



**PATIENT PRESENTING CLINICAL SIGNS**

Riley Osborne Not eating, vomiting, diarrhea. Probable enlarged prostate on rectal exam. Current meds: Metronidazole, Pro-pectalin  
**SPECIES** Abnormal PE/Chem/CBC/UA Results: 8/6/21 rDVM: Lyme +, WBC 20.99, Neuts 18.6. Today's bw pending.

Canine

**ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN**

**BREED Urinary System**

Mix

The **urinary bladder** revealed a concentric wall thickening at the cystourethral junction, continuing into the prostate. The prostate was enlarged at 2.03 cm with heterogeneous changes and pericapsular inflammatory pattern, strongly concerning for prostatic neoplasia/carcinoma. The remainder of the bladder revealed minor thickening. A focal mineralization was noted in the prostate as well, as well as active inflammation in the region.

**SEX**

Neutered Male

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 5.42 cm. The left kidney measured 4.97 cm.

**AGE**

11 Years

**WEIGHT**

22.7 Pounds

**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 1.67 cm x 0.56 cm at the cranial pole and 0.6 cm at the caudal pole. The right adrenal gland measured 2.6 cm x 1.3 cm at the cranial pole and 0.48 cm at the caudal pole.

**INTERPRETED BY**

Eric Lindquist, DMV  
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**

Shari Reffi, CVT

**HOSPITAL NAME**

Newton Vet Hospital

**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**

Dr. Kim

**INVOICE**

24737

**Gastrointestinal**

**DATE**

8/16/21

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



**PATIENT**

Riley Osborne

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**

Mix

**ULTRASONOGRAPHIC FINDINGS**

- Prostatic mass measuring into the cystourethral junction, strongly concerning for prostatic carcinoma
- Geriatric abdomen otherwise

**SEX**

Neutered Male

**INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS**

Ultrasound guided FNA of the mass could be considered with minor potential for trailing, or traumatic catheterization with ultrasound guided cytology. Prognosis is guarded depending upon cytology results. Chronic prostatitis possible, yet less likely. Structurally the GI tract was unremarkable. GI supportive protocol should prove effective.

