



PATIENT	PRESENTING CLINICAL SIGNS
Max Johnson	Max presented for peracute scrotal and rear limb swelling. Max is a breeding dog, but hasn't bred in a while. >6 months. No trauma, e/d good, no v/d and still u/d normally. UTD on vaccines, hw and flea prev. Elevated BUN 26, Creat 2.0 and Phos. 7.6 rest WNL
SPECIES	
Canine	
BREED	ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN
German Shepherd	Urinary System
	Urinary bladder is over distended with anechoic contents. It has normal uniform wall thickness (< 0.2 cm). No masses or cystoliths are observed.
SEX	The prostate is irregularly enlarged and measures 10.0 cm in diameter with an asymmetrical shape and heterogenous echotexture and echogenicity. It has poor demarcation from surrounding tissue.
Male	Encroachment into the urethra and trigone of the urinary bladder are noted. The prostate is surrounded by disrupted, undifferentiated tissue/regional inflammation.
AGE	Both kidneys are normal in size. The left kidney measures 7.6 cm and the right kidney measures 8.8 cm. They have normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. However, both kidneys have a distorted shape/margination caused by multi-focal, hypoechoic nodules throughout the cortex. The nodules measure between 1-1.5 cm. In the right kidney marked pyelectasia and proximal ureter are also noted. There are no mineral or infarcts observed.
4 years	
WEIGHT	Adrenal Glands
85 lbs	Left adrenal gland is not visualized; however, there was no pathology in the area of the adrenal gland.
INTERPRETED BY	Right adrenal gland is normal in size (2.9 cm long x 0.9 cm at cranial pole and 0.77 cm at caudal pole), shape and contour. Corticomedullary structure is unremarkable.
Beth Johnson, DVM DACVIM	
IMAGING PERFORMED BY	Spleen
Dr. Hornbuckle	Spleen is subjectively normal in size with normal smooth margins. Parenchyma is normal in echogenicity and echotexture. Several small, hypoechoic nodules were noted throughout the parenchyma. Splenic vasculature appears normal.
HOSPITAL NAME	
Golden Isles AH	
REFERRING VET	Liver
Dr. Hornbuckle	Liver is subjectively normal in size. Margins are sharp and smooth. It has normal homogenous echotexture and normal echogenicity. No focal lesions are observed. Visible vasculature appears normal. Gallbladder is mildly distended with anechoic contents. The wall is smooth without visible thickening. There is no evidence of common bile duct dilation.
INVOICE	
95319	Gastrointestinal
DATE	The visible gastric wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm). The stomach is empty.
1/18/22	



PATIENT

Max Johnson

The small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). There are no luminal contents noted within small intestines.

Colon is normal in wall thickness (< 0.2 cm) and layering.

SPECIES

Canine

Pancreas

Pancreas has normal homogenous echotexture and is normal in echogenicity and smooth margination. There is no evidence of peripancreatic inflammation.

BREED

German Shepherd

Free Abdomen

SEX

Male

There is marked medial iliac /sublumbar lymphadenopathy. The nodes are hypoechoic, round and heterogenous.

AGE

4 years

ULTRASONOGRAPHIC FINDINGS

Primary Findings

WEIGHT

85 lbs

Prostatic neoplasia. This is most consistent with infiltrative round cell neoplasia; however, carcinoma cannot be ruled out. The prostatic mass is surrounded by regional inflammation likely metastatic lymphadenopathy.

Hypoechoic nodules throughout both renal cortices. This is consistent with metastatic disease.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Pyelectasia and hydroureter of the right kidney. This is consistent with post renal obstruction caused by the prostatic mass.

Concurrent urinary bladder over distension. This is consistent with post renal obstruction caused by the prostatic mass.

IMAGING PERFORMED BY

Dr. Hornbuckle

Hypoechoic splenic nodules. Benign nodular hyperplasia or extramedullary hematopoiesis as well as metastatic neoplasia are considered differentials.

Scrotal swelling and epididymitis.

HOSPITAL NAME

Golden Isles AH

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

REFERRING VET

Dr. Hornbuckle

The top differential for this patient's combination of lesions is infiltrative round cell neoplasia with metastatic disease to the kidneys, lymph nodes and possibly the spleen. Recommendations include thoracic radiographs to further assess cardiopulmonary status and look for further metastatic disease if not already performed. A FNA of the medial iliac/sublumbar lymph nodes and prostate to look for round cell neoplasia. FNA of the renal cortices could also be performed, but is confirmed unnecessary if a diagnosis is obtained from the prostate and/or lymph nodes. If a diagnosis of round cell neoplasia is not obtained submission of urine to look for BRAF gene mutation, which is associated with urinary bladder/prostate carcinoma can be considered. In the meantime, empirical therapy with anti-inflammatory steroids given the suspicion for round cell neoplasia and gastric protectants can be considered.

