



PATIENT

Dax Eiseinger

PRESENTING CLINICAL SIGNS

SPECIES

Canine

History: Dax Eisinger is a 5yr 1mo, M/N, Pitbull X weighing 65.8#. Scan today is to further evaluate chronic recurrence of UTIs. No radiographs have been performed. Neutered at 2y4mths old

BREED

Pitbull

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

SEX

Neutered Male

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. A small amount of suspended echogenic debris is observed within the lumen. 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 penile urethra is visualized. No obvious pathology is observed.

AGE

5 years 1 mo

The prostate is normal to slightly prominent in size (1.78 cm in width), with a slightly irregular shape and subtly homogenous parenchyma. At least 2 irregular foci of mineralizations (each measuring approximately 0.40 cm in diameter), are observed within the parenchyma. The prostatic urethra is not overtly dilated.

WEIGHT

65.8 lbs

The left kidney presented normal size (7.20 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis. Renal vasculature is normal.

INTERPRETED BY

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

The right kidney presented normal size (7.16 cm in length); normal shape and architecture with smooth peripheral margins. There is a normal 1:3 cortex to medulla ratio with normal corticomedullary distinction. There is no evidence of pyelectasia, nephroliths, infarcts or hydronephrosis.

IMAGING PERFORMED BY

Loetitia Saint-Jacques, RVT

Adrenal Glands

The left adrenal gland is normal size (0.60 cm at cranial pole) (0.61 cm at caudal pole) (2.94 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

Tahoe Integrative Care

The right adrenal gland is normal size (0.47 cm at caudal pole) (2.80 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. Wendy Robinson

Spleen

The spleen is normal in size with a normal capsular contour. There is appropriate echogenicity and echotexture. A small (<0.50 cm), hypoechoic nodule is observed near the caudal aspect. Splenic vasculature is normal.

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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

DATE

2/18/22



PATIENT

Dax Eiseinger regenerative pathology is evident. Vascular and biliary tracts are of normal volume with no evidence of congestion. No pathological hepatic lymphadenopathy observed.

SPECIES

Canine 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.

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Gastrointestinal

The stomach and intestine are free of stasis and exhibit normal peristaltic activity. The gastric lumen is not 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.

SEX

Neutered Male

Pancreas

The right limb is visible/prominent, with normal curvilinear peripheral contours. The parenchyma is largely isoechoic relative to surrounding omental fat. No focal lesions are observed. The pancreatic duct is not overtly dilated.

AGE

5 years 1 mo

Free Abdomen

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

WEIGHT

65.8 lbs

ULTRASONOGRAPHIC FINDINGS

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Primary Findings

- The mineralized foci within the prostatic urethra are likely a benign, incidental finding. However, occasionally, they can be seen with a neoplastic process. Prostatic neoplasia, however, would be unusual in a patient of this age.

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Secondary Findings

- The hypoechoic splenic nodule trends toward the benign with a lower possibility of emerging neoplasia.
- The pancreatic changes may be a normal variant for this patient or could be consistent with mild, chronic pancreatitis. Correlation with clinical findings is recommended.

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**An obvious cause for the patient's recurring urinary tract infections is not identified in this study.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

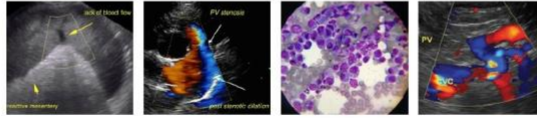
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- Consider abdominal/pelvic radiographs to further assess for urethroliths.
- A urine culture and sensitivity is recommended.
- A prolonged antibiotic course (i.e., 3-4 weeks), may be warranted, with a repeat urine culture and sensitivity 5-7 days after the last dose.



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- Baseline lab work, including a CBC Chemistry panel and T4 is also recommended to assess overall metabolic function.

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- If all tests prove inconclusive and the infections continue to recur, a contrast cystourethrogram may be useful in assessing for small structural lesions in the urinary bladder (i.e., diverticulum).

