



PATIENT

Kendrick Arenas

PRESENTING CLINICAL SIGNS

Pt presented for evaluation of hematuria and lethargy. While doing abdominal radiographs a mass effect on the cranial abdomen was seen and an abdominal ultrasound was recommended and performed today.

SPECIES

Canine

Abnormal PE/Chem/CBC/UA Results: CBC: anemia, neutrophilia Chem: BUN high T4 low - euthyroid sick SDMA normal Urinalysis: wbc, rbc, rods+, caox crystal Fecal: Hook+ Radiographs: Large round soft opacity structure mid abdomen caudal to liver right side, spondylosis, large bladder and prostate.

BREED

Mixed

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

SEX

Male

Urinary bladder is adequately distended. It has a normal uniform wall thickness. Contents include primarily anechoic fluid with occasional echogenic non-shadowing debris, most consistent with exfoliated cells, mucous and/or small blood clots. Both sterile inflammation as well as urinary tract infection can also present with echogenic debris. No masses or cystoliths are observed. The trigone and visible pelvic urethra are normal in thickness with a smooth mucosal surface.

AGE

9 Years

Prostate is symmetrically enlarged (4.3 cm across) with smooth margins that are well differentiated from surrounding tissue. Normal bilobed shape is maintained. Parenchyma is heterogenous with scattered hyperechoic foci present. No mineral or cysts are noted.

WEIGHT

47 Pounds

The right kidney is normal in size (8.0 cm long). The caudal pole has normal architecture appreciated, characterized by smooth margination, normal 1:3 cortex to medulla ratio, and appropriate corticomedullary distinction. At the level of the cranial pole, there is an approximately 6.0 cm x 8.0 cm heterogeneous, partially cavitated/possibly fluid filled mass disrupting normal architecture and normal shape.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

The left kidney is normal in size (5.68 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. There is no evidence of pyelectasia, mineral or infarcts observed.

IMAGING PERFORMED BY

Dr. G. Ferrer

Adrenal Glands

The area of the right adrenal gland is examined without evident adrenal gland pathology.

HOSPITAL NAME

Paseos Vet Center

The left adrenal gland is normal in size (2.2 cm long x 0.58 cm at the cranial pole and 0.65 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Spleen

REFERRING VET

Dr. Walker

The spleen is subjectively normal in size with a normal smooth capsular contour. Parenchyma is appropriately finely textured and homogenous with normal echogenicity relative to surrounding tissue (hyperechoic to liver). No focal nodules or masses are observed. Splenic vasculature appears normal.

INVOICE

43891

Liver

The liver is subjectively normal in size with normal smooth curvilinear peripheral contour. Parenchyma is appropriately hypoechoic to the spleen in echogenicity and appropriately mildly coarse and homogenous in echotexture. No focal lesions are observed. Visible vasculature and biliary tree appear normal without distension or congestion.

DATE

1/4/23



PATIENT

Kendrick Arenas

The gallbladder is non-distended in size. The wall is smooth without visible thickening. Luminal contents are primarily anechoic. There is no evidence of cystic or common bile duct dilation.

Gastrointestinal

SPECIES

Canine

The visible stomach wall is normal in thickness and layering. The lumen of the stomach is mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.

BREED

Mixed

The visible small intestines are normal in wall thickness and layering. Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is mildly distended with echogenic non-shadowing luminal contents and gas consistent with normal ingesta. There is no evidence of obstruction, foreign material or infiltrative disease.

SEX

Male

The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.

Pancreas

AGE

9 Years

The pancreatic parenchyma is appropriately isoechoic to surrounding tissue. Visible capsule is smooth and normal in contour. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.

WEIGHT

47 Pounds

Free Abdomen

There is a scant amount of anechoic free fluid, primarily in the caudal abdomen around the urinary bladder.

INTERPRETED BY

Beth Johnson, DVM
DACVIM

The medial iliac lymph nodes are prominent in size with swollen capsular contour. Normal elongated shape (length to width ratio) is maintained. There is no loss of parenchymal detail.

ULTRASONOGRAPHIC FINDINGS

IMAGING PERFORMED BY

Dr. G. Ferrer

- **Heterogeneous, possibly fluid-filled mass associated with the right kidney** – Differentials include an abscess or hematoma, or possibly infiltrative neoplasia with a necrotic center.
- **Benign Prostatic Hyperplasia** – Prostatic findings are most consistent with Benign Prostatic Hyperplasia (BPH) and hyperechoic foci consistent with increased vascularity and fibrosis often associated with BPH. Active prostatitis cannot be ruled out. Infiltrative neoplasia cannot be ruled out but is considered less likely.
- **Reactive medial iliac lymph nodes** – infiltrative neoplastic disease cannot be ruled out but is considered less likely.
- Large amount of echogenic urinary bladder debris

HOSPITAL NAME

Paseos Vet Center

REFERRING VET

Dr. Walker

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

INVOICE

43891

Three view thoracic radiographs are recommended for further assessment of cardio-pulmonary status as well as to further evaluate for any evidence of metastatic disease, if not recently evaluated.

