IMAGING PERFORMED BY

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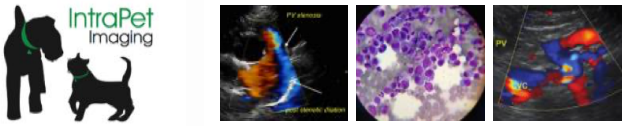

SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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DATE

10/5/2021

PATIENT

Peanut Howard

SPECIES

Canine

BREED

Shih Tzu

SEX

Male, neutered

AGE

2009

WEIGHT

15.4 lbs.

INTERPRETED BY

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

HOSPITAL NAME

Banfield Towson

REFERRING VET

Dr. Mike

INVOICE

12289

PRESENTING CLINICAL SIGNS

History: Treated for uti 8/31/21. Recheck u/a 9/20 wbc and rbc in urine, negative urine culture. Continued on/off accidents in home. Is under care of a cardiologist for murmur, not currently on cardiac medications. BAR; BCS 5/9; wt- 15.40 lbs /6.99 kg; mm-pink/moist; crt<2sec; eent- 4/4 dental tartar, 1/4 gingivitis; eyes: bilateral corneal scarring, nuclear sclerosis OU, immature cataracts OU; h/l- grade 3/6 systolic murmur loudest over left mitral, pulses strong and steady; abd-painful near bladder; s/c- nsf/long nails; pln- wnl; rectal - nsf

Lab Results: wbc, rbc in urine, negative urine culture. cbc/chem 8/31/21 nsf
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Not needed.
Stat Report: Not requested.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

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.

The prostate is subjectively prominent in size (2.21 cm length x 1.26 cm width) with a normal shape and smooth peripheral contours. A few small hyperechoic foci are observed within the parenchyma. The prostatic urethra is not overtly dilated.

The left kidney is normal in size (4.53 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 small nephroliths are visualized. There is no evidence of pyelectasia, infarcts or hydroureter. Renal vasculature is normal.

The right kidney is normal in size (4.22 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.

Adrenal Glands

The left adrenal gland is normal size (0.43 cm at cranial pole) (0.51 cm at caudal pole) (1.76 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.

The right adrenal gland is normal size (0.44 cm at cranial pole) (0.40 cm at caudal pole) (1.37 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.

Spleen

The spleen is overall subjectively normal in size (1.34 cm in width at the level of the hilus). The peripheral contours at the cranial aspect are undulating with a mild focal swelling cranial medially. The tail of the spleen is swollen/rounded with 1-2 hyperechoic foci. The remaining parenchyma is homogeneous. Splenic vasculature appears normal with no evidence of thrombosis.

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 moderate amount of mostly gravity dependent echogenic debris is observed within the lumen. The cystic and common bile ducts are normal/not seen.

Gastrointestinal

The gastric lumen is moderately distended with ingesta. The gastric wall is normal in thickness with a normal layering pattern. The small intestinal lumen is segmentally dilated with chyme. 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 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

- The mild prostatomegaly could be consistent with late-in-life neutering, an early neoplastic process or a normal variant for this patient.
- Bilateral age-related renal changes with dystrophic mineralization and non-obstructive left nephrolithiasis.
- The splenic swelling could be consistent with benign pathology (i.e., extramedullary hematopoiesis or lymphoid hyperplasia). Alternatively, emerging neoplasia (i.e., round cell tumor) is possible.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Given the patient's history and prostate changes, a urine BRAF test is recommended to screen for lower urinary tract neoplasia. Also consider empirical treatment for a urinary tract infection as occasionally pyelonephritis does not result in a positive urine culture.
- Regarding the spleen, the following options could be considered:
    1. Fine needle aspirate to assess for emerging neoplasia or…
    2. Consider a repeat ultrasound in 3-4 weeks to assess for changes/progression.
- Three-view thoracic radiographs are recommended to assess cardiopulmonary status.


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mindray
Spleen


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3 Dist 0.43 cm


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mindray
prostate
1 Dist 1.36 cm
2 Dist 2.21 cm


IntraPet Imaging SPIILLC IntraPet I...
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prostate
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2 Dist 2.21 cm


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Bladder


IntraPet Imaging SPIILLC IntraPet I...
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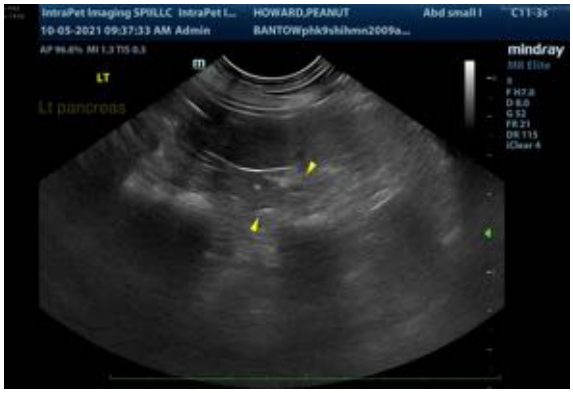
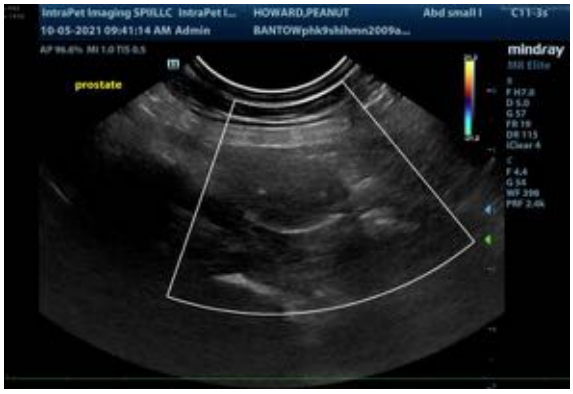
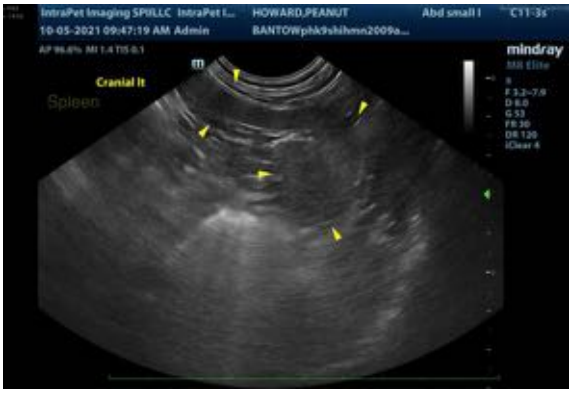
2 Dist 0.40 cm
3 Dist 0.44 cm







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.

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