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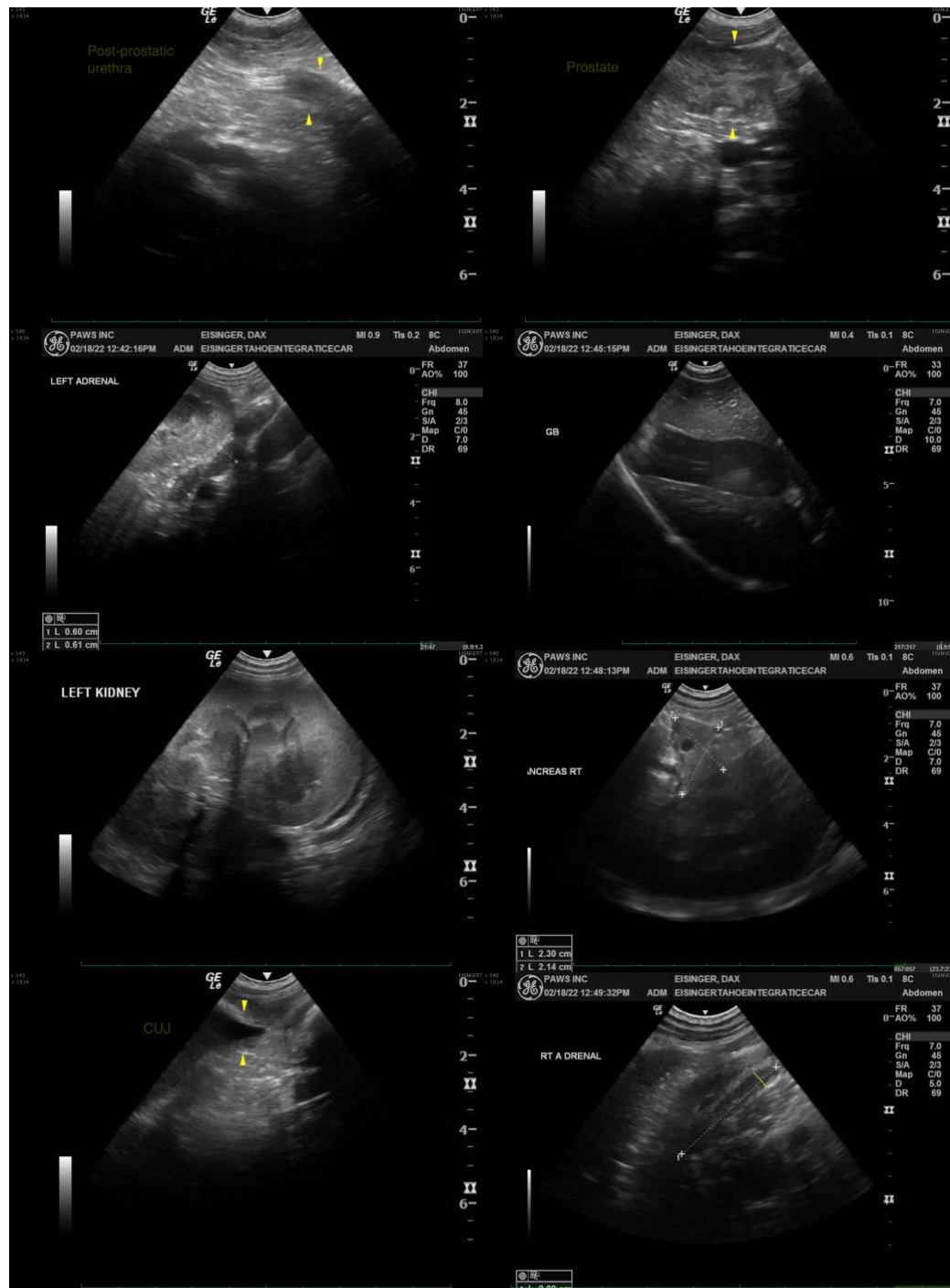
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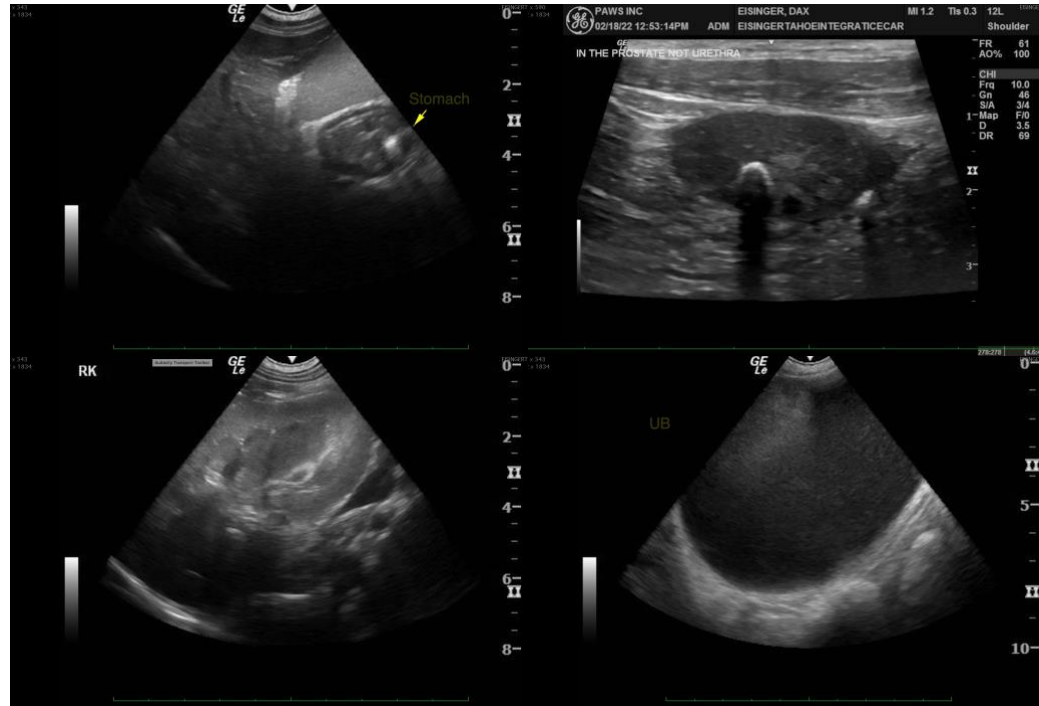
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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