**DATE**

10/24/22

PRESENTING CLINICAL SIGNS

Seen on 10/16-- UO-- Prostatomegaly, no obvious stones, urine inactive. US not pursued, did well with baytril, NSAID-- urinated after u. cath pulled Presented to RDVM today. Hard, large painful bladder-- large prostate on palpation- painful. Passed 8 French red rubber catheter -Drained urine- felt gritty material while passing, blood clots observed-- still no obvious radioopaque stones. Lactulose 10 mg/15 ml- 5.5 ml by mouth every 6-8 hours till stool is soft Urinary sediment-Å 2+ RBC, 2WBC, Spikey crystal formation R/O tyrosine crystals (secondary to liver disease) Recommend referral to ER for u. cath. Neuter scheduled for Friday 10/28/22. Recommend ultrasound.

PATIENT

Rambo Lewis

Current Medications: metronidazole, baytril, gabapentin, u-cath in place, carprofen, lactulose

SPECIES

Canine

Lab Results: See attached.

Date of Previous IntraPet Ultrasound: No previous.

Sedation: IV Torb.

BREED

Pitbull

Stat Report: Not requested.

Imaging Performed By: Rachel Brillhart, RDMS,

SEX

Intact male

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**Urinary System**

The **urinary bladder** revealed a minimal amount of urine with a Foley catheter in place and chronic mucosal and submucosal remodeling with micropolypoid changes.

AGE

1/25/17

The right testicle was subnormal in size measuring 2.4 cm. The left testicle was enlarged and measured 2.65 cm with a moderate amount of remodeling. Prostate revealed heterogenous parenchymal changes and measured 5.2 x 4.6 cm. The prostate was hypoechoic and irregular with parenchymal changes with pericapsular inflammatory pattern.

WEIGHT

49.5 lbs

The **kidneys** revealed normal size and structure, corticomedullary definition and ratio for this age. The cortices presented largely uniform texture with normal echogenic relationship to liver and spleen. Medullary structure differed distinctly from the cortex. The capsules were acceptably uniform without significant irregularities. Pyelectasia was noted in the right kidney measuring 0.26 cm and 0.21 cm in the left kidney. The right kidney measured 6.31 cm. The left kidney measured 6.7 cm.

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having normal shape, size, position and echogenicity for this breed. The phrenic vasculature, glandular echogenicity and detail were unremarkable. Capsule, cortex, and medullary definition were normal for this age patient. The right adrenal gland measured 2.22 x 0.96 cm at the cranial pole and 0.79 cm at the caudal pole.

HOSPITAL NAME

Animal Emergency
Hospital

REFERRING VET

Dr. King

Spleen

The **spleen** presented a smooth homogeneous parenchyma hyperechoic to liver and renal cortical parenchyma. The capsule was smooth without noticeable expansion or deviation from within the spleen or adjacent pathology. The splenic vasculature demonstrated normal volume without signs of congestion or thrombosis. No sonographic evidence of acute or chronic inflammatory, neoplastic, or infarctual changes was noted.

INVOICE

42096

Liver

The **liver** images submitted revealed subjectively normal liver size, contour, and structure. Parenchymal echogenicity was naturally coarse and hypoechoic to the spleen. Vascular and biliary tracts were of normal volume with no evidence of congestion. The gallbladder presented acceptably thin walls with primarily anechoic content. The cystic and common bile ducts were normal. No pathological hepatic lymphadenopathy

was evident. No overt structural evidence of inflammatory, infiltrative or regenerative pathology was evident.

Gastrointestinal

Examination of the **gastrointestinal tract** revealed a stomach and intestine free of stasis, of normal wall thickness, acceptable curvilinear mural detail, and peristaltic activity. Small and large intestine demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

