



PATIENT

Jerome Shaw

PRESENTING CLINICAL SIGNS

Possible mass/fluid in caudal abdomen - taken to ER on 12/26 for lethargy, performed rads there
Abnormal PE/Chem/CBC/UA Results: Pending

SPECIES

Canine

Radiographs: Mild splenomegaly and slight irregular contour. Minor excessive upper GI gas.

BREED

Portuguese Water Dog

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** revealed a moderate amount of debris.

SEX

Male

The prostate was enlarged, nodular, irregular, and edematous, measuring 5.0 cm, consistent with prostatitis and cystic content. Possible abscessation. The right cranial lobe measured 1.5 cm. Other microcystic changes also noted. The prostate was significantly vascular upon color flow assessment. Enhanced surrounding fat present.

AGE

5 Years

A reactive, cystic iliac lymph node was noted.

WEIGHT

51.1 Pounds

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 and no evidence of pelvic dilation was present. The capsules were acceptably uniform without significant irregularities. The right kidney measured 6.55 cm. The left kidney measured 6.37 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 left adrenal gland measured 2.57 cm x 0.58 cm at the caudal pole and 0.55 cm at the cranial pole. The right adrenal gland measured 3.48 cm x 0.48 cm at the caudal pole and 1.21 cm at the cranial pole.

IMAGING PERFORMED BY

Jessica Miller

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.

HOSPITAL NAME

Millburn Vet Hospital

Liver

REFERRING VET

Dr. Turowsky

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.

INVOICE

33780

Gastrointestinal

DATE

12/28/21

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



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demonstrated normal luminal chyme and stool consistency respectively. No obstructive or overt infiltrative disease was noted. No associated abnormal lymphatic activity was noted.

Pancreas

SPECIES

Canine

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.

BREED

Portuguese Water Dog

Other

The testicles were imaged and found to be uniform.

ULTRASONOGRAPHIC FINDINGS

SEX

Male

- Enlarged prostate with cysts and probable abscessation – prostatitis presentation, mild potential for underlying neoplasia.

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

5 Years

Recommend neutering with ultrasound guided FNA of the prostate as well as drainage +/- antibiotic injection into the cystic component/abscess. Urine culture and sensitivity also indicated. Direct neutering and treatment for prostatitis could be considered. However, the abscessation may not resolve with medical management alone. If this is to be selected, then recheck sonogram recommended one week post neutering. Enrofloxacin is the recommended antibiotic in this type of presentation unless culture results indicate that a different antibiotic is necessary. Enrofloxacin and Sulfa antibiotics are best for penetration into the prostate. It is likely that the prostate is responsible for the clinical signs. No evidence of masses.

WEIGHT

51.1 Pounds

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Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Jessica Miller

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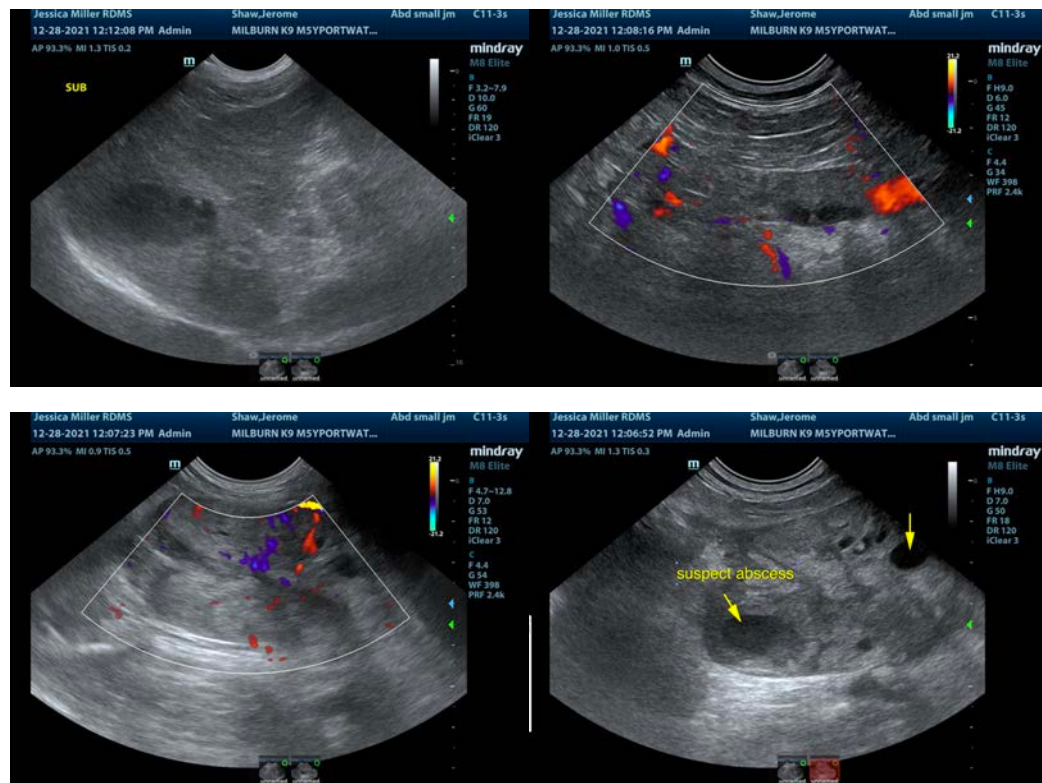
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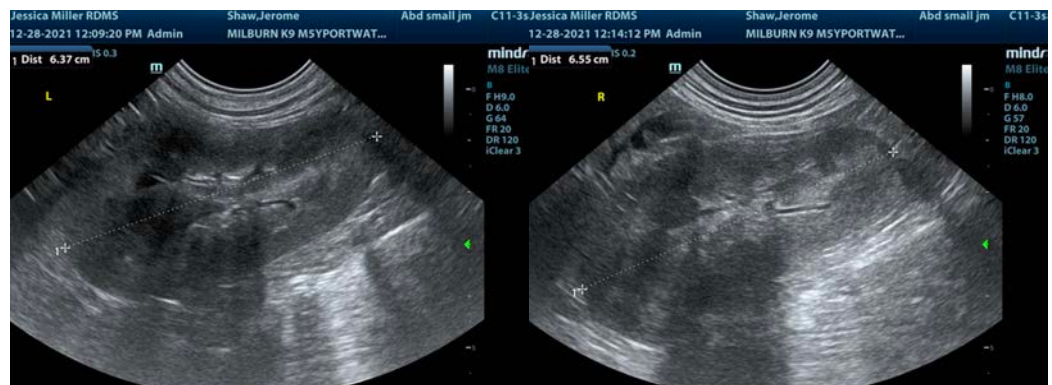
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

Eric Lindquist, DMV, DABVP, Cert. IVUSS, CEO of SonoPath.com
info@SonoPath.com