**DATE PRESENTING CLINICAL SIGNS**

1/13/2022 History: Pet was started on urinary diet at time of last scan to see if it could dissolve urinary stones noted.

PATIENT

Daisuki Diehl

Current Medications: Clindamycin (Antirobe) 75mg Capsule Give 1 capsule every 12 hours. Ursodiol 35 mg/mL Give 1 mL PO BID. RC s/o diet.

Date of Previous IntraPet Ultrasound: 12-6-2021.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By:

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**BREED**

Shih Tzu

Urinary System

The urinary bladder is mildly distended. The wall is normal in thickness. The mucosal surface is slightly irregular in the region of the apex. A moderate amount of gravity dependent mineralized sand/tiny calculi are observed within the bladder and proximal urethral lumen. The region of the trigone is obscured by the sand. The proximal urethral lumen is not overtly dilated.

SEX

Neutered Male

The prostate is normal in size (0.64 cm in width) with a normal shape and smooth peripheral contours. The parenchyma is homogenous. A focus of mineralization is observed in the prostatic urethra. However, the lumen is not overtly dilated

AGE

10/10/2015

The left kidney is normal in size (4.16 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. There is no evidence of pyelectasia, infarcts or hydronephrosis. Renal vasculature is normal.

WEIGHT

15 Lbs

The right kidney is normal in size (4.00 cm in length) with a normal shape, smooth peripheral margins, and normal internal architecture. There is mild loss of corticomedullary distinction. Several hyperechoic shadowing diverticular foci are observed. A few tiny non-obstructive nephroliths are visualized, with no evidence of pyelectasia, infarcts or hydroureter. Renal vasculature is normal.

INTERPRETED BY

Andrea Nicastro, DMV,
Diplomate DACVIM
(Small Animal
Internal Medicine)

Adrenal Glands

The left adrenal gland is normal size (0.41 cm at cranial pole) (0.49 cm at caudal pole) (1.67 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

Banfield Pet Hospital
of White Marsh

The right adrenal gland is normal size (0.49 cm at cranial pole) (0.50 cm at caudal pole) (1.33 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.

REFERRING VET

Dr. Gutwillig

Spleen

The spleen is normal in size (0.94 cm in width at the level of the hilus) with a normal capsular contour. The parenchyma is subtly mottled in appearance. No focal lesions are observed. Splenic vasculature is normal.

INVOICE

10141

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 small amount of echogenic debris is observed within the lumen, some of which is partially dependent and some of which is suspended. The cystic and common bile ducts are normal.

Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is gas distended. The gastric wall and pylorus are normal in thickness with a normal layering pattern. 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 or overt infiltrative disease is noted.

Pancreas

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.

Free Abdomen

The peritoneal cavity is normal. There is no evidence of inflammation or effusion. The abdominal lymph nodes are normal/not visible.

ULTRASONOGRAPHIC FINDINGS

Primary Findings

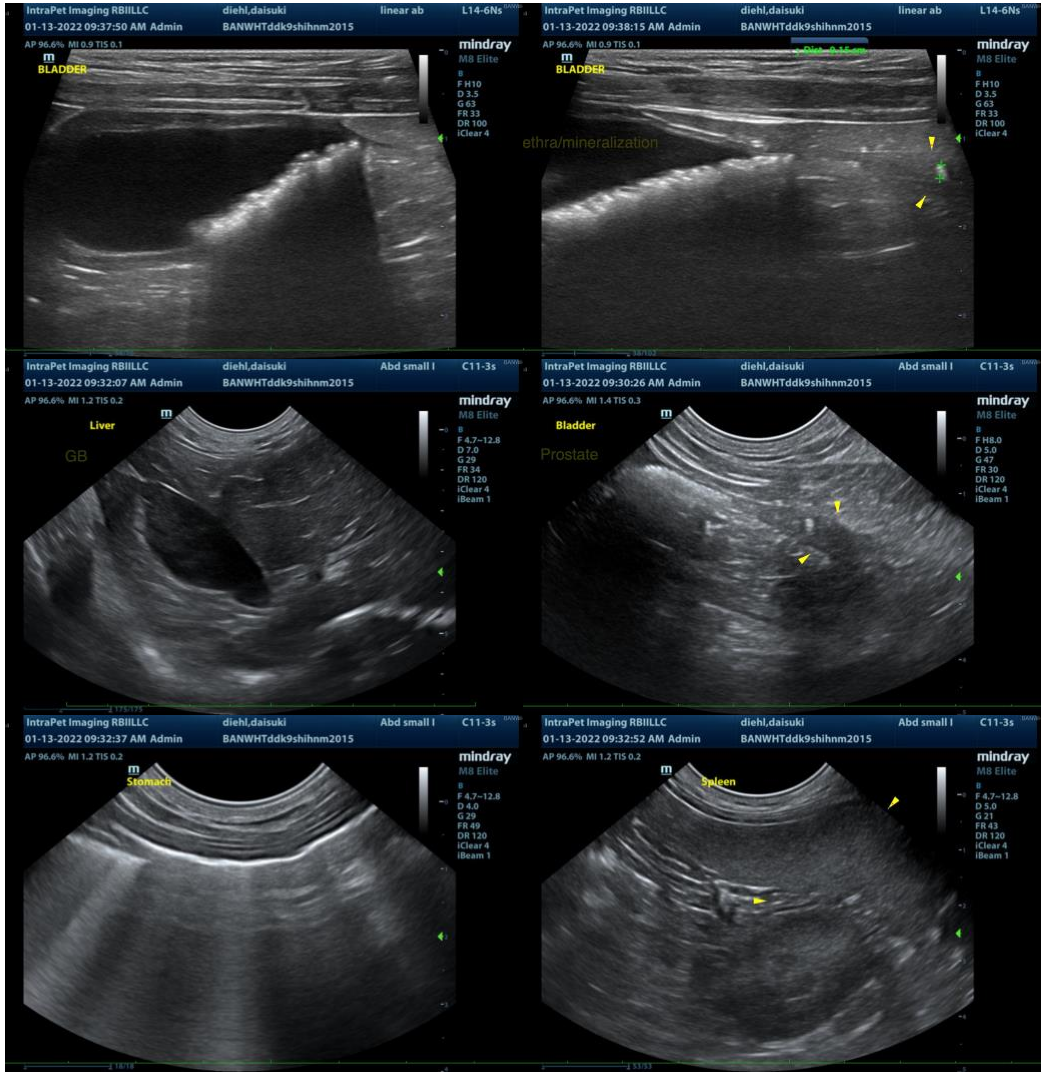
- Urinary bladder and proximal urethral sand/tiny calculi. Changes are similar to the previous sonogram.
- Mild gall bladder debris. Changes are markedly improved compared to the previous sonogram.