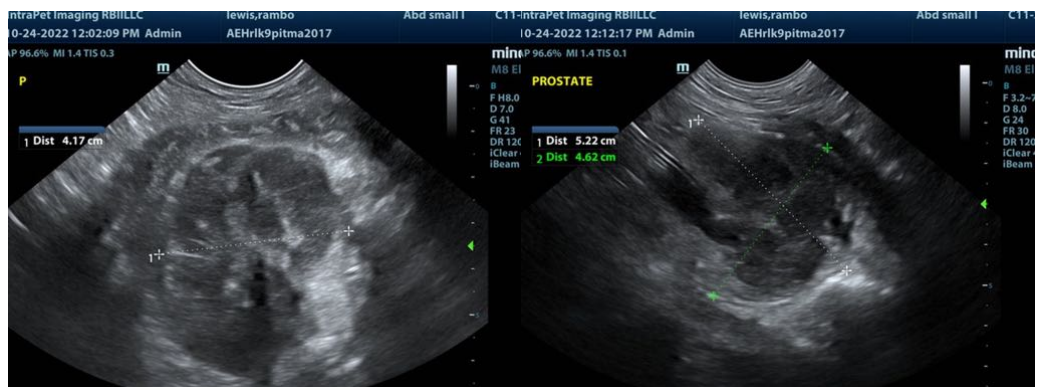
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

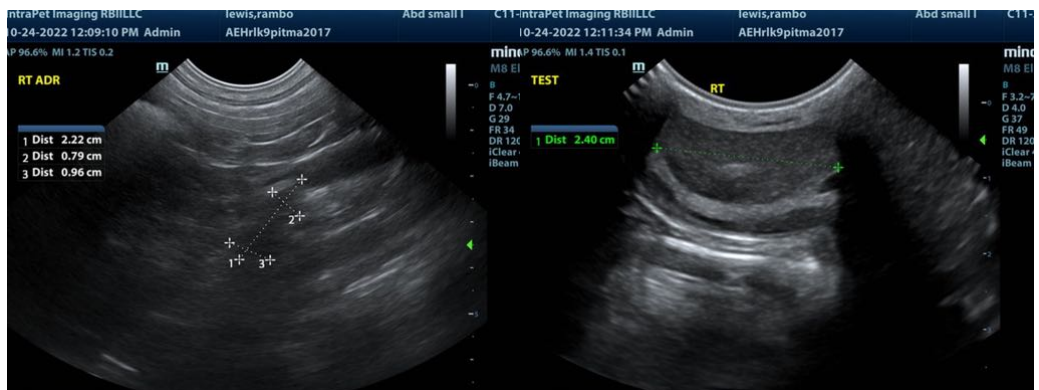
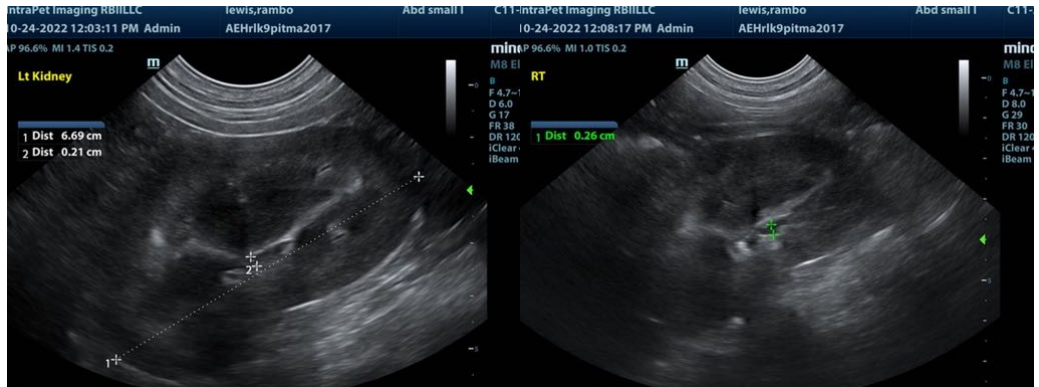
ULTRASONOGRAPHIC FINDINGS

Severe prostatitis pattern.
Chronic cystitis.
Likely pyelonephritis.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

FNA is recommended to rule out underlying round cell neoplasia or prostatic carcinoma. Neutering is essential in this patient if cytology reveals no evident neoplasia. Urine culture and sensitivity as well as 4-6 week antibiotic therapy is recommended post neutered. **Prognosis** depends on cytology and culture results. Ultrasound-guided traumatic catheterization of the prostate could also be considered with cytology +/- culture. However, culture results may be difficult to interpret and contamination may be an issue given the current Foley catheter placement. Therefore, this should be interpreted with caution.





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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