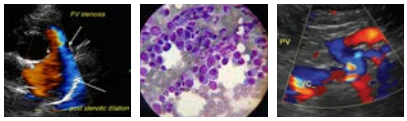
IMAGING PERFORMED BY

IntraPet.com



SonoPath
Clinical Sonography & Telecytology
EDUCATIONAL TELECONSULTATION SERVICES™
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DATE

11/12/21

PATIENT

Winston Dissen

SPECIES

Canine

BREED

Bulldog X

SEX

Neutered Male

AGE

2010

WEIGHT

108 Pounds

INTERPRETED BY

Eric Lindquist, DMV DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Stephanie Pearce RDCS, RVT

HOSPITAL NAME

Fullerton

REFERRING VET

Dr. Unger

INVOICE

29809

PRESENTING CLINICAL SIGNS

History: Presented for dribbling urine. Urine seemed discolored.
Treated for UTI 10/15 with cefpodoxime. Not currently on antibiotics when discolored urine seen. Exam unremarkable. Fast scan bladder ultrasound showed mild diffuse thickening of the bladder and a mass effect caudal to the bladder. Another UA pending.
Current Medications: Baytril 136 mg 2 T sid x 7 D started 11/4. Further meds pending UA and Aus.
Galliprant 100 mg SID for arthritis.
Dasuqiun daily.
Lab Results: mild pyuria and hematuria 10/15 with cocci.
Date of Previous IntraPet Ultrasound: No previous.
Sedation: Torbugesic and Midazolam IV.
Stat Report: Not requested.

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder**, trigone, and pelvic urethra presented normal thicknesses and normal tone. The ureters were not visible which is normal. No uroliths or sediment were visualized and anechoic urine was present. No evidence of inflammatory or neoplastic changes were noted. Ureteral papillae were normal.

The prostate was enlarged and heterogeneous, measuring 2.5 cm. Pre- and post-prostatic urethra were unremarkable. The prostate measured 5.8 cm with multifocal areas of mineralization and nodular changes.

The **kidneys** revealed largely normal size and structure, corticomedullary definition and ratio (cortex 1/3 of medulla) were essentially maintained with some age-related loss of curvilinear patterns regarding the capsule and C/M junction. The cortices presented largely uniform texture with some increased echogenicity expected for his age patient. Medullary structure differed distinctly from that of the cortex and no evidence of pelvic dilation was present. The left kidney measured 7.54 cm.

Adrenal Glands

Both **adrenal glands** were visualized and recognized as having largely normal shape, size, position and acceptable echogenicity for this age group and breed. Some heterogeneity was noted within the adrenal parenchyma without concerning capsular distortion. These changes are likely age related but should be monitored by sonogram should the patient be suspected of having adrenal disease. The right adrenal gland measured 3.27 cm x 0.88 cm at the caudal pole and 0.74 cm at the cranial pole. The left adrenal gland measured 3.31 cm x 0.79 cm at the caudal pole and 0.73 cm at the cranial pole.

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 were noted.

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

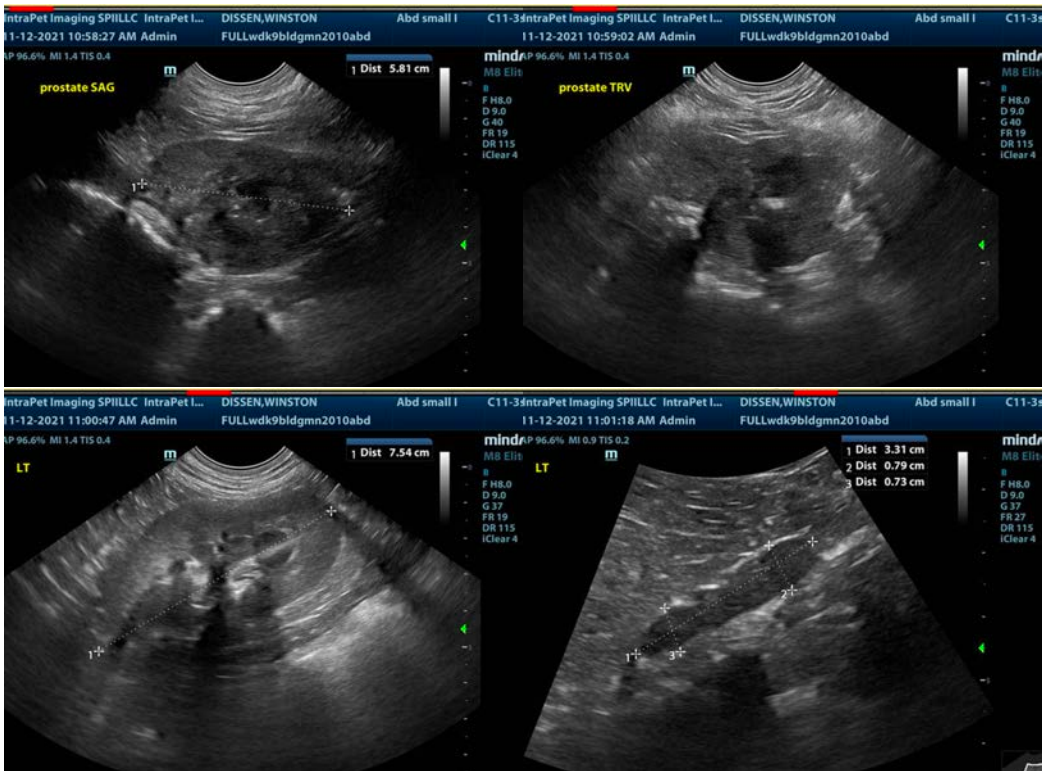
The base and limbs of the **pancreas** were observed to be largely isoechoic to surrounding omental fat. Pancreatic duct and capsular contour were acceptably normal and parenchyma respected normal curvilinear patterns. No overt evidence of active inflammatory or neoplastic disease was noted.

