



PATIENT

Blue Shannon

SPECIES

Canine

BREED

Mixed

SEX

Neutered Male

AGE

6 Years

WEIGHT

14 Pounds

INTERPRETED BY

Beth Johnson, DVM
DACVIM

IMAGING PERFORMED BY

Kelly Vazquez

HOSPITAL NAME

Our House Call Vet

REFERRING VET

Dr. Mazzola

INVOICE

38462

DATE

6/7/22

PRESENTING CLINICAL SIGNS

Patient with history of IMHA 2 years ago, presents for persistent hematuria on urinalysis. No PU/PD. Current meds: Azothloprine 2 x a week and Denamarin.

Abnormal PE/Chem/CBC/UA Results: 6/7/22: ALT 182, SAP 364, GGT 27. U/A: 2+ blood, 4-10 RBC/hpf, 0-1 CaOx crystals, USG: 1.066.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

There is no overt pathology in the area of the urinary bladder, but reassessment of a fully distended bladder is recommended, as the bladder is almost empty in these images, resulting in a thick, irregular appearance to the bladder wall.

Prostate (neutered) is normal in size, echotexture and echogenicity for a neutered male.

The right kidney is normal in size (2.76 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.

The left kidney is normal in size (3.5 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.

Adrenal Glands

The right adrenal gland is normal in size (1.3 cm long x 0.53 cm at the cranial pole and 0.39 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

The left adrenal gland is normal in size (1.26 cm long x 0.44 cm at the cranial pole and 0.37 cm at the caudal pole), shape and contour. Corticomedullary structure is unremarkable. Visible surrounding vasculature appears normal.

Spleen

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). A 0.6 cm round, anechoic cystic lesion is present near the tail of the spleen with no capsule disruption. Splenic vasculature appears normal.

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.

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

The stomach wall is normal in thickness (canine < 0.5 cm and feline < 0.4 cm) and layering. The lumen of the stomach is empty with no evidence of obstruction, foreign material or infiltrative disease. Pyloric outflow tract appears patent.



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The visible small intestines are normal in wall thickness and layering (canine duodenum < 0.5 cm and feline duodenum < 0.4 cm; other < 0.3 cm). Small intestinal motility appears adequate (1-3 contractions per min). The lumen of the small intestine is empty with no evidence of obstruction, foreign material or infiltrative disease.

SPECIES

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

Pancreas

BREED

Mixed

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.

SEX

Neutered Male

Free Abdomen

No free fluid, including no pericardial effusion. There is no apparent lymphadenopathy.

ULTRASONOGRAPHIC FINDINGS

AGE

6 Years

- Underdistended urinary bladder, but no overt pathology noted.
- Anechoic splenic nodule – most consistent with benign cyst or hematoma.
- Otherwise unremarkable abdomen.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

WEIGHT

14 Pounds

Urine culture is recommended, given the history of immunosuppression to rule out an occult urinary tract infection.

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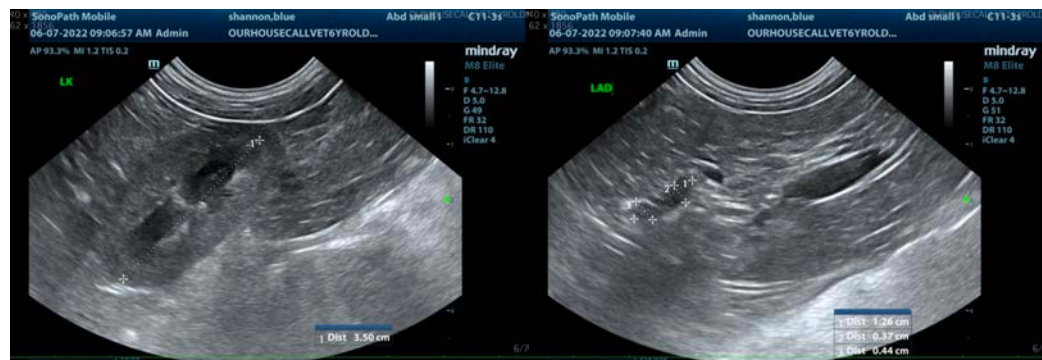
Beth Johnson, DVM
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If a urinary tract infection is not diagnosed, diet change could be considered to a urinary bladder health/crystal prevention diet such as Royal Canine S/O or similar diet.

Given this patient's history, full assessment of coagulation status is also recommended to rule out a coagulopathy as the cause of hematuria.

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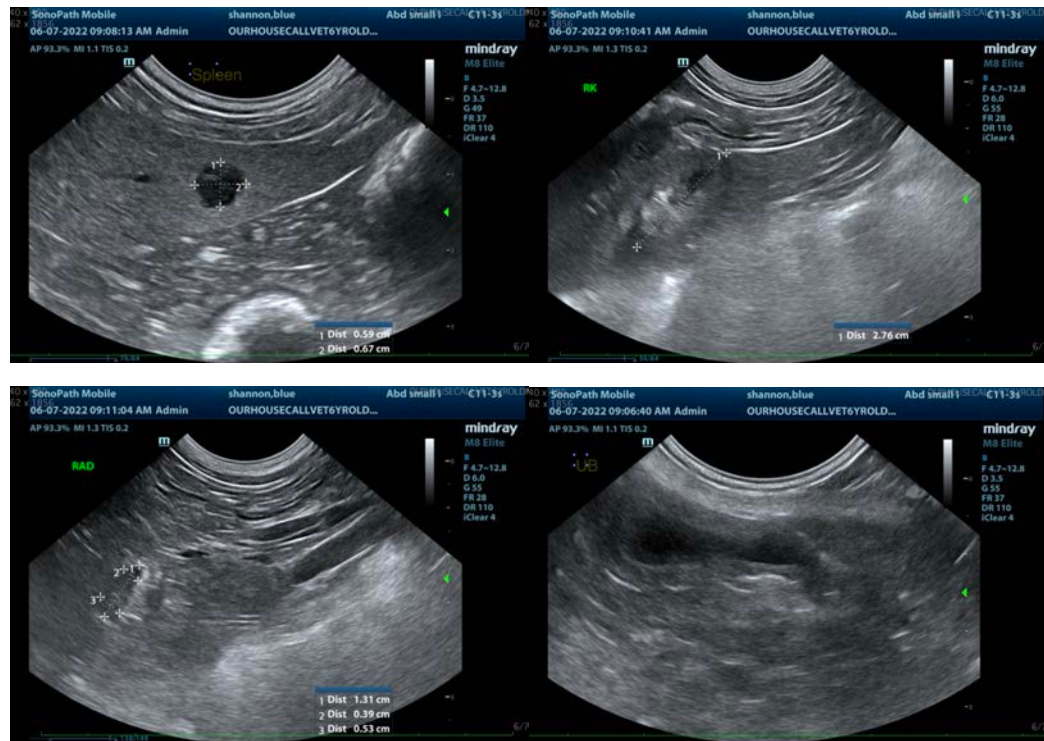
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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