



PATIENT

Santiago Ramos

SPECIES

Canine

BREED

Labrador Retriever

SEX

Neutered Male

AGE

4 Years

WEIGHT

72 Pounds

INTERPRETED BY

Eric Lindquist, DMV
DABVP, Cert. IVUSS

IMAGING PERFORMED BY

Dr. G. Ferrer, DVM

HOSPITAL NAME

Paseos VC

REFERRING VET

Dr. Ricardo Carrasquillo

INVOICE

17341

DATE

9/17/22

PRESENTING CLINICAL SIGNS

History: Presented for an abdominal ultrasound as pt is depressed and lethargic. that started on 9-16-22. Pt has a history of Immune Mediated Thrombocytopenia and has been on several medications, but the thrombocytopenia doesn't seem to be improving. Pt is currently on prednisone 50mgL 1/2 BID Azathioprine 50mg: 2 tablets SID, Atopica 100: 1 tablet BID. (started 9-16-22) Doxycycline po sid x 28d . After noticing UTI started today 9-17-22 Enrofloxacin 136: 2 tablets SID

Abnormal PE/Chem/CBC/UA Results: CBC results 9-16-22 RBC 3.51, HCT 22.4%, HGB 7.8, LYM 0.80, EOS 0, PLT 30, PCT 0.05% CHEM results ALKP > 2000 U/L, ALT 431 U/L, GGT 207 U/L, AMYL 238 U/L UA: 9-17-22 results RCB 16 /uL, WBC > 500 /uL, Bacteria-rods +, Bacteria cocci + + + +, SG 1.012

ULTRASONOGRAPHIC EXAMINATION OF THE ABDOMEN

Urinary System

The **urinary bladder** was overdistended with suspended and dependent debris. Incomplete voiding may be an issue. Bladder wall thickness was normal. The pelvic urethra was imaged 2.0 cm beyond the cystourethral junction. The residual prostate measured 2.0 cm.

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. Pyelectasia (5.0 mm) was noted in the right kidney with echogenic debris. The capsules were acceptably uniform without significant irregularities. The right kidney measured 7.18 cm. The left kidney measured 7.0 cm.

Adrenal Glands

Subjectively, the **adrenal glands** appear subnormal in contour, however, this is likely owing to the prednisone therapy. However, underlying occult Addisons cannot be ruled out. The left adrenal gland measured 0.46 cm. The right adrenal gland measured 1.88 cm x 0.6 cm.

Spleen

The **spleen** was mildly enlarged yet uniform. Reactive spleen is likely.

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



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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

- Chronic UTI bladder pattern
- Pyelectasia in the right kidney, suggestive for mild pyelonephritis
- Mildly enlarged spleen
- Adrenal glands were subnormal in contour

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INTERPRETATION OF THE FINDINGS & FURTHER RECOMMENDATIONS

SEX

4-6 week antibiotic therapy is likely necessary based on culture results.

Neutered Male

Chronic UTI Protocol

AGE

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I recommend **Enrofloxacin** (5-10 mg/kg SID PO) (In patients > 1 year of age) in late pm after urination to maximize urinary concentrations overnight. This assumes that culture supports this use. Repeat **culture** at 3-4 weeks and continue treatment at least 7-10 days post negative urinary sediment and negative culture. *Note: Negative culture does not necessarily mean lack of UTI.* Other favorite antibiotics for chronic UTI include third generation Cefa (Ceftiafur or similar s.i.d. injectable) or Clavamox. If suspicion of occult urinary incontinence is present then **phenylpropanolamine (PPA)** (1-2 mg/kg BID) can be employed long term to enhance urethral tone.