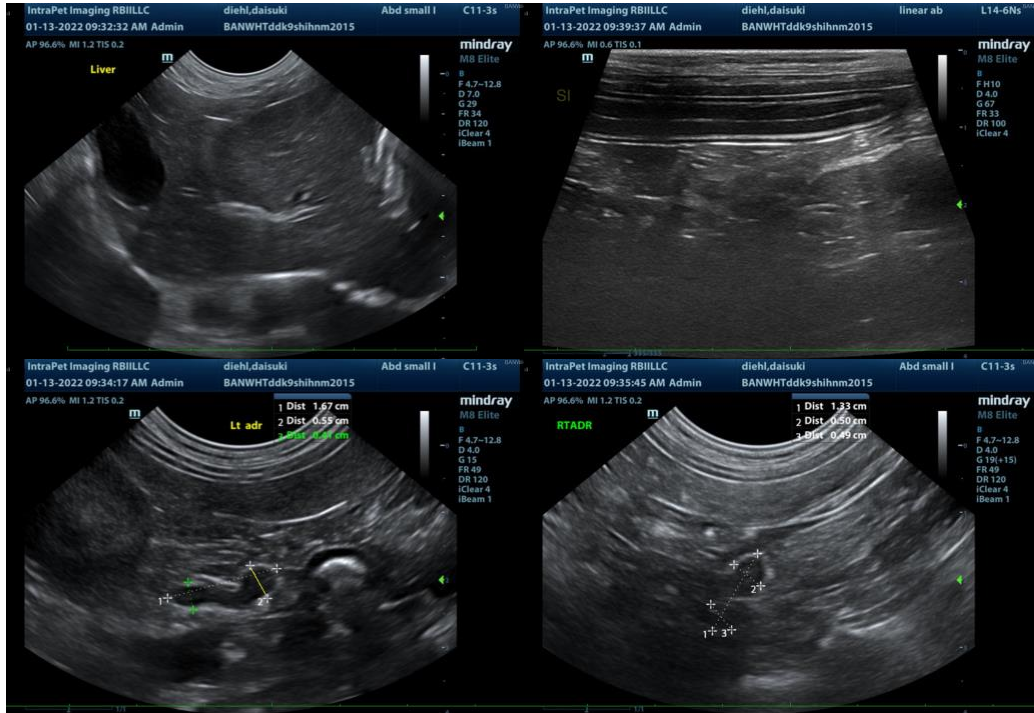
Secondary Findings

- Bilateral age-related renal changes with right non-obstructive nephrolithiasis and left dystrophic mineralization.
- The splenic parenchymal changes likely represent a benign process (i.e., lymphoid hyperplasia or extramedullary hematopoiesis) with a low possibility of emerging neoplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Regarding the gall bladder, continuation of Ursodiol is recommended with a recheck ultrasound of the gall bladder in 3-4 months.
- Regarding the urinary bladder stone/sand, a cystotomy with a stone/sand removal and submission for analysis and culture is recommended. The urethra should also be flushed at the time of surgery to remove any residual mineralization. Three-view thoracic radiographs are recommended prior to anesthesia to assess heart/lungs.





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

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