**DATE PRESENTING CLINICAL SIGNS**

3/21/23

History of urate stones/unblocked and cystotomy on 1/18/23.

PATIENT

Finnley Peacock

Current Medications: On U/D and starting Allopurinol 15mg daily once medication is compounded.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: Not required to complete full diagnostic ultrasound.

Stat Report: Not requested.

Imaging Performed By: Stephanie Warga RDCS, RVT.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

**This study was limited to the urinary system. There is a potential for pathology in organs that were not visualized.

BREED

Yorkie

Urinary System

The urinary bladder is mildly distended. The wall in the region of the apex is mildly thickened and irregular with a 0.35 x 0.23 cm polypoid like nodule arising from the luminal surface. The remaining urinary bladder wall is normal in thickness with a smooth mucosal surface. No cystic calculi are observed. A small amount of suspended echogenic debris is observed within the lumen. The region of the trigone and the visible portion of the proximal urethra are normal.

SEX

Male, neutered

AGE

3/1/2018

The prostate is normal in size (0.63 cm in width) with normal curvilinear peripheral contours. A few pinpoint foci of mineralization are observed within the parenchyma. The remaining parenchyma is homogeneous. The prostatic urethra is not overtly dilated.

WEIGHT

6.7 lbs.

The left kidney is normal size (3.30 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. A few small non-obstructive nephroliths are visualized. There is no evidence of pyelectasia, infarcts or hydroureter. Renal vasculature is normal.

INTERPRETED BY

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

The right kidney is normal size (3.42 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. A few pinpoint foci of mineralization are observed. There is no evidence of pyelectasia, infarcts or hydroureter. Renal vasculature is normal.

HOSPITAL NAME

Edgewood VH

ULTRASONOGRAPHIC FINDINGS**REFERRING VET**

Dr. Wright

Primary Findings:

- The urinary bladder wall changes in the region of the apex could be consistent with a benign process (i.e., polypoid cystitis) or less likely, emerging neoplasia (i.e., transitional cell carcinoma). A benign process is favored, particularly in light of the history of cystic calculi.

INVOICE

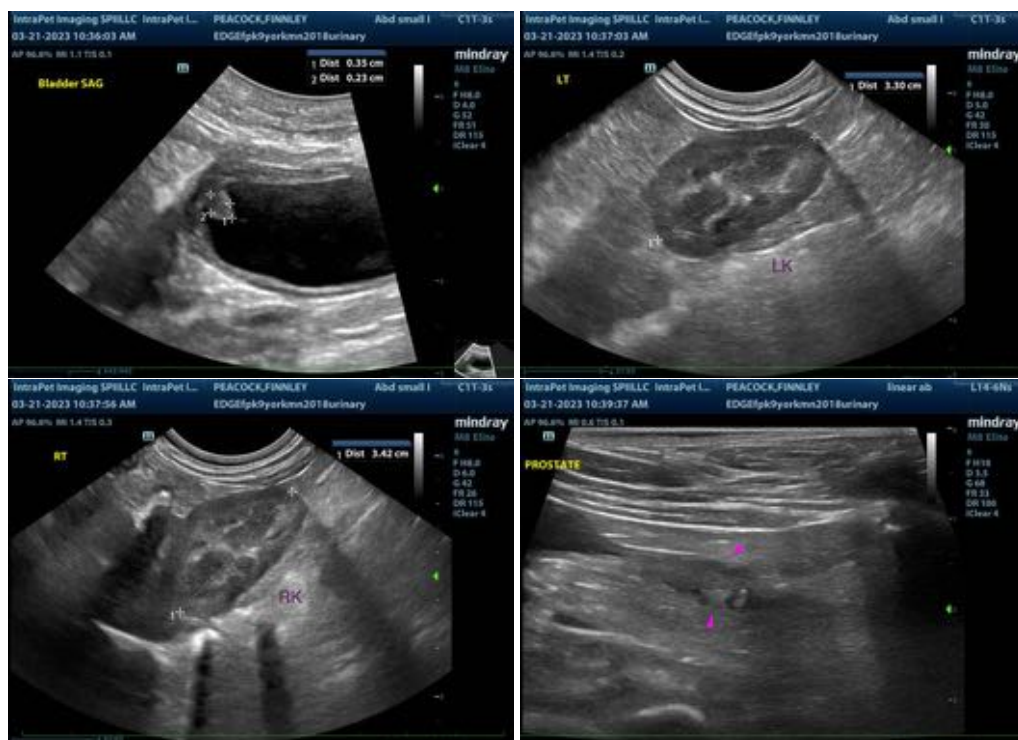
14775

Secondary Findings:

- Bilateral, non-obstructive nephrolithiasis, more pronounced in the left kidney.
- Small foci of mineralization in the prostatic parenchyma.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

- Consider a urine culture and sensitivity to assess for infection.
- Also consider a urine BRAF test to further evaluate for lower urinary tract neoplasia. A positive test confirms neoplasia. However, a negative test does not rule out the possibility of cancer.
- Given that urate stones were diagnosed in January, consider further evaluation for liver disease/congenital portosystemic shunt (i.e., pre and post prandial serum bile acids, full abdominal ultrasound +/- contrast abdominal CT scan).



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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