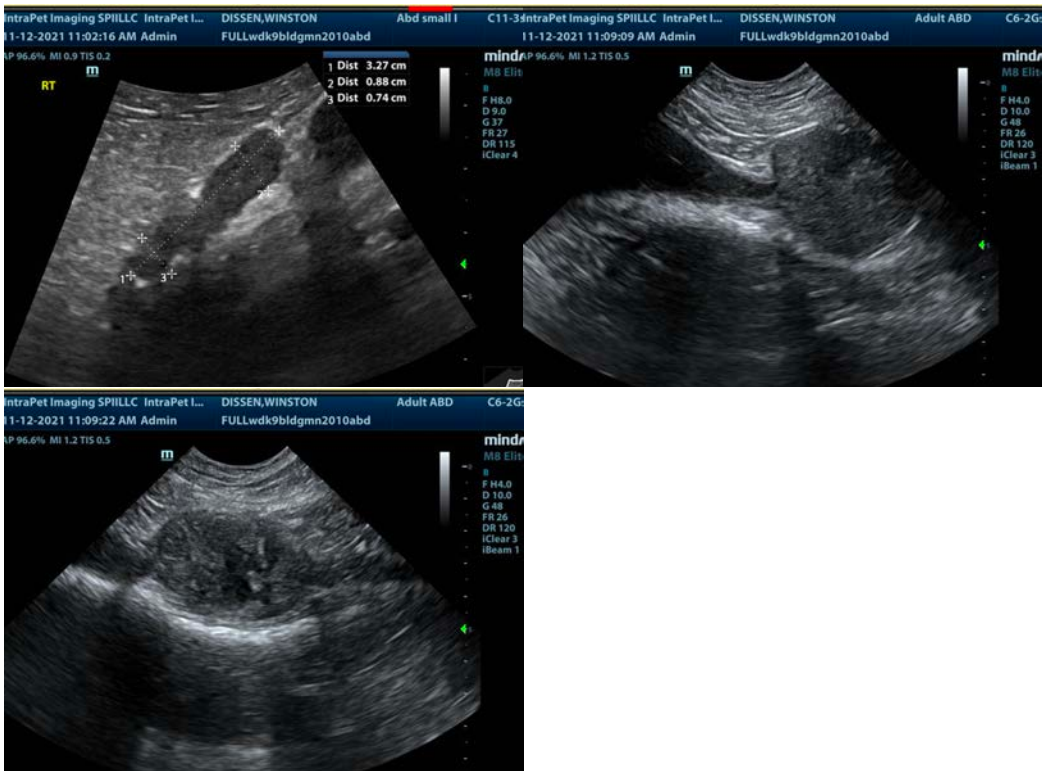
ULTRASONOGRAPHIC FINDINGS

- Prostatic enlargement with mineralization – strongly suggestive for prostatic carcinoma
- Age related adrenal glands
- Unremarkable abdomen otherwise

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

Traumatic catheterization or ultrasound guided FNA of the prostate recommended to confirm. From a diagnostic standpoint, FNA would be ideal given that traumatic catheterization may not allow for definitive diagnosis given that there is minimal urethra involvement.





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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