

**DATE PRESENTING CLINICAL SIGNS**

8/16/22

Dog was recently adopted and is a unilateral cryptorchid.

**PATIENT**

Guinness Cosgrove

Current Medications: None at this time.  
 Date of Previous IntraPet Ultrasound: No previous.  
 Sedation: Ace prior to sonographer arrival.  
 Stat Report: Not requested.  
 Imaging Performed By: Stephanie Warga RDCS, RVT.

**SPECIES**

Canine

**BREED**

Labrador

**SEX**

Male, intact

**AGE**

4/14/2021

**WEIGHT**

61 lbs.

**INTERPRETED BY**

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

**HOSPITAL NAME**

Fork VH

**REFERRING VET**

Dr. Doherty

**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.

**Urinary System**

The urinary bladder wall is normal in thickness and the mucosal surface is smooth. The bladder lumen is moderately distended with mostly 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 enlarged (2.68 cm in width) with a normal shape and smooth peripheral contours. The parenchyma is hyperechoic relative to surrounding omental fat. No focal lesions are observed. The prostatic urethra is not overtly dilated.

The left kidney is normal size (6.44 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 hydroureter. Renal vasculature is normal.

The right kidney is normal size (5.81 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 hydroureter. Renal vasculature is normal.

**Lymph Nodes**

Several prominent mid and caudal abdominal lymph nodes are seen.

**Other**

The left testicle is visualized within the scrotum and is subjectively normal in size (4.23 x 3.23 cm) with a normal shape and homogeneous parenchyma.

The right testicle is not definitively visualized.

**INVOICE**

13842

**ULTRASONOGRAPHIC FINDINGS**

- The prostate changes are as expected for a young intact male.
- The lymph node changes are most consistent with reactive lymphadenitis or lymphoid hyperplasia.
- The right testicle is not definitively visualized.

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Consider removal of the scrotal testicle as well as an abdominal exploratory to assess for and remove the right cryptorchid testicle is recommended. Referral to a board-certified surgeon as the cryptorchid testicle may be difficult to find. Alternatively, removal of the scrotal testicle can be performed, and a testosterone level obtained at a later date to determine if the patient is monorchid (male dog with only one testicle). It should be noted that true monorchids are rare.



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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