INVOICE

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PATIENT

Max Johnson

SPECIES

Canine

BREED

German Shepherd

SEX

Male

AGE

4 years

WEIGHT

85 lbs

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Dr. Hornbuckle

HOSPITAL NAME

Golden Isles AH

REFERRING VET

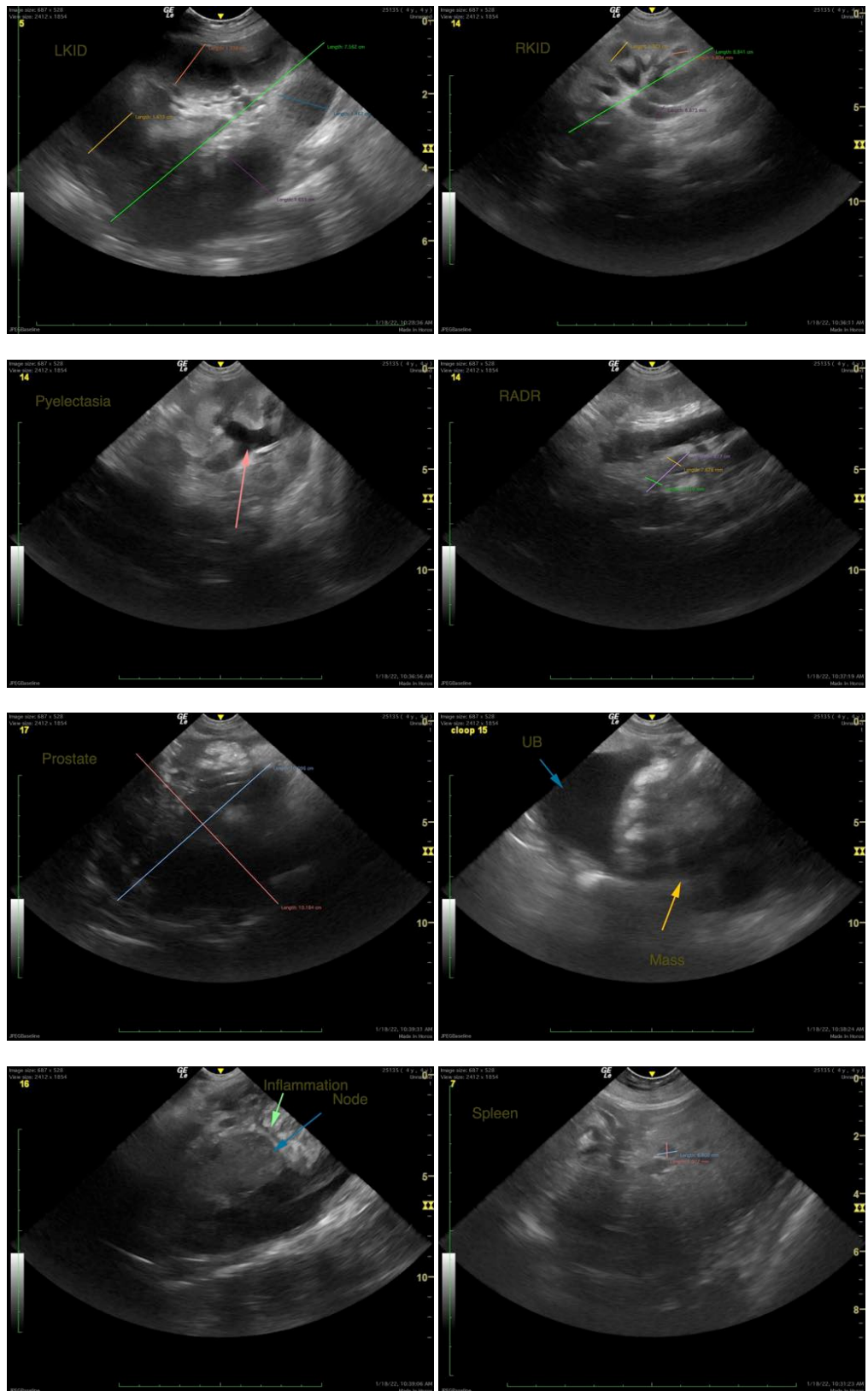
Dr. Hornbuckle

INVOICE

95319

DATE

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PATIENT

Max Johnson

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.

SPECIES

Canine

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.

BREED

German Shepherd

Beth Johnson, DVM DACVIM

Beth.Johnson@SonoPath.com

SEX

Male

AGE

4 years

WEIGHT

85 lbs

INTERPRETED BY

Beth Johnson, DVM
DACVIM

**IMAGING
PERFORMED BY**

Dr. Hornbuckle

HOSPITAL NAME

Golden Isles AH

REFERRING VET

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