DATE

1/4/23

Given this patient's suspected bacteriuria, a culture of the urine is recommended if not already evaluated.



PATIENT

Kendrick Arenas

Additionally, a fine needle aspirate of the mass associated with the right kidney is recommended if patient's coagulation status is appropriate, for both cytologic evaluation as well as culture and sensitivity.

SPECIES

Canine

The reported hematuria is likely secondary to the suspected urinary tract infection and potentially related to the right kidney mass. However, concurrent bacterial prostatitis cannot be definitively ruled out, and ultimately patient neutering may be recommended to prevent progression.

BREED

Mixed

SEX

Male

AGE

9 Years

WEIGHT

47 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Dr. G. Ferrer

HOSPITAL NAME

Paseos Vet Center

REFERRING VET

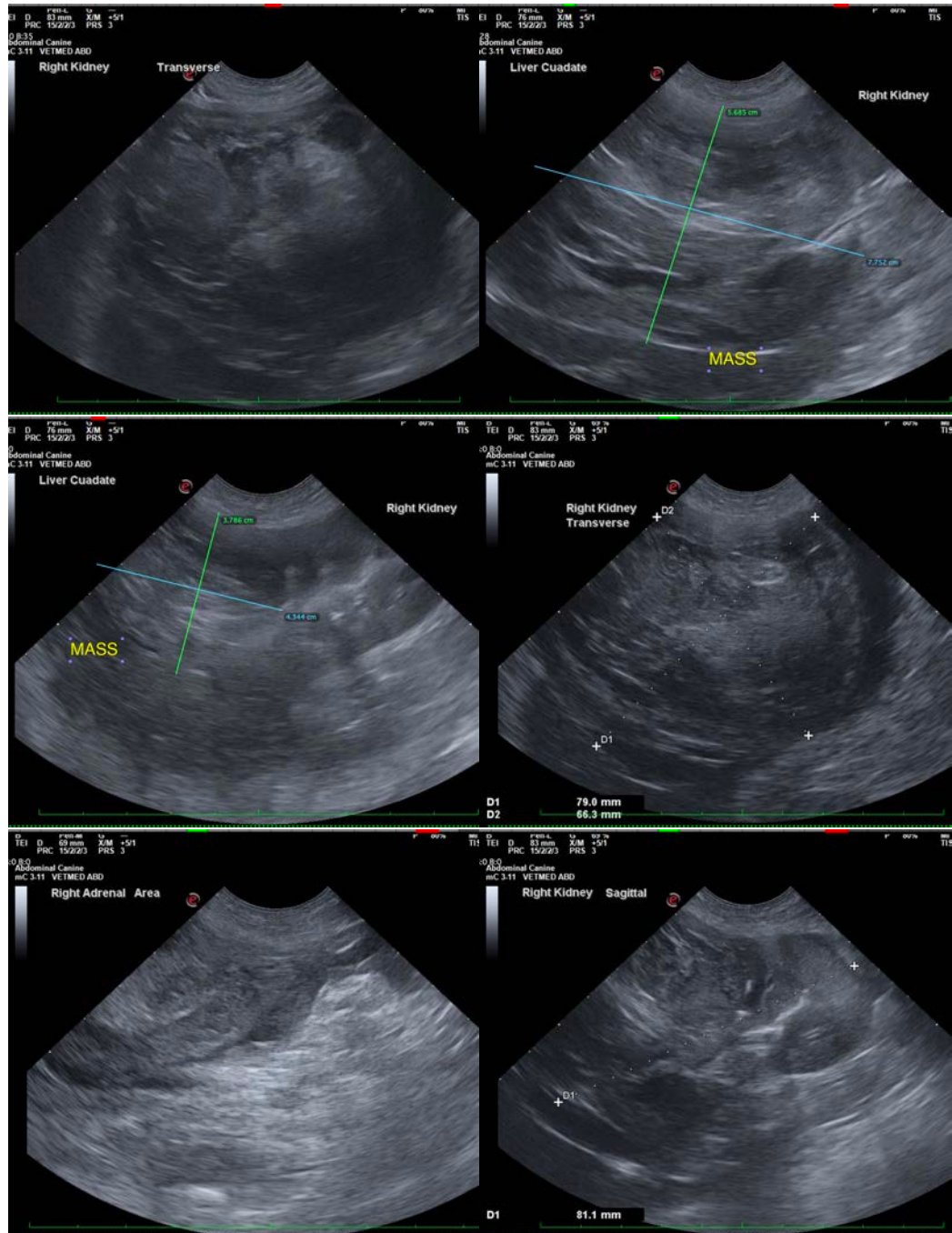
Dr. Walker

INVOICE

43891

DATE

1/4/23





PATIENT

Kendrick Arenas

SPECIES

Canine

BREED

Mixed

SEX

Male

AGE

9 Years

WEIGHT

47 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Dr. G. Ferrer

HOSPITAL NAME

Paseos Vet Center

REFERRING VET

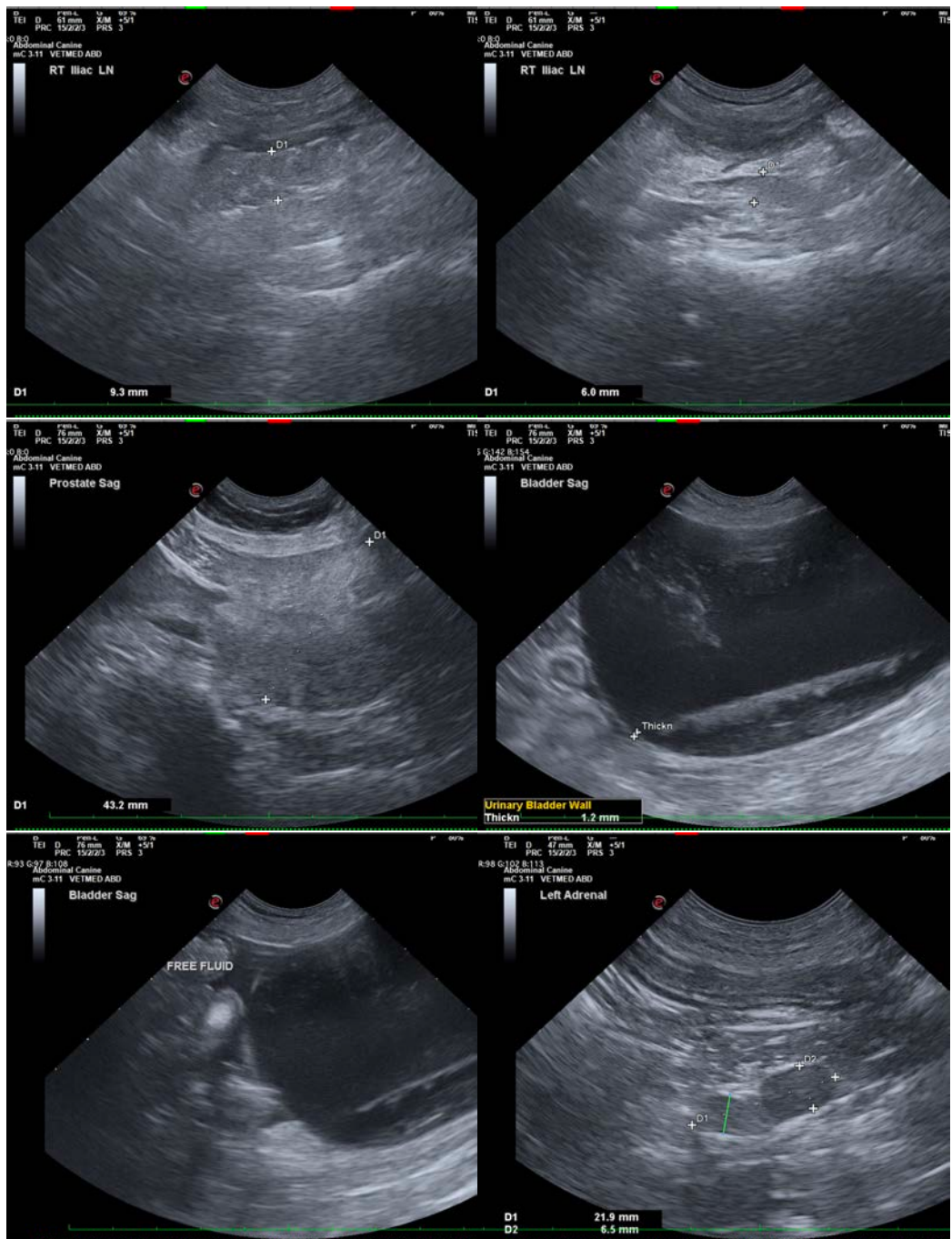
Dr. Walker

INVOICE

43891

DATE

1/4/23





PATIENT

Kendrick Arenas

SPECIES

Canine

BREED

Mixed

SEX

Male

AGE

9 Years

WEIGHT

47 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

**IMAGING
PERFORMED BY**

Dr. G. Ferrer

HOSPITAL NAME

Paseos Vet Center

REFERRING VET

Dr. Walker

INVOICE

43891

DATE

1/4/23



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.

Beth Johnson, DVM, DACVIM
Beth.Johnson@sonopath.com