Srerrvice

**REFERRING VET**

Dr. Camille Petrizzo

**INVOICE**
22463

**DATE**
04/12/2026

The stomach presented intact wall layering with a normal wall layer ratio. The lumen of the stomach was empty with no signs of ileus, obstruction or foreign material.

The small intestine presented intact wall layering with 1:3 muscularis/mucosa ratio. The lumen of the small intestine was empty with no signs of mechanical/metabolic ileus, obstruction or foreign material.

Normal visible colon wall layers were present with apparent formed feces in lumen.

### *Pancreas*

The parenchyma of the pancreas was hyperechoic to adjacent omental fat with diffuse parenchyma remodeling. The capsule of the pancreas was mildly asymmetrical in contour without evidence of peripancreatic inflammation. Indistinct pancreatic border compared to adjacent non-reactive or inflamed omentum. These changes may suggest chronic inflammation, fibrosis, or saponification if previous history of pancreatitis. No overt signs of pancreatic neoplasia.

### *Free Abdomen*

No omental masses, overt lymphadenopathy or peritoneal effusion was present.

## ULTRASONOGRAPHIC FINDINGS

### Primary

- Bilateral adrenomegaly, more prominent in the left adrenal gland
- Mild chronic renal changes with cortical cysts
- Normal volume liver with mild parenchymal remodeling
- Non-organized gallbladder debris
- Possible mild chronic pancreatitis/ fibrosis

## INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Correlation with pending urine C/S given glucosuria is recommended. No evidence of overt neoplastic criteria. If no evidence of insulin overdose with normal caloric plain or gastrointestinal signs as a potential cause of decreased appetite, monitoring of serum GLU with consideration for paired insulin glucose ratio on same serum sample if blood GLU remains <60 and patient has not received exogenous insulin.

Sonographic monitoring of the bilateral adrenal glands given adrenomegaly with specific monitoring of the left adrenal gland and for evidence of progressive enlargement +/- adrenal screening or workup with ACTH stimulation test if clinical signs consistent with Cushing's syndrome or diabetic dysregulation is recommended.

**PATIENT**

Peanut Esposito

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

FS

**AGE**

14yr

**WEIGHT**

7.6

**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

**IMAGING PERFORMED BY**

Dr. Camille Petrizzo

**HOSPITAL NAME**

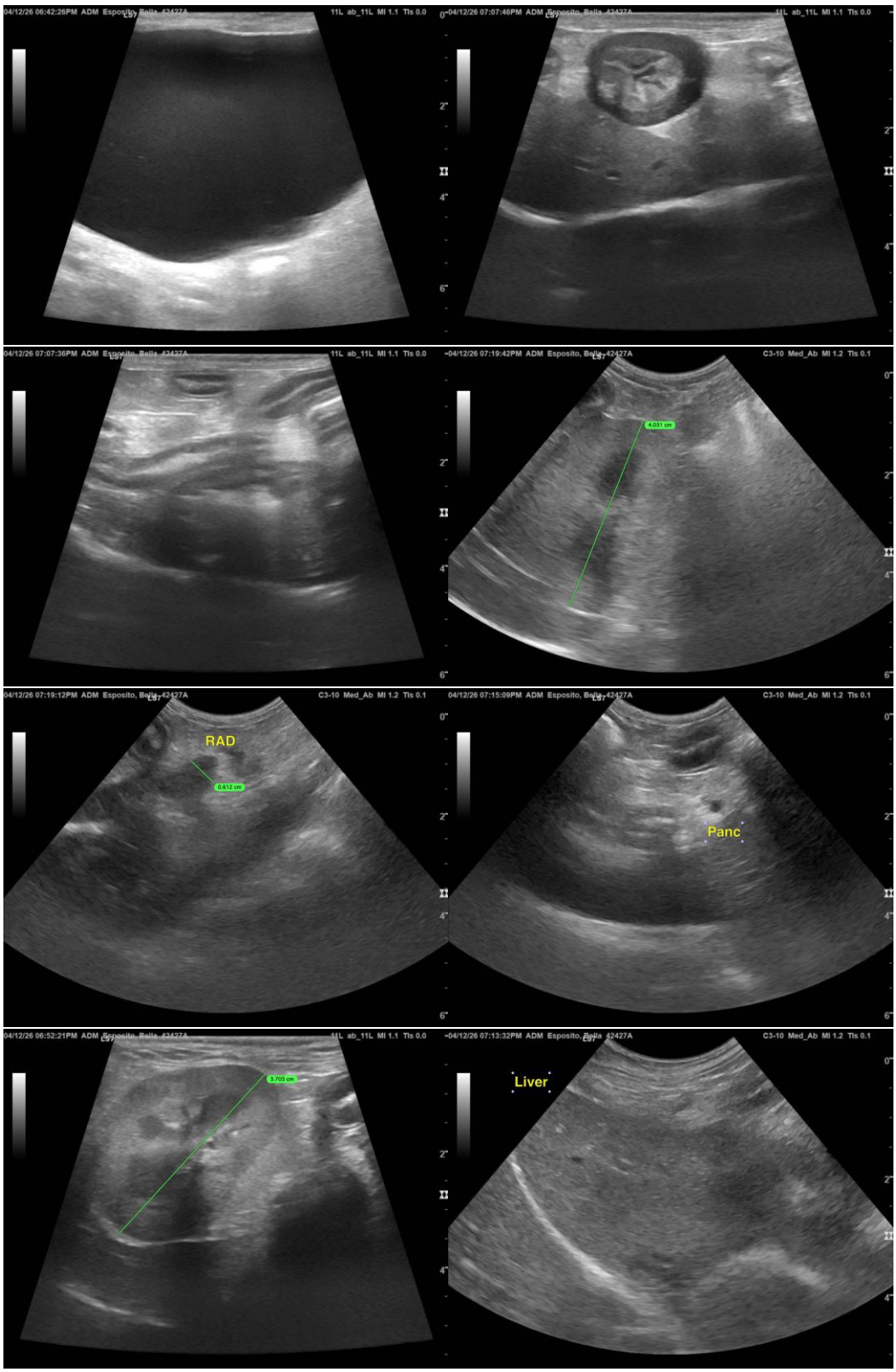
Greater Staten Island Veterinary Srerrvice

