

PATIENT

HangSoon Kim

PRESENTING CLINICAL SIGNS

History: Patient has been presenting to hospital several times for Frequent urination as well on and off blood in urine, and reoccurring UTI's

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Beagle

Urinary bladder is adequately distended with primarily anechoic contents and occasional echogenic non-shadowing debris. Apical urinary bladder wall is diffusely thick (0.54 cm) at the apex. Along the dorsal wall there is a 1.1 cm long at the base x 0.68 cm into the lumen, echogenic opacity that was non-shadowing. Differentials include tissue versus accumulated settled mucous, crystals and debris. Mucosa is hyperechoic and irregular. No masses or cystoliths are observed. The trigone and visible pelvic urethra are normal thickness with a smooth mucosal surface.

SEX

Female

AGE

18 years

Left kidney is normal is size (4.43 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. Small cortical cyst was noted bilaterally. There is no evidence of pyelectasia, mineral or infarcts observed.

WEIGHT

17 lbs

Right kidney is normal is size (4.0 cm), shape and echogenicity. It has smooth peripheral margination. There is a normal 1:3 cortex to medulla ratio with appropriate corticomedullary distinction. Small cortical cyst was noted bilaterally. There is no evidence of pyelectasia, mineral or infarcts observed.

Adrenal Glands

INTERPRETED BY

Beth Johnson, DVM
DACVIM

Left adrenal gland is normal in size (1.8 cm long x 0.48 cm wide), shape and overall architecture, echogenicity and echotexture. Visible surrounding vasculature appears normal.

Right adrenal gland is unable to be visualized in these images.

IMAGING PERFORMED BY

Dr. Kim

Spleen

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.

HOSPITAL NAME

Ridgefield Park AH

Liver

REFERRING VET

Dr. Kim

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.

INVOICE

39595

Gallbladder is moderately distended with anechoic bile as well as suspended and gravity dependent echogenic debris. The wall is smooth without visible thickening. There is no evidence of cystic or CBD dilation. There is no evidence of effusion or inflammation.

DATE

9/24/22



PATIENT	<i>Gastrointestinal</i>
HangSoon Kim	The visible stomach wall is normal in thickness and layering. The lumen of the stomach is mildly distended with very echogenic reverberation artifact from intraluminal gas. There is no evidence of obstruction, foreign material or infiltrative disease; however, complete visualization of far wall is partially inhibited by gas. Pyloric outflow tract appears patent.
SPECIES	
Canine	
BREED	
Beagle	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 empty with no evidence of obstruction, foreign material or infiltrative disease.
SEX	
Female	The visible colon is normal in wall thickness (< 0.2 cm) and layering. Contents are consistent with normal formed feces and gas.
AGE	
18 years	<i>Pancreas</i>
	The observed pancreas appears appropriately isoechoic to surrounding omental fat. Visible capsule is smooth and normal in contour. Visible pancreatic parenchyma is homogenous and unremarkable. There is no visible pancreatic duct dilation. There is no evidence of active peripancreatic inflammation.
WEIGHT	
17 lbs	<i>Free Abdomen</i>
	There is no evidence of free peritoneal effusion noted in these images.
INTERPRETED BY	There is no apparent lymphadenopathy noted in these images.
Beth Johnson, DVM DACVIM	
IMAGING PERFORMED BY	ULTRASONOGRAPHIC FINDINGS
Dr. Kim	Primary Findings
HOSPITAL NAME	Chronic Cystitis - Urinary bladder wall changes are most consistent with chronic cystitis. Infiltrative neoplasia cannot be ruled out but is considered less likely give the location and diffuse nature of the changes. An echogenic foci was noted along the dorsal wall. Rule outs include tissue including benign inflammatory tissue as well as infiltrative neoplasia cannot be ruled out versus accumulated settled debris, mucous, crystals, sand, etc.
Ridgefield Park AH	
REFERRING VET	Secondary Findings
Dr. Kim	Gallbladder debris - Cholecystic debris is of unknown clinical significance. It can be seen with biliary stasis from fasting or illness. Cholecystic debris is not necessarily related to hepatobiliary disease. Echogenic bile is most commonly an incidental finding in dogs and should be interpreted in combination with clinical signs such as nausea, inappetence, cranial abdominal discomfort and/or laboratory changes such as increased ALP and/or increased Tbili.
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WEIGHT

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Beth Johnson, DVM
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IMAGING PERFORMED BY

Dr. Kim

HOSPITAL NAME

Ridgefield Park AH

REFERRING VET

Dr. Kim

INVOICE

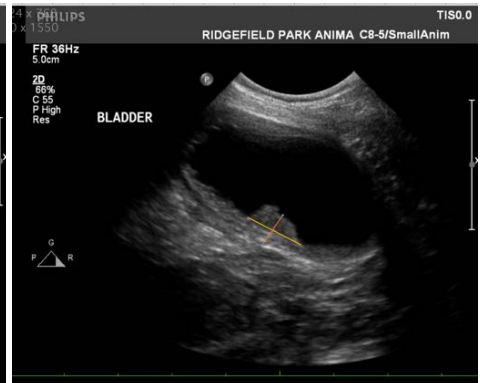
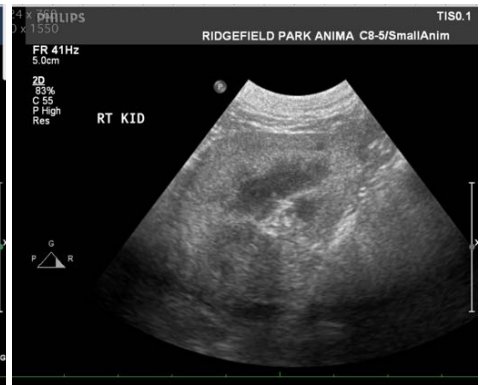
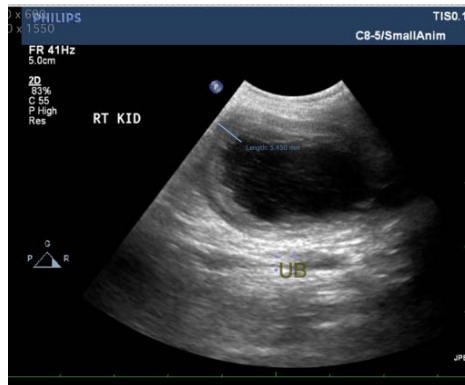
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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Urinalysis and urine culture, if indicated based on urinalysis results, are recommended. Submission of urine to look for BRAF gene mutation, which is associated with urinary bladder cancer, could be considered. Other diagnostic options include traumatic catheterization, fine needle aspirate (with small risk of tumor seeding/trailing) or cystoscopy for further sampling.





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HangSoon Kim

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.

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.

Beth Johnson, DVM DACVIM

BREED

Beagle

Beth.Johnson@SonoPath.com

SEX

Female

AGE

18 years

WEIGHT

17 lbs

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DACVIM

**IMAGING
PERFORMED BY**

Dr. Kim

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