



PATIENT

Anaya Smith

PRESENTING CLINICAL SIGNS

Stranguria.

SPECIES

Canine

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

BREED

Rottweiler

The **urinary bladder** revealed an apical ventral mass measuring 2.5 cm with mineralization. The urethra appeared to be free of evident pathology. However, poor tone appeared to be subjectively present with dilation of the urethra. The urethra was visualized to 3.0 cm caudal to the cystourethral junction. I cannot completely rule out a distal urethral polyp or mass that may be causing obstruction.

SEX

Female

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 right kidney measured 6.32 cm. The left kidney measured 6.6 cm.

AGE

9

WEIGHT

90.5

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 3.26 cm x 0.90 cm at the cranial pole and 0.70 cm at the caudal pole.

INTERPRETED BY

Eric Lindquist, DMV

The **right adrenal gland** was not visualized.

DABVP, Cert. IVUSS

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.

IMAGING PERFORMED BY

Jenn

HOSPITAL NAME

Rockaway AH

Liver

The **liver** images from right and left intercostal as well as subcostal views revealed subjectively normal liver size, contour, and structure. Some age-related parenchymal remodeling was noted but likely not clinically significant at this time. Vascular and biliary tracts were of normal volume and no evidence of congestion was noted. The gallbladder presented some dependent debris with essentially normal contour. The cystic and common bile ducts were normal. No overt evidence of active inflammatory, infiltrative or regenerative pathology was noted but should be paired with current or past LE elevations regarding any clinical significance to this presentation. The hepatic lymph nodes were unremarkable.

REFERRING VET

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Gastrointestinal

There was some residual chyme and gas was noted in the **stomach**, yet not pathological. This is consistent with end post prandial presentation. Transit of chyme into the small intestine was normal. Curvilinear patterns were maintained throughout the GI tract. No evidence of pathology. 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.



PATIENT

Pancreas

Anaya Smith

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.

SPECIES

Canine

ULTRASONOGRAPHIC FINDINGS

BREED

Rottweiler

- Apical ventral bladder mass – likely bladder carcinoma.
- Partially full stomach
- Age related renal and hepatic changes

SEX

Female

INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

AGE

9

The bladder mass appears resectable. No obvious metastatic disease to the level of the deep pelvic urethra. Surgical intervention warranted. Examination of the vaginal vestibule recommended to ensure the distal urethral pathology is not concurrently present. Cystoscopy could also be considered for further definition and biopsy, as well as review of the last two cm of the pelvic urethra.