**REFERRING VET**

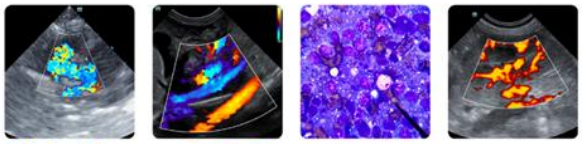
Dr. Camille Petrizzo

**INVOICE**
22463

**DATE**
04/12/2026



SonoPath
FOSTERING THE ART OF VETERINARY MEDICINE™



Clinical Sonography & Telecytology
Educational Teleconsultation Services™

SonoPath.com info@sonopath.com 1.800.838.4268

**PATIENT**

Peanut Esposito

**SPECIES**

Canine

**BREED**

Chihuahua Mix

**SEX**

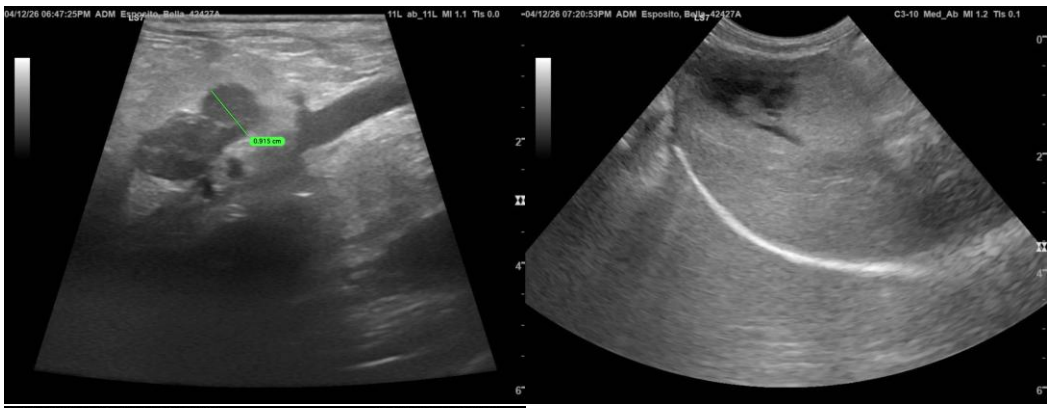
FS

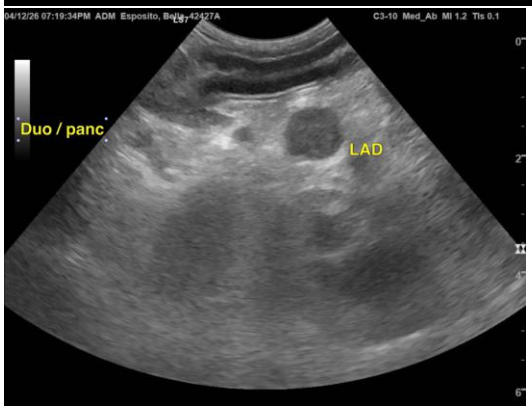
**AGE**

14yr

**WEIGHT**

7.6






**INTERPRETED BY**

R. McKenzie Daniel, DVM, DABVP (Canine and Feline)

**IMAGING PERFORMED BY**

Dr. Camille Petrizzo

**HOSPITAL NAME**

Greater Staten Island Veterinary Srerrvice

**REFERRING VET**

Dr. Camille Petrizzo

**INVOICE**
22463

**DATE**
04/12/2026

**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.

**R. McKenzie Daniel, DVM, DABVP (Canine/Feline Practice)**
info@sonopath.com