



PATIENT PRESENTING CLINICAL SIGNS

Scout Sulz History: history of nocturia. Patient seems unaware. Will also urinate during day occasionally and not be aware. Did not respond to PPA. Treated with Enrofloxacin - No improvement.

SPECIES ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Canine *Urinary System*

BREED The urinary bladder, trigone, and pelvic urethra are normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with anechoic urine. No masses, inflammatory changes or calculi are observed. Ureteral papillae and visualized portion of the proximal urethra, visible to a depth of 2 cm, are normal.

Weimaraner

SEX The prostate is not definitively visualized due to its pelvic location.

Male, neutered

The left kidney is normal size (9.19 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

AGE

5 Yrs.

The right kidney is normal size (9.15 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with minimal loss of corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydroureter.

WEIGHT

125.2 lbs.

Adrenal Glands

The left adrenal gland is normal size (0.65 cm at cranial pole) (0.66 cm at caudal pole) (2.82 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.

INTERPRETED BY

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

The region of the right adrenal gland is evaluated. No obvious pathology is observed.

Spleen

The spleen is normal in size with a normal capsular contour. There is appropriate echogenicity and echotexture. No focal lesions are observed. Splenic vasculature is normal.

IMAGING PERFORMED BY

Dr. Adrienne Waffle

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. Luminal contents are anechoic. The cystic and common bile ducts are normal/not seen.

HOSPITAL NAME

Torch Lake VC

REFERRING VET

Dr. Adreianne Waffle

INVOICE

12425

DATE

10/26/21



PATIENT

Scout Sulz

thickness is normal with a normal layering pattern and appropriate mural detail. Discreet masses are not identified. The colonic wall is normal. No obstructive disease is noted.

Pancreas

SPECIES

Canine

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.

BREED

Weimaraner

Free Abdomen

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

SEX

Male, neutered

ULTRASONOGRAPHIC FINDINGS

- Overall unremarkable abdomen.

AGE

5 Yrs.

*An obvious cause for the patient's clinical signs is not identified in this study.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Baseline labwork including a CBC chemistry panel, urinalysis, T4 and urine culture and sensitivity is recommended if not already performed.
- A thorough neurologic evaluation is also recommended to assess for neurologic causes for incontinence.
- If this issue has been occurring since the patient was a puppy, evaluation for ectopic ureters (i.e., contrast CT scan) should also be considered, although ectopic ureters are rare in male dogs.
- If medical and neurologic causes have been excluded and urethral sphincter mechanism incompetence is high on the differential list, consider trying an extended-release version of phenylpropanolamine.

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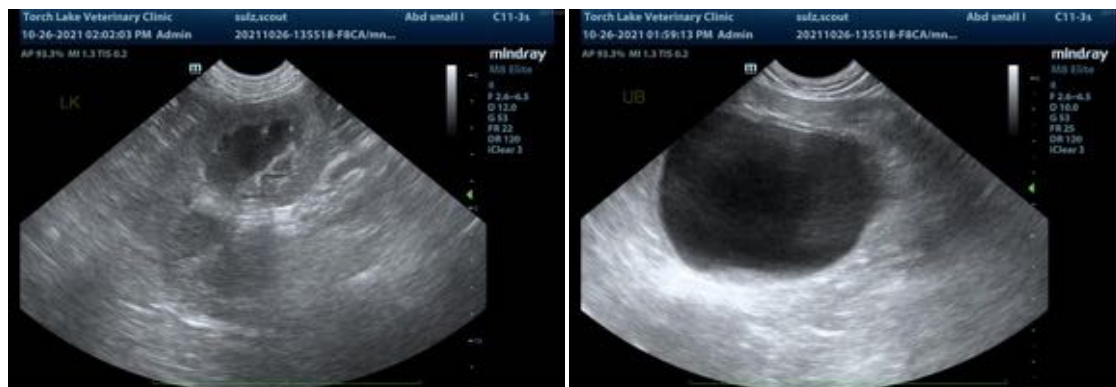
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PATIENT

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SPECIES

Canine

BREED

Weimaraner

SEX

Male, neutered

AGE

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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 ACVIM (*Small Animal Internal Medicine*)

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