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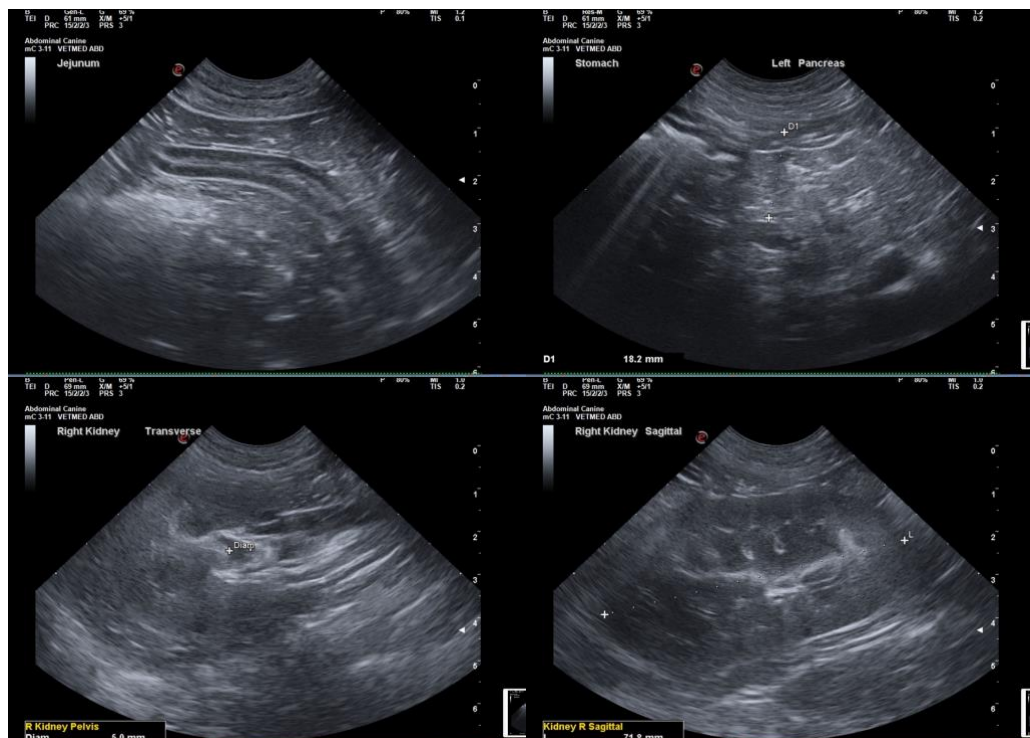
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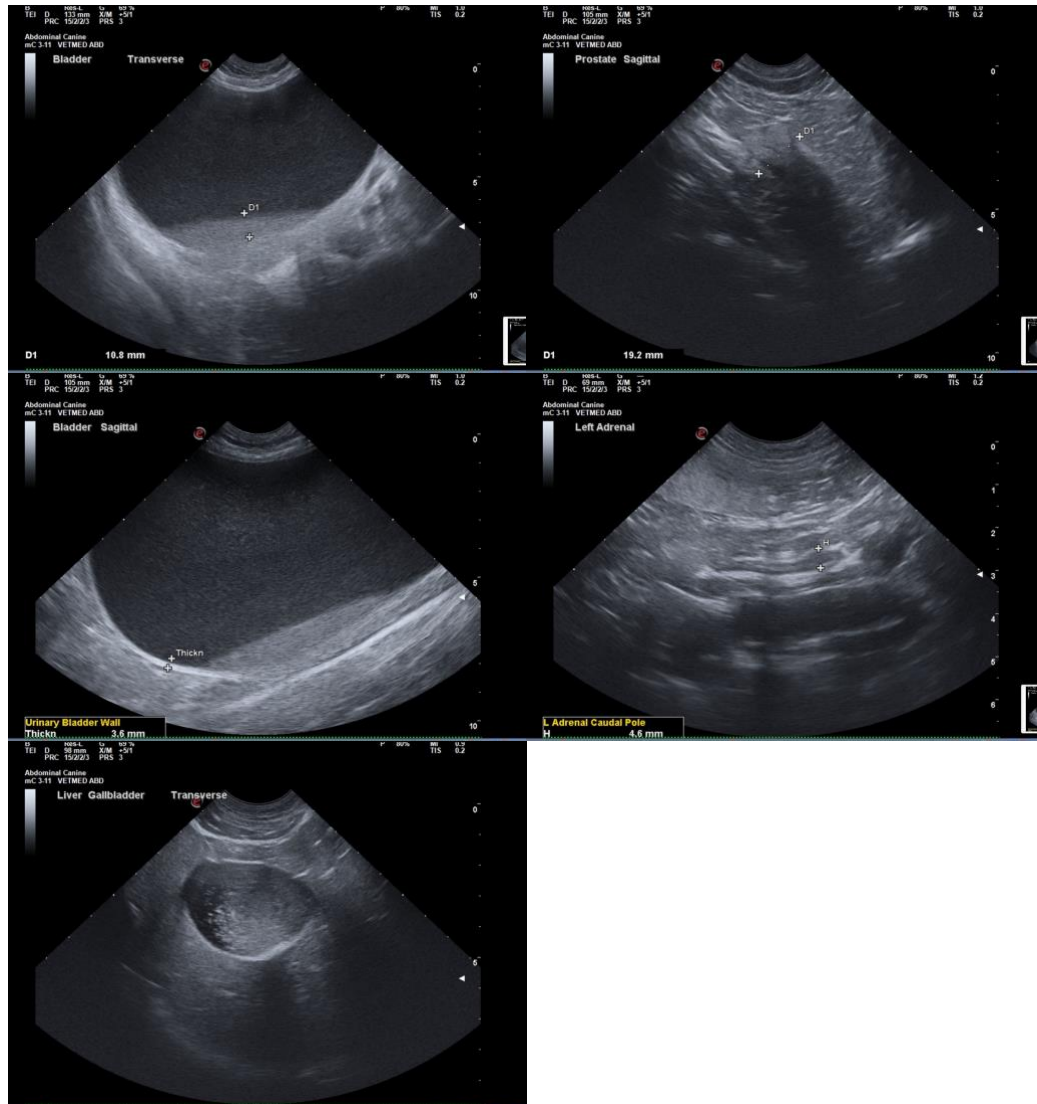
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The information and recommendations provided are based on the images presented by the referring veterinarian. No evaluation can be communicated regarding pathology that was not visible in the image/video clips provided.

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.

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info@SonoPath.com