**AGE**

11 Years

**WEIGHT**

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**REFERRING VET**

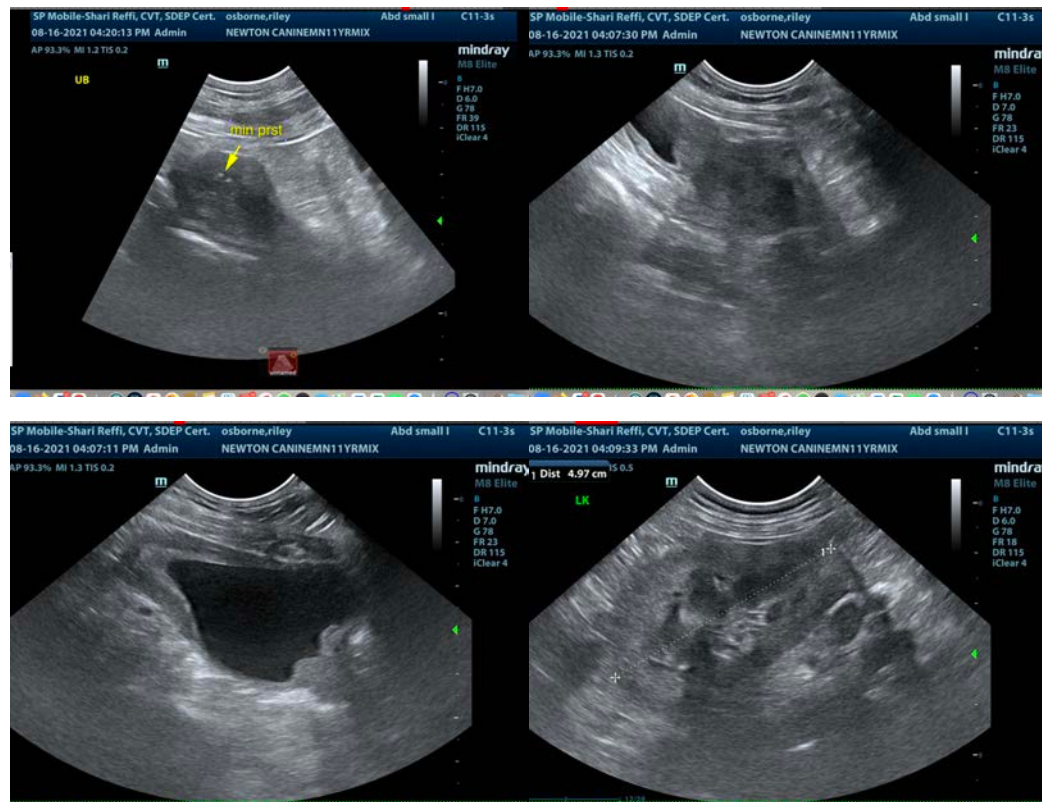
Dr. Kim

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**DATE**

8/16/21





**PATIENT**

Riley Osborne

**SPECIES**

Canine

**BREED**

Mix

**SEX**

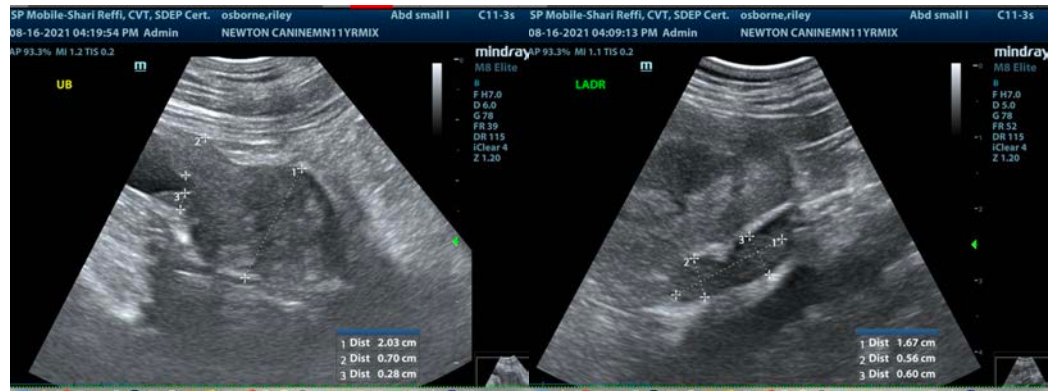
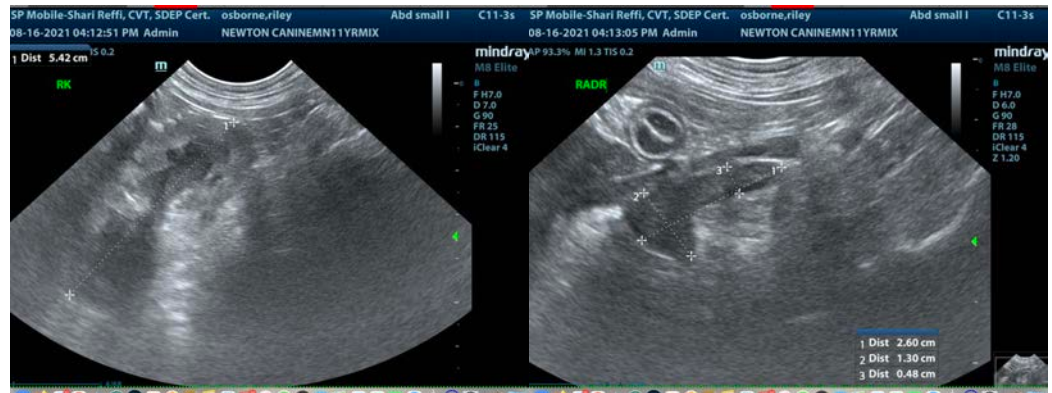
Neutered Male

**AGE**

11 Years

**WEIGHT**

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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  
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