WEIGHT

90.5

INTERPRETED BY

Eric Lindquist, DMV

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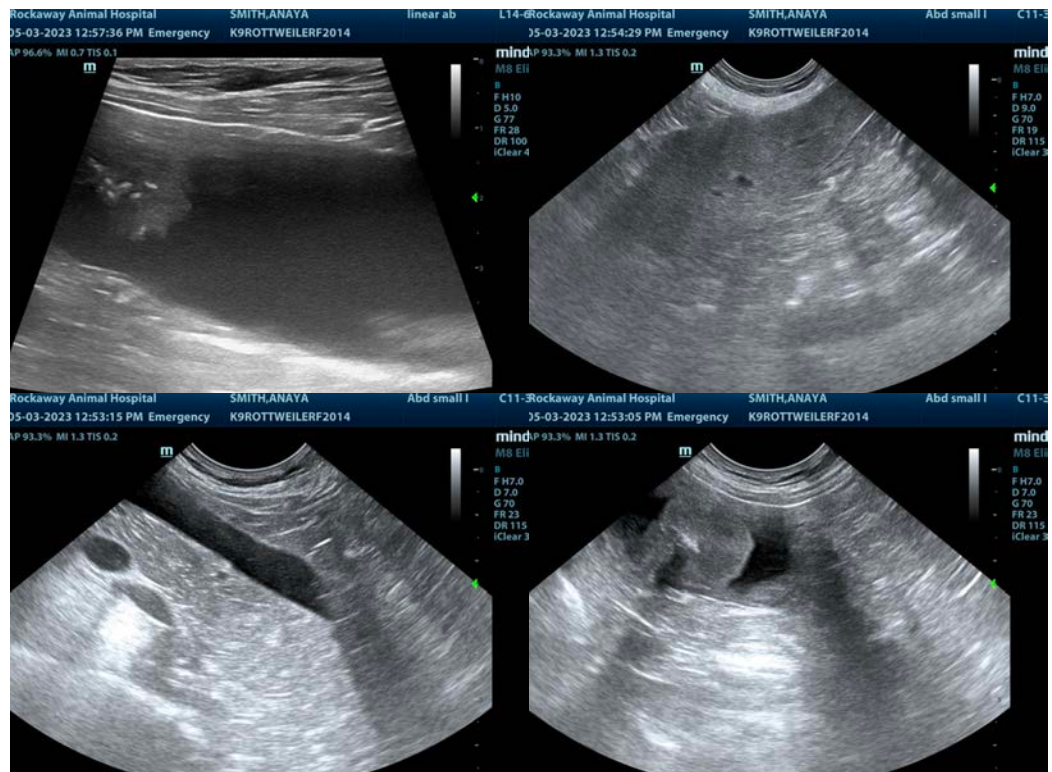
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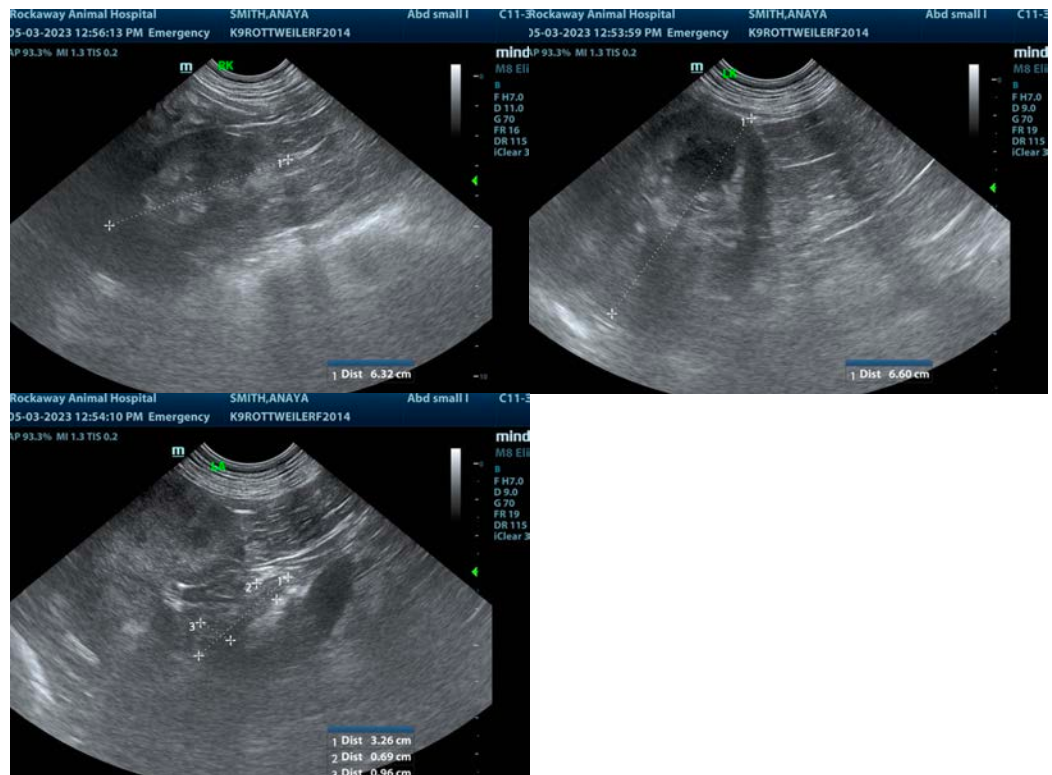
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The information and recommendations provided are based on the images presented by the referring veterinarian/sonographer. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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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