



PATIENT

Hermes Lorente
Adolfina

SPECIES

Canine

BREED

Mixed GS

SEX

Intact Male

AGE

7 Years

WEIGHT

28.7

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Doctor Valentina

HOSPITAL NAME

The Veterinary Surgery

REFERRING VET

Valentina Fresta

INVOICE

21869

DATE

4/5/23

PRESENTING CLINICAL SIGNS

History: Presented for a relapse of skin itchiness as the dog is affected by Leishmania Infantum . The pruritus is localized in the ventral part of the neck only. Otherwise eating and drinking well. Faeces are normal. Hermes is very happy in himself At the clinical presentation the patient is BAR.MMC are pink.HR 120 RR 25.Heart and lung sound clear. Prescapular and politeum lymphones are moderately enlarged .Abdomen soft and no discomfort is obvious .Skin desquamation is obvious on the internal part of the auricula pinna, however the ear's canal is fine. Also few areas of hyperkeratosis on the anterior paws.

Abnormal PE/Chem/CBC/UA Results: The CBC and minichemistry reveals parameters in the normal average.

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 severely enlarged (5.5 cm) with heterogenous parenchymal changes. NO evidence of abscessation, however, microcystic changes were present.

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 left kidney measured 6.1 cm. The right kidney measured 6.1 cm.

Adrenal Glands

The **left adrenal gland** was 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 0.4 cm.

The region of the **right adrenal gland** was imaged and revealed no evident pathology.

Spleen

The **spleen** was mildly enlarged and revealed minor heterogenous parenchyma changes with uniform contour. Caudal folding of the spleen was 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



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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.

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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.

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Free Abdomen

The iliac **lymph nodes** (up to 1.35 cm in width) presented normal length to width ratio with slight, swollen contour. There was no loss of parenchymal detail. This is most consistent with reactive lymphadenitis or lymphatic hyperplasia.

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ULTRASONOGRAPHIC FINDINGS

- BPH prostate
- Reactive iliac lymph nodes
- Micronodular spleen, likely reactive spleen or splenitis, minor potential for emerging round cell neoplasia or may be related to leishmania history.

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

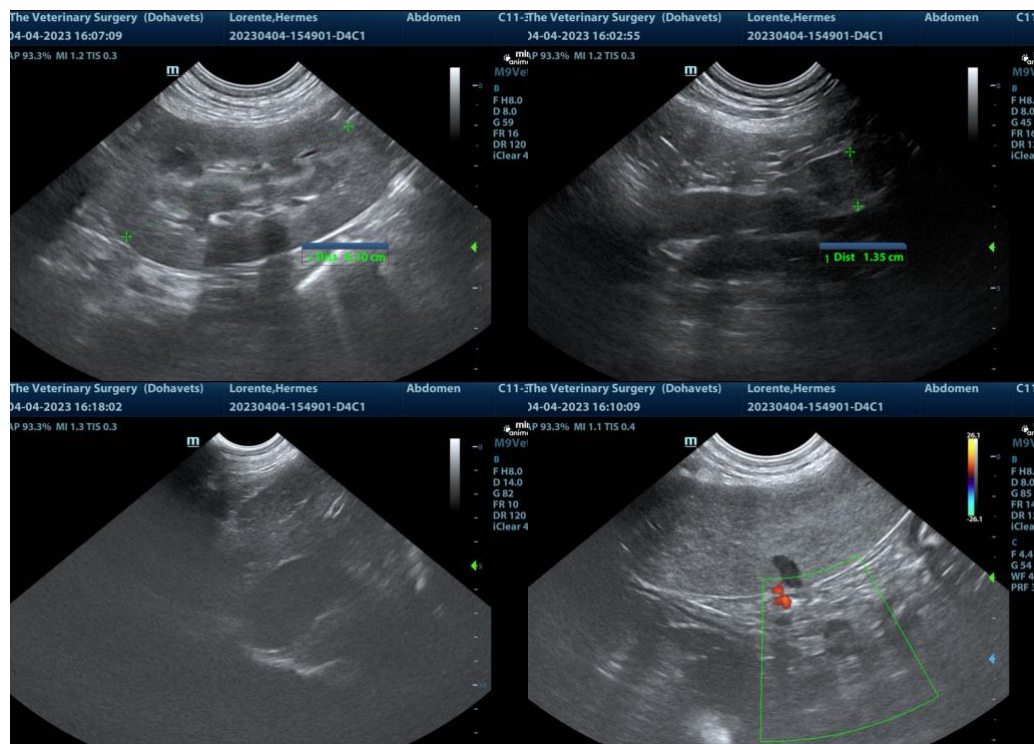
Neutering should be considered in this patient, if any clinical signs of prostatic disease are present. FNAs of the spleen is indicated.

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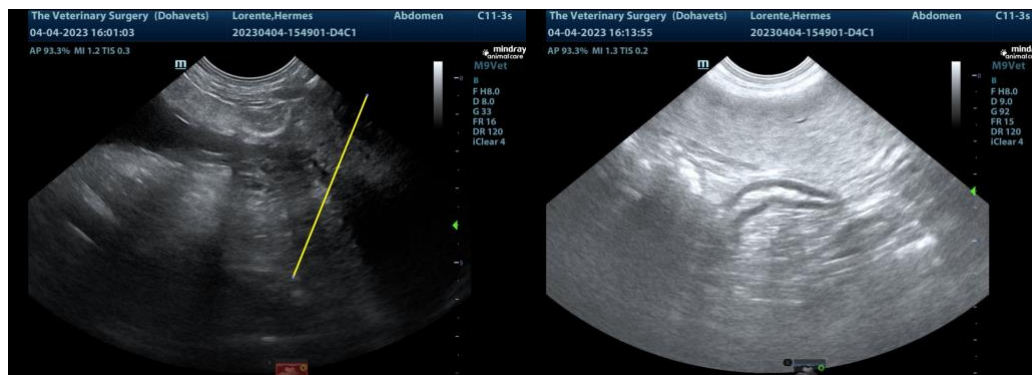
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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